



Review and Evaluation of Cycle 3 Quality Review Activity

Dr Sinéad O'Sullivan
Director of Quality

Table of Contents

1	Introduction	1
2	Number and Range of Reviews	1
2.1	Review Streams	2
2.2	Quality Review Group Reviewer Profile.....	3
2.3	Gender Profile of Quality Review Groups.....	5
3	Review Outcomes	7
3.1	Initial Responses to Recommendations.....	7
3.2	Status of Recommendation Implementation	8
4	Thematic Analysis & Integration with Strategic Plan	10
4.1	Thematic Analysis of Recommendations.....	10
4.2	Link to Strategic Plan Implementation.....	13
5	Evaluation of the Review Process.....	13
6	Recommendations for Arising from This Evaluation	17
6.1	Cycle 4 Reviews.....	17
6.1.1	Internal Cost of Quality Reviews	17
6.1.2	Sourcing Reviewers	17
6.1.3	Future of Face-to-Face Reviews	17
6.1.4	Cycle 4 Structure	18
6.2	Institutional Recommendations	18
6.3	Recommendations to enhance process within QSU.....	18

Table of Tables

Table 1:Geographical Location of QRG Reviewers	4
Table 2: Geographical Location of Cognate Reviewers for Academic & Research Institute Review Groups.....	4
Table 3: Geographical Location of Reviewers for Academic & Research Institute Reviews excluding Employer Representatives	4
Table 4: Internal Response to Recommendations.....	7
Table 5: Escalation Status to IQIP	8
Table 6: Status of Recommendations (Accepted in full or in part) Implementation as at 15 th February 2024	8
Table 7: Status of Recommendations (accepted in full or in part) after 2 years implementation (February 2024).....	8

Table of Figures

Figure 1: Review Activity 2017-2023.....	2
Figure 2: Number of Reviews by Review Type	3
Figure 3: Gender Breakdown of QRG Members excl. Chairs.....	5
Figure 4: Gender Breakdown of Internal Representatives	5
Figure 5: Gender Breakdown of Student Reviewers	6
Figure 6: Example of Digitalised Quality Improvement Plan Prototype.....	9
Figure 7: Example of Recommendation Coding and Link to Strategic Goals	10
Figure 8: Top Themes Arising from Review Recommendations.....	11
Figure 9: Top Themes Arising from Academic & Research Institute Reviews	11
Figure 10: Top Themes Arising from Affiliate Reviews	12
Figure 11: Top Themes Arising from Support Unit Reviews.....	12
Figure 12: QRG Feedback on Experience Prior to the Review Visit	14
Figure 13: QRG Experience During the Site Visit.....	15
Figure 14: QRG Opinion of Effectiveness of the Review Process	16

1 Introduction¹

University of Limerick's quality review process, as applied to academic activities, research institutes, professional services units and affiliates, was developed and continues to evolve in order to satisfy university quality policy and meet legislative QA requirements. UL complies with the Qualifications and Quality Assurance (Education and Training) Act 2012, as amended 2019, which places a legal responsibility on universities to establish, maintain and enhance QA procedures relating to their activities and services (Part 3, Section 28). These QA procedures must take due account of relevant quality guidelines issued by Quality and Qualifications Ireland (QQI). QQI is the statutory body responsible for reviewing and monitoring the effectiveness of QA procedures adopted and implemented by higher (and further) educational institutions within Ireland.

Section 28 (4) sets out an obligation on the University to evaluate the implementation of these quality assurance procedures in with respect to the education, training, research and related services provided by the University.

Cycle 3 of internal quality review began in 2017 and completes in November 2023. During this period, the University also underwent its statutory external quality assurance review, the CINTE Review in 2020.

This report covers quality reviews conducted under the auspices of the Quality Support Unit (QSU) and does not consider other forms of review that also have a place within the University quality framework e.g. professional, statutory and regulatory body accreditations, reviews of research undertaken by Science Foundation Ireland or other funding bodies or other ad hoc internal reviews.

The [reports](#) from each review and follow up activities are published on the University's website.

2 Number and Range of Reviews

As shown in Figure 1, 24 reviews have taken place during the period 2017-2023. The review schedule is typically planned to have a consistent number of reviews in each year. This reflects the challenges of the academic year calendar where it can be difficult to schedule reviews due to reviewer, academic staff and student availability. The capacity of QSU is also a factor in these decisions.

Figure 1 shows that this balance was not always achieved during the cycle. A reduction in the number of reviews during 2020 was a planned event as this coincided with the scheduled date for the statutory external quality review undertaken by Quality & Qualifications Ireland (QQI) in March 2020.

This planned event proved fortuitous as March 2020 also coincided with the Covid-19 pandemic. While the institutional review was rescheduled to August 2020, it allowed QSU to develop tools and procedures to support online quality review events. For that reason, the Covid-19 pandemic did not result in any changes to the quality review schedule.

