

PERIODIC QUALITY REVIEW

SELF-EVALUATION REPORT (SER)

GUIDELINES & TEMPLATE

PROFESSIONAL SERVICE UNITS



*“By embedding a strong quality-enhancement ethos, we will use our quality processes to ensure a culture and experience of best practice in the delivery of our academic mission, demonstrating our commitment to continuous evolution and improvement”*

(UCC’s Strategic Plan 2017-2022, p.23)

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## Introduction

As an autonomous degree awarding body, UCC is responsible for and committed to, enhancing the quality of all education and training, research and services provided. Periodic quality review is

undertaken in support of its objectives for quality enhancement, by engaging units<sup>1</sup> in a process of self-evaluation leading to a review by an expert peer review panel. The University's Quality Enhancement Committee (QEC), which is chaired by the President, is responsible for oversight of the University's quality processes which are developed and implemented through the Quality Enhancement Unit.

### What do we mean by quality enhancement?

An enhancement ethos both challenges and supports the systematic examination of what we do as a University to enable excellence in serving learners, stakeholders and our wider community in terms of our education, research and other activities. Our approach to quality is founded on openness, systematic self-evaluation, engagement with peer review processes and a commitment to enhancement-based outcomes that are responsive, creative, enabling and student-centred.

In our quality enhancement approach, we are committed to:

- Building and embedding a culture of quality which is engaged, reflective and connected
- Working collaboratively to develop effective evaluation approaches that allow critical reflection on achievement of strategic goals and objectives and an appraisal of the known and anticipated needs of stakeholders
- Engaging students as active partners in the quality enhancement process to embed a student-centred approach
- Developing quality processes that promote creativity, excellence and innovation
- Using peer review as an important reference point for confirming and developing the quality of the University's activities
- Undertaking institutional reflection on the outcomes of quality review processes to contribute to on-going institutional planning, resource allocation and institutional development
- Ensuring that quality processes facilitate the sharing of good practice internally and externally

Developing our evidenced-based approach to quality enhancement informed by relevant research and good practice nationally and internationally.

### Principles of Peer Review at UCC

#### *Integrity*

The integrity of peer review is of paramount importance. This means that any personal interests as a reviewer must never influence, or be seen to influence, the outcome. We would consider conflicts of interest arising, for example, where a relationship exists between the peer reviewer and the Unit, or individuals within the Unit engaging in review e.g. a family relationship; an academic/employment relationship; or an acquaintance/friendship with a member of the Unit engaging in review. All reviewers will be required to read and sign a Conflict of Interest Form making a declaration of their interests.

#### *Transparency*

The QEU strives for openness and transparency in all of its activities through making available information to stakeholders in relation to its processes and procedures, this fostering trust, sincerity,

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<sup>1</sup> Unit is used to refer to the Department, School, Office or Unit engaging in review

honesty and professionalism.

### *Objectivity*

The QEU's primary role is enabling the implementing the University's Quality Enhancement policy. As a conduit for organising and supporting the University's quality review process, the QEU remains objective and independent, treading the line of support for both the conduct of the Review process and for the Unit engaging in review.

### *Confidentiality*

Confidentiality throughout the process, both for the University and the Unit engaging in review, is central to maintaining trust in the peer review process. Documents, including the Self-Evaluation Report (SER) and other sensitive information, may be shared with panel members.

### *Anonymity*

Principles of anonymity underpin peer review at UCC. Care will be taken in the Panel Report that individuals (either panel members or members of the Unit) are not identified. The QEU follows GDPR (General Data Protection Regulation) principles and guidelines around the use and storage of personal information for all agents involved in the Quality Review process.

### *Inclusivity*

UCC is committed to fostering an inclusive environment that mainstreams diversity and equality; the QEU operates a fully inclusive policy in relation to all of its activity and will ensure equal opportunity for access by all participants.