¹ A earlier version of this report was presented to Quality Committee on 13th November 2023

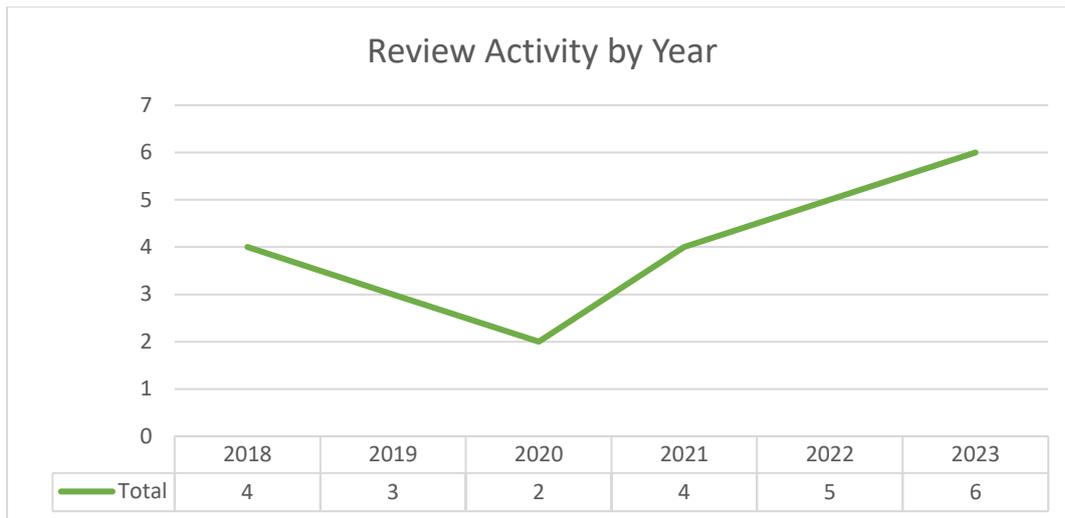


Figure 1: Review Activity 2017-2023

There were however changes to the original schedule agreed in 2017. 4 reviews were postponed due to issues internal to the unit under review. Reasons provided were that the timing of the review was too soon in the unit’s development or that changes in leadership where the unit sought to postpone the review to allow a new senior manager to lead the focus of the review. 1 review was removed (Graduate & Professional Studies) from the schedule as the unit’s role had changed significantly due to organisational restructuring. UL Engage requested to engage in the quality review process to allow it to plan and focus its work and role within the University.

2.1 Review Streams

Of these 12 have been of Professional Services or Support Units, 5 of Affiliate institutes, 4 Academic Units and 2 Research institutes. A thematic, cross institutional review of professional supports for research was also undertaken in 2023 (Figure 2). Academic Reviews were conducted at Faculty Level and in accordance with the Policy on Management and Reporting of Professional Statutory and Regulatory Bodies, the self-evaluation activities and site visit undertaken by EQUIS was approved as an equivalent internal quality review of the Kemmy Business School.

During this cycle of review, 5 affiliate units or organisations were reviewed under auspices of the internal quality review processes. These are.

- National Council for Education & Fitness
- UL Student Life
- Postgraduate Students Union
- UniJobs
- Plassey Campus Centre Group (incorporating UL Sport, PCC and University Concert Hall)

Each of these affiliates have a relationship with the University of Limerick and their activities have an impact on the reputation of the University of Limerick and/or the experience of students at the University of Limerick. While each is a separate legal entity, 2 of the affiliate organisations – UniJobs and Plassey Campus Centre Group are subsidiaries of UL. These institutions did not make any contribution to the cost of the reviews undertaken.

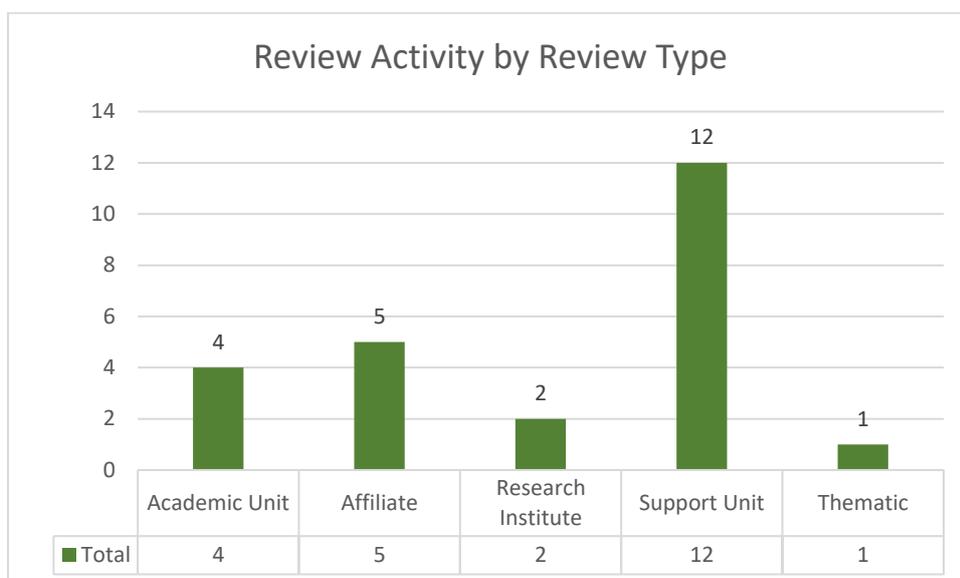


Figure 2: Number of Reviews by Review Type

2.2 Quality Review Group Reviewer Profile

Members of the Quality Review Group (QRG) are sourced through a combination of nomination by the unit under review or recommendation by members of the QSU. Depending on the nature of the review, each review group is chaired by a member of the QSU standing panel of Chairs (normally in the case of the review of a professional services unit) or a selected chair (in the case of an academic or specifically themed review). A minimum of two cognate peers are required on each panel. QRGs for professional services units also include an internal UL representative. This facilitates staff development for those leading out on their own quality review. All reviews include a student representative which is usually a senior UL student, a recent graduate or a student recruited from the NStEP² student representative panel.

When compiling a QRG, consideration is given to gender balance, balance of institution type and location. Subject or service specialist (cognate) reviewers are normally sourced from outside the Republic of Ireland. Exceptions are made where jurisdictional knowledge is important to the operation of the QRG e.g. in the areas of finance, law or corporate governance.

The standing panel of Chairs is compiled using similar criteria. The standing panel of Chairs currently comprises of 3 male and 3 female chairs. 2 are located in the Republic of Ireland, 2 in the UK, 1 in France and 1 in Sweden.

Table 1 below demonstrates the geographical spread from which reviewers have been sourced. This data excludes Chairs, UL internal Representatives and Student Representatives

Country of Reviewer	No. of Reviewers
United Kingdom	27
Republic of Ireland	11
Australia	5

² NStEP is the [National Student Engagement Programme](#), a joint venture between HEA, QQI and USI

Country of Reviewer	No. of Reviewers
Netherlands	3
Portugal	2
United States	2
Norway	2
South Africa	1
Finland	1
Croatia	1
France	1
Denmark	1
Canada	1
New Zealand	1
Grand Total	59

Table 1: Geographical Location of QRG Reviewers

This shows a significant bias towards sourcing reviewers from the UK and Ireland.

When looking at academic or research institute reviews only, the data (Table 2) shows a similar bias with higher representation from Ireland. This can be explained by the inclusion of an employer representative in the review group who is normally based in Ireland.

Country of Reviewer	No. of Reviewers
United Kingdom	7
Republic of Ireland	6
Portugal	2
Norway	2
Netherlands	1
Australia	1
New Zealand	1
Grand Total	20

Table 2: Geographical Location of Cognate Reviewers for Academic & Research Institute Review Groups

When the employer representative is excluded from the data for academic and research institute reviews, the reliance on Ireland as a source of reviewer is significantly reduced with only 1 reviewer coming from Ireland (Table 3).

Country of Reviewer	No. of Reviewers
United Kingdom	7
Portugal	2
Norway	2
New Zealand	1
Republic of Ireland	1
Australia	1
Netherlands	1
Grand Total	15

Table 3: Geographical Location of Reviewers for Academic & Research Institute Reviews excluding Employer Representatives

2.3 Gender Profile of Quality Review Groups.

In line with sectoral guidelines, QSU aims to ensure a minimum of 40% gender representation on all QRGs. It is not always possible to achieve this due to the subject matter under review. However, this is mitigated where possible through the selection of the Chair or student representative.

The Standing Panel of Chairs consists of 6 members, 3 are male, 3 are female.

In terms of all other reviewer roles, Figure 3 shows that the breakdown between male and female reviewers is evenly spread at 54% Female and 46% Male. This profile does not change significantly when examined by review stream.

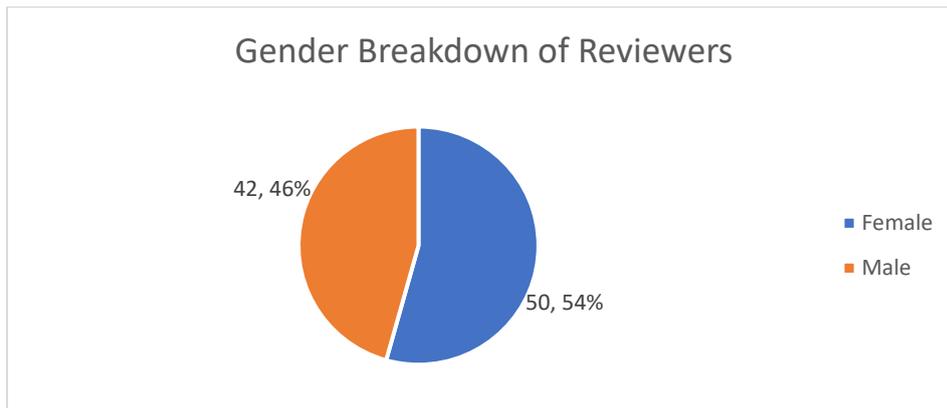


Figure 3: Gender Breakdown of QRG Members excl. Chairs

Looking at the profile of Internal Representatives, there is a significantly higher percentage of female representation as set out in Figure 4 below. As internal representatives are members of professional services reviews only, this may be explained by the generally higher representation of female staff within the professional services cohort.