## Self-Evaluation Guidelines

### Quality Review at UCC

UCC's overarching policy for quality enhancement emphasises the purpose of quality processes in supporting delivery of the academic mission of UCC based on an ethos of ongoing improvement and evaluation across all its activities. The policy is consistent with Quality and Qualifications Ireland's (QQI) Statutory Quality Assurance Guidelines (2016)<sup>2</sup> and the Standards and Guidelines for Quality Assurance (ESG) in the European Higher Education Area (2015)<sup>3</sup>. The process adheres to the four-stage model for review set out in the ESG. This model is as follows:



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<sup>2</sup> Quality Qualification Ireland's quality assurance guidelines can be accessed at <https://www.qqi.ie/Downloads/Core%20Statutory%20Quality%20Assurance%20Guidelines.pdf>

<sup>3</sup> The European Standards and Guidelines can be accessed at [http://www.enqa.eu/wp-content/uploads/2015/11/ESG\\_2015.pdf](http://www.enqa.eu/wp-content/uploads/2015/11/ESG_2015.pdf)

The first stage is Self-Evaluation which is discussed in these guidelines.

The Site Visit which will be undertaken by the Peer Review Panel constitutes the second stage.

### Peer Review Panel

The Peer Review Panel comprises of typically 5-6 members drawn from the University and external specialists from other higher education institutions and from business and/or the professions. Secretariat support is provided to the Panel throughout the review by a member of the QEU.

### *Quality Enhancement and Student Engagement*

The UCC model of quality review encourages self-evaluation on the quality of the student learning experience and academic standards, with an enhancement emphasis. In addition to the Review Panels meeting students of a Unit (where appropriate), the QEU advances UCC's commitment to student engagement by including a student reviewer on all Review Panels. The student reviewer is a full member of the Panel and this valuable student contribution is acknowledged by awarding a "Quality Peer Reviewer" Digital Badge to students to mark their participation.

### *Process for Nominating the External Peer Reviewers*

The process of nominating external expert peer reviewers relies on a robust set of appointment criteria and a clear policy regarding conflict of interest. Initially, the QEU will ask the Unit engaging in review to provide a long list of between six and ten names of potential reviewers, depending on its size.

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

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

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

- Recently (in the last five years) acted as external examiner at UCC
- Recently or currently acting as a consultant or adviser to the Unit engaging in review
- Any relationship with the Unit engaging in review or its staff that could prejudice independence (including family or personal relationships with any member of the Unit engaging in review)

- Current partners in research collaborations or projects within the Unit engaging in review

Please refer to the full list of criteria considered as a conflict outlined in the [Conflict of Interest](#) form on the QEU website.

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

Reviewers will then be invited to participate in the review by the QEU. Other suitable nominations will be used should any of the initially selected nominations are unable to participate.

The final panel will be communicated to the Unit engaging in review for information prior to the review.

## Panel Report

The outcome of the review process is a report that will highlight areas of good practice and make recommendations for further development. UCC's Quality Enhancement Committee (QEC) will receive and consider the report of the Peer Review Panel. The reviews will provide information that can be used to:

- enable units to identify future directions, needs and practices;
- assist in the dissemination of good practice;
- help units to recognise and respond to strengths and areas for development;
- assist units in assessing their relationships with, and contributions to, other areas within the University;
- provide a common framework for discussion across the University on academic standards, activities and relevant matters and developments;
- inform the strategic plans of units, Colleges and the University.

In line with the primary objective of quality enhancement, the process aims to encourage open dialogue of the key issues identified by the Unit and the Peer Review Panel, leading to confirmation of good practice and identification of recommendations for the future development of the Unit.

The Unit will be asked to complete a S.M.A.R.T. [Quality Enhancement Plan](#) to address the recommendations contained in the Panel Report. This consists of outlining the follow-up steps that will be taken written so that they are Specific, Measurable, Actionable, Realistic and Timely. Each action in the plan should give a target date or timeframe for when it will be completed by, identify who will be responsible/leading it and what will be done against each of the recommendations made in the Panel Report.

## Role of the Quality Enhancement Unit (QEU)

The role of the Quality Enhancement Unit is to facilitate effective periodic quality review as part of a wider culture of quality enhancement within the University. QEU is responsible for ensuring all logistical arrangements surrounding the review, including the approval of peer reviewers, appointment of the Peer Review Panel, supporting the development of the Panel Report, the submission of a QEP and its implementation progress through the Follow-up stage.

A Review Co-ordinator from the QEU will be appointed to work with units on all aspects of the periodic review, from initiation through post-review activities including the enhancement planning and follow-up. Throughout the self-evaluation phase the Review Co-ordinator will liaise with the Unit Self-Evaluation Committee to support and enable its work on the SER. The Review Co-ordinator will be a source of advice, liaison, and facilitation for the Unit engaging in review and will ensure access to relevant information and resources throughout.

The Review Co-ordinator will liaise with both the Unit and the Peer Review Panel on the composition of the timetable for the site visit. Following the site visit, the Review Co-ordinator will work with the Peer Review Panel to ensure that the Panel Report is completed in a timely fashion.

### Role of the Unit Self-Evaluation Committee

In preparing for Quality Review units should appoint a Self-Evaluation Committee responsible for coordinating the Self-Evaluation process and writing the Self-Evaluation Report. The committee should be representative of all staff in a unit and may also include a student/user representative, as appropriate. Ideally, the committee should be an operational one and should meet frequently. All staff members should be kept fully informed about the self-evaluation process and encouraged to contribute their views.

The Unit Self-Evaluation Committee should liaise with the reporting line manager (Head of College/UMT member) throughout the process to discuss the Unit's self-evaluation progress. The SER should be approved by the reporting line manager before submission to QEU.

Please see the *Terms of Reference for the Self-Evaluation Committee* on the QEU website [Guidelines | University College Cork \(ucc.ie\)](#) for further details.



## What is Self-Evaluation?

The overarching objectives of periodic quality review at UCC are to enable Units, through evidence-based self-evaluation, to:

1. Reflect on and promote the strategic enhancement of their activities (enhancement dimension).
2. Evaluate the effectiveness of their processes for assuring maintenance of standards and service provision, in line with the University's academic mission and strategy (assurance dimension).

Self-evaluation is a systematic examination and analysis by a unit of its overall objectives and activities that generates key management information to enable its evaluation of overall quality. It provides an evaluation of a unit's performance of its functions, its services, and its administration. At the end of this stage of the process a unit will have an agreed statement of its purposes, a description and assessment of its work and a map for its future development. The outcomes of self-evaluation lead to the identification of areas for enhancement (expressed as recommendations) and good practice (Case Study) which are presented in the Self-Evaluation Report.

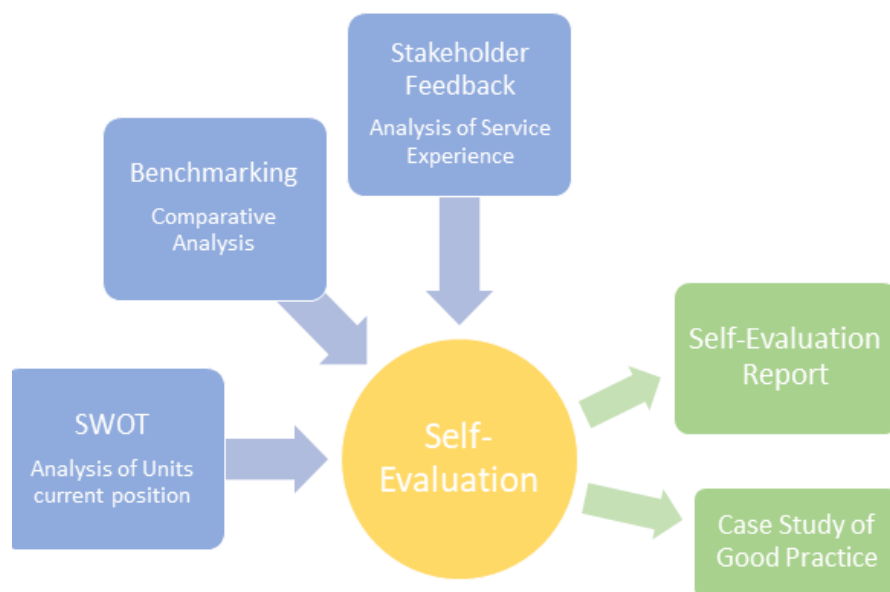
During self-evaluation the Unit's analysis of its activities is guided by consideration of the following four basic questions, namely:

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

The principal tools which support the self-evaluation process are:

- SWOT analysis
- Benchmarking
- Stakeholder feedback

The process of self-evaluation also considers good practice which is outlined analytically in a Case Study of Good Practice.



The process of self-evaluation acts as a stimulus and is based on active reflection, consultation and the appraisal of effectiveness by means of consistent reliance on evidence-based analysis. Self-evaluation provides opportunities for reflection and consultation, within the Unit and with key stakeholders, enabling a unit to plan and manage strategically, and to align development plans with those of the wider university. Since the primary goal of the process is quality enhancement, the recommendations for improving the work of a unit are a cornerstone of the SER. The SER provides essential analytical information to form the basis of discussion with the Peer Review Panel and to aid in the production of the final review report.

## The Self-Evaluation Report (SER)

### *Focus of the SER*

#### The Self-Evaluation Report:

- presents detailed information about the Unit, and the collective perception of staff and students (as appropriate) of their role not only in the university but, where appropriate, in the international community and in the social, cultural and economic development of Ireland.
- presents a succinct but comprehensive statement of a unit's strategic objectives.
- shows the quality systems and processes which are already in place and permits an assessment of their effectiveness.
- provides a comprehensive self-critical analysis of a unit's activities, including inter/national benchmarking.
- helps units to identify and analyse its strengths, weaknesses, opportunities and threats.
- assists units to identify recommendations for further action.
- provides a quality enhancement framework for units.

Self-evaluation should be supported by qualitative and quantitative data, and units are encouraged to reflect on the use of routine operational data to inform the analysis, coupled with the targeted

collection of data analysis. Additionally, units should undertake a SWOT analysis, stakeholder analysis, a benchmarking exercise and a Case Study of Good Practice as part of their self-evaluation.

#### *Format of the SER*

The SER should be no longer than **30 pages**, excluding appendices, and may be accompanied by additional documentation as deemed necessary to give the reviewers a complete picture of a unit and its activities. Where units engaging in review encompass a wide range of disciplines/services delivered by two or more distinct sub-units/departments, advice should be sought from Quality Enhancement Unit on the detailed format of the SER.

The SER should be sent to the Head of Function (Head of College/UMT member) for approval in advance of submission to the QEU. The SER should be submitted to the Quality Enhancement Unit in electronic format, **eight weeks** before the review is scheduled to take place.

#### *Customised Supports for Units engaging in review*

In line with the University's objective of enabling a quality enhancement culture and ethos which is engaged, connected and reflective, the QEU has introduced a series of customised supports for Units preparing for review. Table 1 in Appendix L below provides an indication of the supports available to Units engaging in review throughout the process.

# Self-Evaluation Report Template

## Joint Head of Function and Head of Unit Declaration Sheet

Please insert at the outset of the Unit's Self-evaluation Report a declaration sheet indicating that the document has been reviewed and approved by both the Head of Function and Head of the Unit engaging in review.

## Executive Summary

The Executive Summary should briefly introduce the Unit and provide a succinct summary and profile with an analysis of the key findings from the main body of the self-evaluation report.

The Executive Summary should include an evidence-based assessment of any developments and progress made by the Unit since the last periodic quality review cycle. The Unit should also present an evaluation of the challenges and opportunities it faces, and an outline of how the Unit plans to address them within the current quality review cycle.