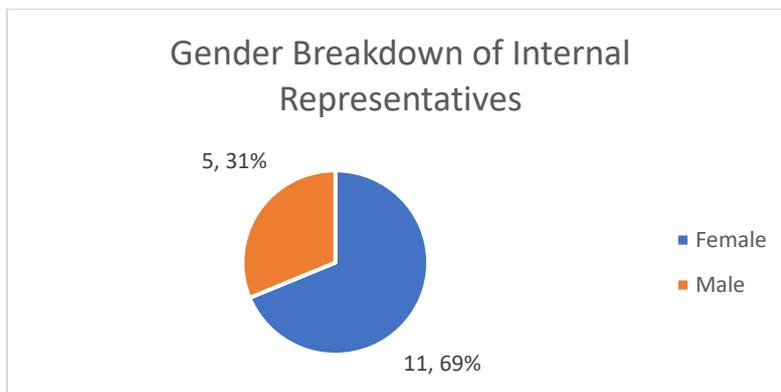


Figure 4: Gender Breakdown of Internal Representatives

A similar representation can be seen when looking at the profile of student representatives, where 65% of student reviewers are female.

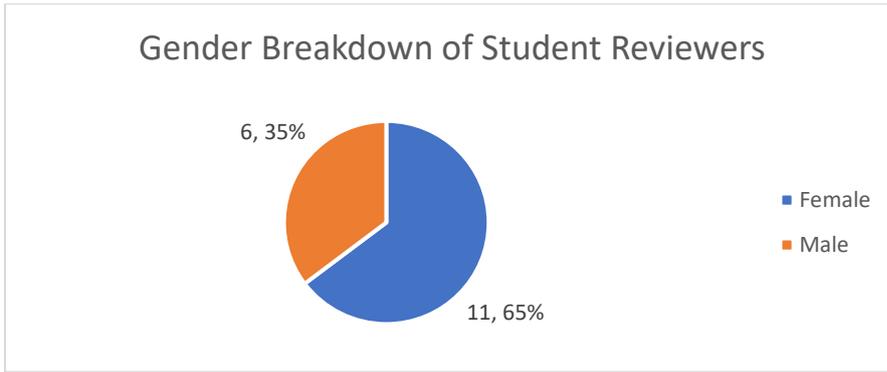


Figure 5: Gender Breakdown of Student Reviewers

Looking forward to Cycle 4 of reviews, the sourcing of reviewers will continue to take an internationalised approach. While being mindful of gender balance, we also need to ensure diversity of experience and perspective and where practicable use a broader pool of reviewer beyond the UK or western European perspective. This has its challenges as discussed later in section 5.1.

3 Review Outcomes

Each review results in the production of a report which sets out a range of commendations for and recommendations to the unit under review. Recommendations are set at Level 1 or Level 2; Level 1 being considered as the more important to implement. Level 2 recommendations can also provide a range of easy to implement, quick wins for the unit.

Recommendations can also be made to the University arising from the review process where it is suggested that the unit under review works with senior management to implement the recommendation.

The unit under review is asked to consider each recommendation and indicate its acceptance, acceptance in part or rejection of a recommendation. It is rare for a recommendation to be rejected by a unit and in doing so, they must provide a reason for doing so to the Quality Committee. Units may accept a recommendation 'in part' where they are of the view that implementation is not wholly within their gift. Where a recommendation is deemed to be outside of the scope of the unit under review and have an institutional impact, the recommendation is placed on the Institutional Quality Improvement Plan (IQIP) and relevant member of Executive Committee is responsible implementation of the recommendation. Implementation may be achieved through integration with other strategic initiatives or projects. The IQIP is monitored by the Quality Committee.

The unit under review provides an interim report and makes a presentation to the Quality Committee approximately 1 year after the review with a follow up meeting a year later with the QSU and relevant member of Executive Committee.

At the end of this process, recommendations either remain open, are closed or are escalated to the IQIP.

3.1 Initial Responses to Recommendations

Table 4 shows that over the period of Cycle 3, of the 340 Level 1 recommendations made, 84% were accepted in full by units under review. A further 85% of Level 2 recommendations were accepted in full. This rate of acceptance illustrates the positive engagement that units under review have with the outcomes of the process.

Response to Recommendation	Level 1	Level 2
Accepted in Full	284	150
Accepted in Part	48	22
Rejected	8	4
Grand Total	340	176

Table 4: Internal Response to Recommendations

This level of engagement with the process and openness to receiving advice has been consistently commended by QRGs throughout the cycle.