## Recommendations for Enhancement

The Recommendations for Enhancement identified by the Unit are arguably the most important element of the self-evaluation process and are the natural result of the self-evaluation activities undertaken. These recommendations will be considered by the Panel and endorsed, if the Panel agree with them, or appropriate changes made based on the Panel's advice. These recommendations along with the Panel recommendations will form the basis for the Unit's future Quality Enhancement Plan.

## Self-Evaluation Analysis

The self-evaluation analysis should be informed throughout by **evidence**, which includes feedback from students, staff, external examiners, relevant stakeholders (e.g. industry, employers, work-placement providers, ...) service users and operational data used for managing and monitoring the service/function (see appendices at the end of this document for a breakdown of relevant data). It should also draw upon the outcomes from the SWOT and benchmarking activity. Note the appropriate ESGs are referenced throughout the document.

## Self-Evaluation Process

This section should introduce how the Unit undertook its self-evaluation, including details of how the process was led within the Unit, membership of the Self-Evaluation Committee (a full list of members should be included in Appendix G), approaches to staff engagement and involvement. It should also detail the approach to the SWOT and Benchmarking and provide an outline rationale for the choice of benchmark institutions and details of student and stakeholder evaluation and feedback (focus groups, surveys).

## Previous Quality Review

This section should provide an overview of the main Panel recommendations made during the last quality review and evaluate what recommendations were implemented, when, in which ways and to what extent; and what recommendations were not implemented and why. It would be advisable to include a table indicating the progress status of each recommendation. A full copy of the previous QR report should be included in Appendix D.

## SWOT

The purpose of the SWOT is to identify at a high level, **Strengths, Weaknesses, Opportunities and Threats** and to group relevant issues thematically to underpin the self-evaluation. All staff members should be included in the SWOT.

A SWOT Analysis is a useful exercise to undertake at the start of the review process as the outcomes will feed into the benchmarking exercise and the analysis for the SER. One very significant outcome of the SWOT is the preliminary drawing up of detailed and specific recommendations for improvement.

An overview of the staff consultation process needs to be provided (e.g., how and when the SWOT was run and the categories of staff that participated); the main outcomes of the SWOT analysis should be included in the main text. The full SWOT analysis can be included in Appendix F. The SWOT analysis should include all the activities of the Unit; this analysis will include an **examination of the challenges** and opportunities facing the Unit and **consideration of ways to address these**.

## Benchmarking

The purpose of benchmarking is to analyse the activities of a unit comparatively with similar functions in a comparable international university or other appropriate organisation. The Benchmarking Exercise should assist a unit in looking forward and planning where improvements should be focused. It is about having realistic aspirations and expectations, drawing comparisons with international institutions/units with practices and examples that a unit could reasonably aspire to following in UCC.

The rationale for the choice of benchmark institutions, the focus of the exercise and the main outcomes of the benchmarking activity should be considered here including the institutions benchmarked and the indicators examined. This section should include a systematic evaluation of the Unit's learnings from this comparative exercise and what changes the Unit could introduce as a result of benchmarking. The full details of the benchmarking exercise should be provided in Appendix G.

## Stakeholder Feedback

The perspectives of all key stakeholders - internal and external (inclusive of students if appropriate) - should be considered. This data may be gathered through surveys, focus groups or other consultative fora. Units are encouraged to discuss their ideas and approaches with the Quality Enhancement Unit.

The purpose of stakeholder consultation is to gather feedback from relevant stakeholders (e.g., employers and/or community partners/ collaborators) on the external perception of the Unit's engagement with the outer world and the quality of its activities. The outcome of this consultation will also converge into the SER and is likely to generate a number of specific recommendations and commendations.

The Unit should analyse stakeholder feedback in this section. Please give an outline list of all user groups and detail the services provided. If this information is large or complex, please insert it as Appendix H. The analysis should highlight service user and stakeholder feedback on both positive and challenging aspects of their experiences with the Unit; this analysis needs to include a consideration of ways in which the Unit plans to address the emerged issues and challenges.