Of the recommendations that have been accepted in full or part, 70 Level 1 recommendations have been escalated to the IQIP as they are deemed to require the support of senior management either through funding or institutional initiatives. An example of this type of recommendation is the implementation of the Work Allocation Model (WAM). A further 16 level 2 recommendations have been escalated. (Table 5)

Recommendations		
Escalate to UL QIP?	Level 1	Level 2
N	262	156
Y	70	16
Grand Total	332	172

Table 5: Escalation Status to IQIP

Responsibility for monitoring the implementation of the IQIP lies with the Quality Committee. To date this activity has been limited and has concentrated on the implementation of recommendations following the University’s statutory institutional review (CINNTE). As these recommendations have now been implemented or integrated into plans supporting the implementation of UL@50, it is an opportune time to re-evaluate the status of the IQIP.

Going forward, it is proposed that each recommendation that has been escalated to the IQIP is assigned to the relevant member of the Executive Committee as ‘owner’ of this recommendation. In monitoring implementation, each member will be requested to report progress to the Quality Committee on an ongoing basis.

3.2 Status of Recommendation Implementation

This item is a Key Performance Indicator (KPI) on university level. Table 6 below shows that of all recommendations made up to and including November 2023, 46% of level 1 recommendations and 41% of Level 2 recommendations are closed.

Level of Recommendation	Closed	Open	Total
1	152	180	332
2	71	101	172
Grand Total	223	281	504

Table 6: Status of Recommendations (Accepted in full or in part) Implementation as at 15th February 2024

Considering the time lag between receipt and implementation of recommendations, a further analysis of the status of implementation 2 years after the review visit, provides better insight into how successful implementation is. After 2 years, 81% of Level 1 recommendations and 78% of Level 2 recommendations have been closed. (See Table 7)

Level of Recommendation	Closed	Open	Grand Total
1	133	32	165
2	57	16	73
Grand Total	190	48	238

Table 7: Status of Recommendations (accepted in full or in part) after 2 years implementation (February 2024)

Of the reviews that have been fully closed out (reviews that took place up to and including AY2020/21, 58% of the open recommendations have been escalated to the institutional quality improvement plan.

This time lag on formal reporting reduces visibility and oversight on actual implementation progress and can provide a negative view on the actual status of implementation. Responsibility for the

management of implementation lies with the Head of Unit and progress monitoring tends to manage locally on in Excel or Word documents and then transferred to the QIP template for reporting to Quality Committee. Greater visibility on progress towards completion between reporting milestones is required to report more accurately to Executive Committee on actual progress. This will be achieved through the digitalisation of the quality improvement plan, which will aid local management as well as provide greater visibility and ease of reporting. A prototype, developed within QSU³ using the Microsoft infrastructure is now in place and it is planned to share this with units and divisions beginning implementation to allow them to manage their implementation while providing better information to the Quality Committee. (Figure 13)

Quality Review Outputs
Faculty of Education and Health Sciences

Unit Response to Recommendation
851
Status of Recommendation: Open
Escalate to UP QIP?: N

Action items

- a. The School of Medicine business plan approved by University
- b. Allied Health, Allied Health, N&M, Psychology and Education to create business case / plan for financial resour required to maintain SSR and appropriate practice education supports, on the basis of target student number and requirement for non-pay budget
- c. Formal submission to MPR of business cases referred to in b

Interim Status of Action Item open

Responsible	Head Medicine
Due by	01/03/2023
Interim Progress	Interim 4-year financial agreement approved by Director MPR for medicine, based on subtraction of fixed costs from fee income prior to cost sharing
Interim Outstanding Matters	Overall business plan to be revised and resubmitted to MPR

Figure 6: Example of Digitalised Quality Improvement Plan Prototype

³ By Quality Research Officer, Dr Natalie Nic an Ghail

4 Thematic Analysis & Integration with Strategic Plan

In keeping with the recommendations from the CINNTE report and the University objective of creating an integrated, smart and efficient organisation, the QSU has been developing its internal tools to assist in streamlining processes, providing better support to units undergoing review and enhancing its reporting capabilities. One example is the development of a coding tool to allow thematic analysis and strategic mapping. Figure 7 below demonstrates how one of the recommendations for the recent review of the Marketing & Communications Division have been thematically coded and linked to current strategic objectives.

The screenshot displays the 'Quality Review Outputs' interface for 'Marketing and Communications'. On the left, a list of recommendations is shown, including 'Level 1, Rec #2 - Marketing and Communications' which is 'Accepted in Full' and 'Open'. The main content area shows the details for 'Level 1, Rec #2 - Marketing and Communications', including the text: 'At University level, critically review the sequencing of key corporate activities to ensure full alignment of core narrative, vision and values.' Below this, the 'Thematic Analysis Coding' section is visible, featuring a dropdown for 'Recommendation - Themes' with selected options 'Strategic alignment' and 'Reputation/External Recognition/Brand'. The 'Escalate to UL QIP?' checkbox is checked. The 'Strategic Plan UL50 Alignment' section includes dropdowns for 'Goal', 'Priority', and 'Objective', and a 'Save' button. The interface also shows a 'Goal 4 - Priority 4.1 - Objective 4.1.1' tag.

Figure 7: Example of Recommendation Coding and Link to Strategic Goals

4.1 Thematic Analysis of Recommendations

A thematic analysis of the recommendations made by Quality Review Teams was undertaken to ascertain key themes that were arising from the review process. Each recommendation was coded to at least one theme. This coding was carried out by the Director of Quality, and it should be recognised that this will have subjective bias.

The major themes arising from all reviews since 2017 are set out in Figure 8 below. Cross functional information sharing, strategic alignment and effective communication are highlighted as the three most common themes of recommendations for all reviews. Filtering recommendations by review type provides insights into the major themes for the different types of reviews.

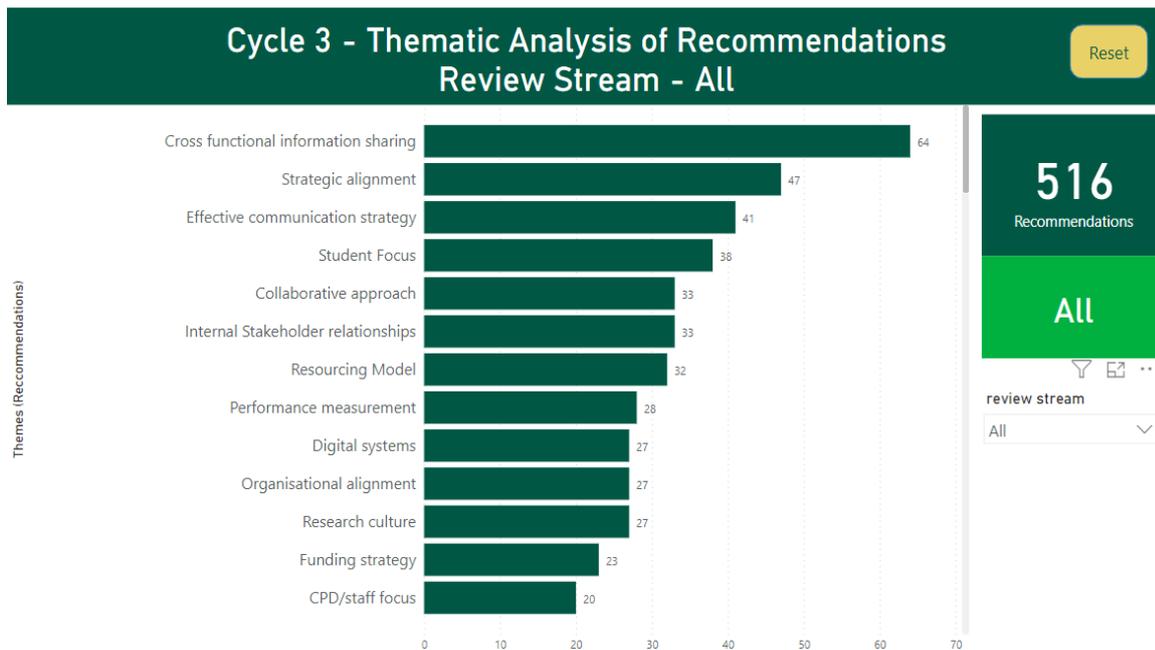


Figure 8: Top Themes Arising from Review Recommendations

The ranking of themes varies depending on the nature of the review. While cross functional information sharing is also a featured theme, Figure 9 below shows that research culture, funding and external stakeholder relationships, feature more prominently for Academic and Research Institute Reviews (n=6)