### Good Practice Case study

Guidelines and template to develop a Good Practice Case Study can be found on the QEU website.<sup>4</sup> The Good Practice Case Study was introduced as a new initiative by the QEU in 2017 as an integral part of the self-evaluation process for quality reviews. Acknowledging and celebrating good practice demonstrates a mature approach to quality where the outcomes of self-evaluation balance successes alongside issues identified for further development. It allows showcasing of activity to academic peers, students and colleagues across the university and also externally. It also provides the opportunity for peer learning and the potential to encourage ongoing innovation and development within the university community, as a part of a wider institutional enhancement ethos.

Overall, the case-study is a synoptic account of the practice, 3-4 pages, or a digital or other artefact (such as video, podcast, blog), which illustrates its scope and impact in an area the Unit is particularly proud and considers is working well. Panel members are expected to read and comment on the Good Practice Case Study in the final Panel Report.

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<sup>4</sup>Good Practice Case Study Guidelines and Template:  
<https://www.ucc.ie/en/media/support/qualityenhancementunit/guidelines/CaseStudyofGoodPractice-GuidelinesandTemplate-ProfessionalServiceUnits.docx>

## Unit Overview

**ESG 1.8:** *Institutions should publish information about their activities, including programmes, which is clear, accurate, objective, up-to date and readily accessible.*

This section should provide an overview of the Unit's activities; the Unit should reflect on relevant aspects of its organisation and service delivery.

### *Mission Statement and Vision*

Outline the Mission Statement and Vision of the Unit and consider how:

- they are aligned with one another.
- they reflect the Mission and Vision of the [University](#).
- they differentiate the Unit in terms of the services that are provided.

### *Business/Operational Plan*

Outline the current Business/Operational Plan of the Unit and consider how:

- it reflects the University's Strategic Plan and relevant college's planning.
- the Unit contributes specifically to the achievement of the overall University's Strategic Plan objectives.
- it has progressed from the previous plan (continuity and change aspects);
- it is being operationalised through an implementation plan.

*If the Unit is in the process of drafting a new Plan, please, provide details of the previous plan in Appendix C; additionally, include within the report's main body an overview of the key aspects of the new plan, if available.*

### *Aims & Objectives*

Describe the aims and objectives of the Unit, using the following questions as a prompt:

- What are the aims, objectives and/or KPIs of the Unit?
- What factors have influenced the implementation of these aims and objectives over the past three years?
- How well do the aims and objectives reflect the needs of stakeholders and service users?
- How do you know that the implementation of these aims and objectives has been successful? What measures provide evidence of success?
- What provisions exist for the long-range planning and development of the Unit?

### *Core Functions*

Outline the main functions of the Unit and consider the following questions as a prompt:

- The extent to which these functions reflect the mission, aims and objectives of the Unit?
- Whether some functions have primacy over others?
- What approaches are you using to measure the quality and impact of the Unit's activities?

### *Service Delivery, Development and Enhancement*

Analyse the standards of service offered by the Unit:

- In what ways systematically does the Unit understand, analyse and anticipate users' needs and experiences of the services provided?

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#### *Budgeting*

Analyse the budgetary situation for the Unit, providing details as appropriate, including consideration of the following questions:

- What are the budgeting arrangements in the Unit?
- What measures do you take to pursue outside funding?

#### *Communication Structures*

Consider and evaluate the effectiveness of the Unit's formal and informal communication structures, e.g., internal and external (e.g., university-wide) committees using the following questions as a prompt:

- How does the Unit ensure effective and adequate communication with the wider university?
- What are the remits of existing committees and what mechanism for collecting feedback, and implementing this feedback, are there in place?
- Does the Unit have a marketing and communication strategy? If, not, does it have a plan for developing its marketing and communication strategy? If so, what is this?
- What mechanisms are in place to bring people (staff, service users, etc.) together socially and physically?
- How is communication with service users and stakeholders managed? How do you ensure users and stakeholders are satisfied with the Unit's communication methods?
- What improvements, if any, could be made to the Unit's current method or structure of communication?