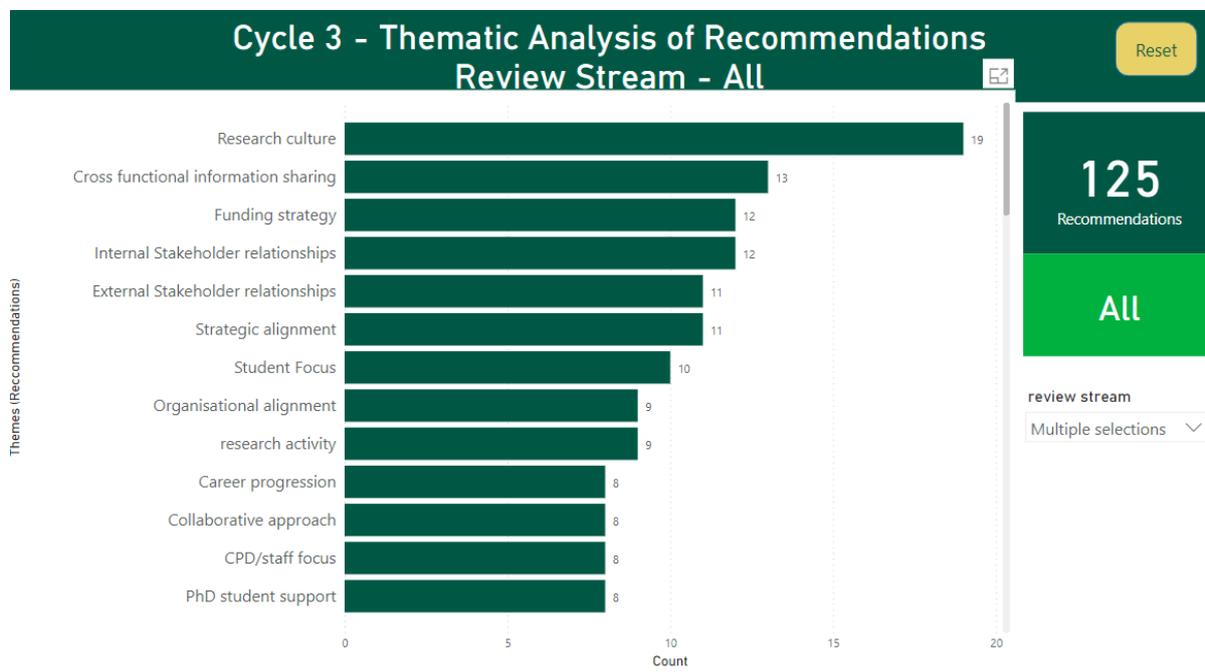


Figure 9: Top Themes Arising from Academic & Research Institute Reviews

The prominence of themes shifts again when reviews of affiliate units are considered (n=5). Figure 10 shows that service offerings and strategic alignment are the main themes in the recommendations of the quality review groups for these reviews.

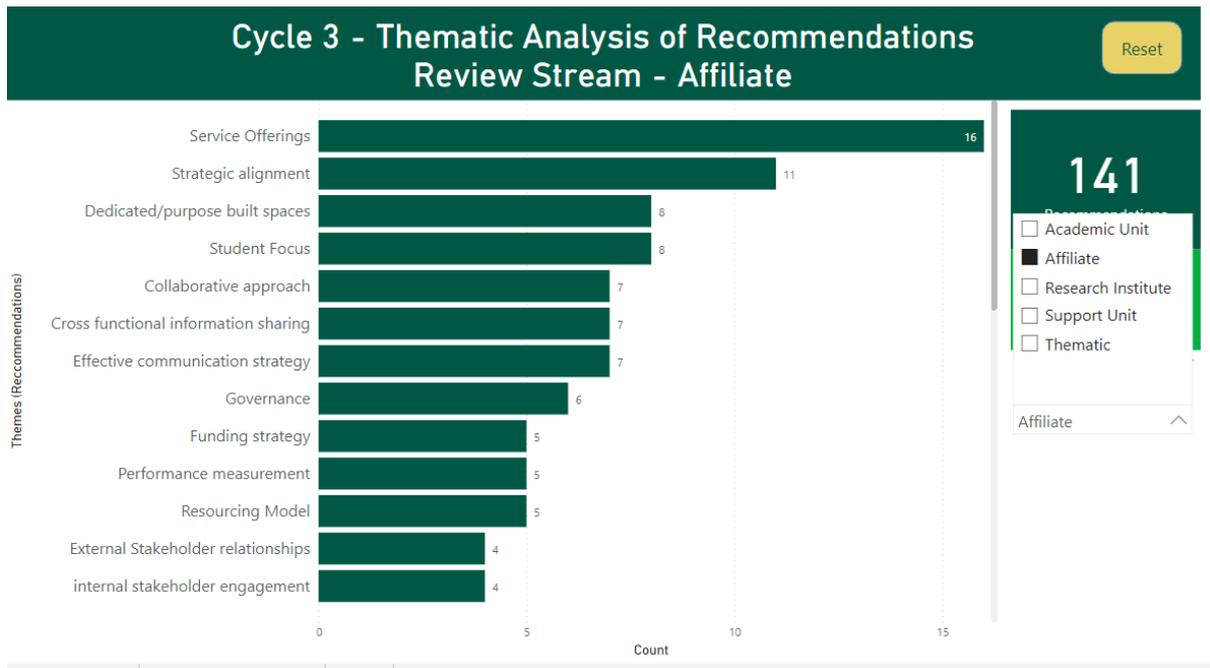


Figure 10: Top Themes Arising from Affiliate Reviews

In these cases, recommendations coded to strategic alignment refer mainly to how these affiliate institutions are strategically placed within UL and aligned with UL’s strategic objectives.

When looking at Professional Services Review (n=12) recommendations, the thematic profile (Figure 11) refers to cross functional information sharing, the resourcing of initiatives and services, stakeholder engagement and communication and digitisation of operations.