#### *External links/community engagement*

Outline the Unit's engagement with the wider community.

- How does the Unit leverage its education, industry or community connections?
- Does the Unit have any collaborative interactions locally or internationally?
- In what ways do Unit staff engage with the wider community?

#### *Unit data analysis (for current academic year)*

Describe how the Unit analyses activity data (e.g., staff details, management structure, committee types, membership and remits, etc.) – for a full list of data see Appendix A and Appendix B). This should be followed by a discussion on how the Unit implements the findings of these analyses. Please provide a summary of the analyses in this section and subsequently refer to data in relevant sections throughout the report.



### *Conclusion*

- Identify factors which inhibit/enable the delivery of the service(s) in the Unit
- How could the organisation of the Unit be improved? How can the Unit do this?

## Unit Staff

### *Staff Profile*

Detail the number and configuration of the staff in the Unit. Consider the current staff profile addressing any potential difficulties related to succession planning or gender balance or any other relevant issues. Does the Unit have a staffing plan? If so, please provide details and include the plan as an appendix to the SER.

### *Staff Development Objectives*

Consider the development objectives for all staff members using the following questions as a prompt:

- How do you identify staff training needs? How do you ensure that staff participate in training programmes?
- What processes are in place to support staff induction at a unit level?
- How does the Unit ensure that staff are aware of required University policies and procedures such as Health & Safety, Equality & Diversity, Dignity & Respect and familiar with university-wide development initiatives such as Athena Swan?
- Are the staff development requirements related to the achievement of the aims and objectives of the Unit and the on-going objectives for quality enhancement? To what extent does the current staff development programme support that?
- What barriers might exist to ensuring staff have the opportunity to take part in training and development courses? What has the Unit done to identify and eliminate potential barriers?
- Does the Unit have a policy of encouraging staff to gain further qualifications?
- How do staff keep up to date as regards the advent of new legislation? How do staff ensure that the implications of new legislation are translated into the operating environment?
- How do staff maintain an adequate level of professional competence?
- What improvements would the staff of the Unit like to see in relation to training and development?

### *Staff Communication*

Consider and analyse the communication mechanisms for staff within the Unit using the following questions as a prompt:

- How are staff kept informed of decisions that affect the work of the Unit?
- Do you consider there to be effective communication among staff? How do you ensure that there is effective communication?
- How often do you hold regular staff meetings and who attends? Do staff have the opportunity to set Agenda items? How are decisions reached? Is there a formal minute record and is there an opportunity for staff to review and agree the minutes?
- How are staff made aware of the Unit's functions, objectives, procedures, and decisions that affect the work of the Unit?

- What structures and processes are in place to ensure that all staff are involved in decision-making?
- How does the Unit involve its staff in achieving improvements in service provision?

### Case Study of Good Practice

Identifying good practice is a vital facet of enhancement focused self-evaluation, requiring active consideration of the practices which are working particularly effectively in a unit, and ultimately highlighting and sharing these as part of the quality review process. It is also an opportunity for all Units to make visible the varied range of activities and initiatives directed towards enhancing their professional practices. All units must develop a Case Study of Good Practice as part of their self-evaluation.

In summary, the good practice case study is an opportunity to highlight something that a unit is particularly proud of and considers that it does well. Further information on the Case Study of Good Practice, including a template, can be found on the QEU website [Guidelines | University College Cork \(ucc.ie\)](#).

This section should outline how and why the chosen case-study demonstrates an area of practice of which the Unit is particularly proud. The Case Study itself should be included as Appendix I. The Case Study of Good Practice will be published on the QEU website following approval of the Peer Review Panel Report.

### Conclusions

The conclusion may include commentary, for example, on how the process of self-evaluation and writing the SER has highlighted areas of good practice, collaborative engagement, and/or presented opportunities for future development.

## Appendices

### Appendix A: Staff details

List the number of staff in each grade (please do not include names), indicating:

- whether staff members are permanent or temporary
- whether staff members are full-time or part-time
- the number of years staff members have been a member of the Unit and/or of UCC
- contract length (for staff members with temporary contracts)
- gender balance across all grades of staff
- age profile across all grades of staff

### Appendix B: Unit details

*Management Structure:* describe the management structure in the Unit and include an organisational chart.

*Committees:* include the following information:

- A list of all committees in the Unit
- A description of unit committees, including:
  - the responsibilities of the committees
  - their composition
  - frequency of meetings
  - reporting structures/level of authority
  - details of how staff are appointed/elected to committees

*Physical Facilities:* describe the physical facilities; the description should include a list of offices, storerooms, meeting rooms, etc.

### Appendix C: Business/Operational Plan

Please append the business/operational plans for the Unit. The reviewers will be sent the University Strategic Plan. Any unit plans should be developed in line with the University Strategic Plan and should seek to fulfil the ambitions of the University's plan and mission.

### Appendix D: Previous Quality Review

Please append a copy of the Peer Review Panel Report for the previous quality review. Indications of difficulties encountered in the implementation of recommendations should be made in addition to a comment as to the reason for lack of implementation. This will enable reviewers to assess the developments and improvements made since the last review.

### Appendix E: Methodology

*Quality Review Self-Evaluation Committee:* list the names of each member of the co-ordinating committee, starting with the Chair.

*Methodology:* briefly describe the process followed by the Unit in implementing the review. This should include:

- Number of meetings held by the Self-Evaluation Committee
  - Number of meetings with other parties
  - Allocation of tasks to members of the committee
  - Degree of communication with staff members not on the Self-Evaluation Committee
  - Samples of all questionnaires used

#### Appendix F: SWOT analysis and report

#### Appendix G: Benchmarking process and report

#### Appendix H: Stakeholder Feedback

Please provide an overview of the approach to gathering feedback from staff, stakeholders and students (if appropriate) along with an analysis of the key themes/issues arising. The substantive discussion of these issues should be reflected within the main body of the SER. Examples of the feedback instruments, for example; questionnaire, focus group agendas, or surveys should also be included.

*It is advisable to retain copies of the completed questionnaires/surveys/feedback reports in order that they are available for consultation by the reviewers during the site visit, if required.*

#### Appendix I: Case Study of Good Practice

Please, append a copy of the Case Study of Good Practice, which needs to be presented as a stand-alone document to facilitate its future publication in the Quality Enhancement Unit's website, following consultation between the Review Co-ordinator and the Unit engaging in review.

#### Appendix J onwards: Other documents

Other documents considered relevant to support statements/recommendations may be included.

*Examples of other documents:*

- Policy documents
- Procedural manuals, designed to aid staff members to fulfil their responsibilities effectively
- Guidelines/manual/handbooks designed to help users
- Evaluation reports of the service produced by others e.g., audit reports produced by external bodies
- Examples of methods used to consult user groups
- Copies of any service standards
- Copies of any Service Level Agreements the Unit has with any user or group of users.

Appendix L: Customised Support for Units engaging in review

Development Plan for Unit Supports				
Support Topic	With	Facilitated by	When (Duration)	Comments
Preparing for Quality Review	Self-Evaluation Committee and Head of Unit	QEU	12 months (1.5 hours)	
SWOT Analysis Workshop	All staff, Self-Evaluation Committee and Head of Unit	HR or external facilitator	10 – 12 months (1/2 day)	
Action Planning	Self-Evaluation Committee and Head of Unit	QEU and Unit	9 months	Engage with College; high level issues
Case Study of Good Practice	Self-Evaluation Committee and selected staff	QEU and Unit	6 - 9 months (2 hours)	
Data Gathering	Benchmarking	Unit	6 - 9 months	Data informs self-evaluation
	Stakeholder focus groups/surveys	QEU and Unit		
	External surveys	QEU and Unit		
SER Submission			1 – 2 months	6 weeks before the Site Visit