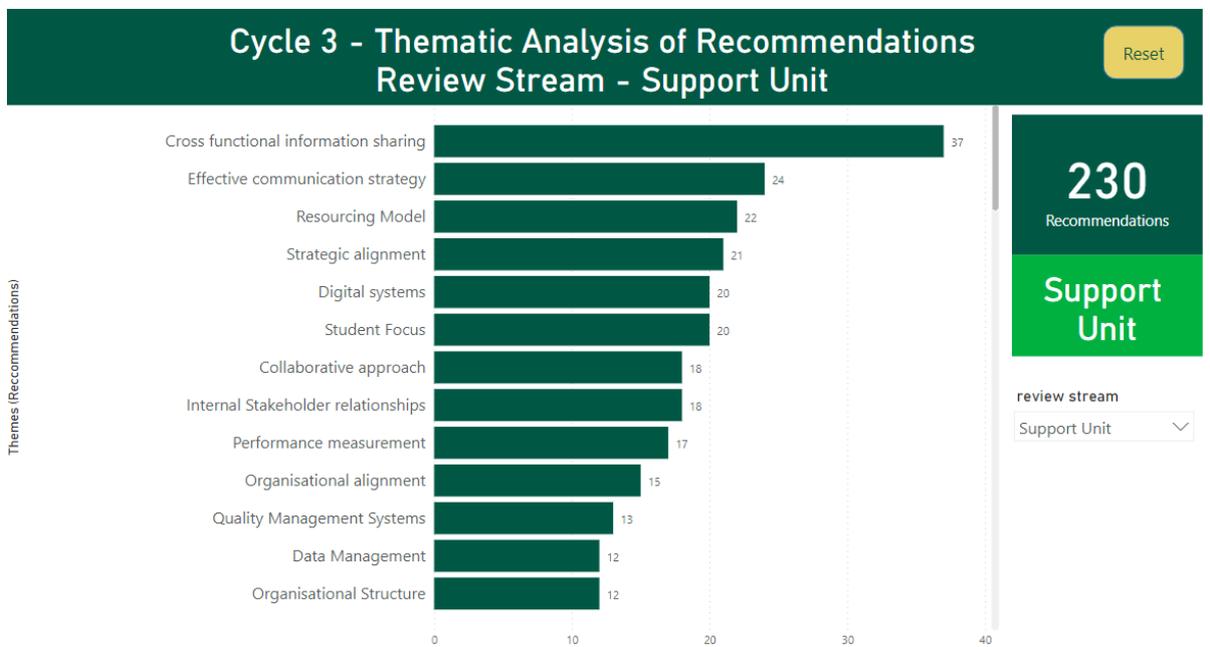


Figure 11: Top Themes Arising from Support Unit Reviews

Looking at the recommendations coded to ‘cross functional information sharing’, the language used in recommendations refers to ‘liaising’, providing ‘greater visibility’, creating service level agreements, seeking engagement etc.

This analysis provides insights into exploring opportunities to develop institutional projects, or other initiatives, including further thematic based review to ensure that whole of institution approach can be taken where appropriate. Cross functional projects and thematic reviews can assist in enhancing sharing of practice and enhancing intra-organisational communication.

4.2 Link to Strategic Plan Implementation

In making its recommendations to the University in 2020, the Institutional Review Panel commented upon a lack of clarity within Executive as to how the implementation of the strategic plan would be monitored and impact measured. Notwithstanding the recalibration exercise that has taken place since the review and preparations that will shortly commence to develop a new strategic plan, QSU has undertaken an exercise to link recommendations arising from quality reviews to the goals, priorities and objectives of the current strategic plan UL@50. While the review process commenced in advance of publication of UL@50, this exercise can be used to chart implementation of objectives where the recommendations arising from a review can be linked to a stated goal or objective.

Another recommendation arising from the Institutional Review was to reduce the complexity and 'top down' nature of the quality assurance and enhancement process. Efforts have been made since the institutional review to link the quality review process with ongoing strategic or operational activities that may take place within a unit or division. Aligning recommendations with implementation of the strategic plan or other strategies facilitates this linkage and allows units to demonstrate how they are also contributing to the overall implementation of institutional priorities. This of course assumes, successful implementation of plans to fulfil recommendations and taking an institutional approach to some recommendations as outlined above to avoid a piecemeal approach to implementation.

In this analysis, recommendations may have been mapped to more than one goal or objective. In some cases, they may be mapped only to the high-level goal as the specific priorities or objectives may not have matched. Some recommendations have not been mapped to the strategic plan as the individual recommendation may be very specific to a unit or initiative. In other cases, the nature of the activity of the unit is so closely aligned with a specific goal it would be expected that a number of recommendations for that unit would be closed aligned with the goal for example, UL Global with Internationalisation or UL Engage with Civic and Community Engagement.

5 Evaluation of the Review Process

Members of the Quality Review Group are asked to provide feedback on their experience of the review process after each review has taken place. Figure 19 demonstrates that the pre-review visit experience by the QRG is predominantly 'good' or 'very good' in each of the indicators used.

Prior to the review - Please indicate how you found the following:

91 Responses

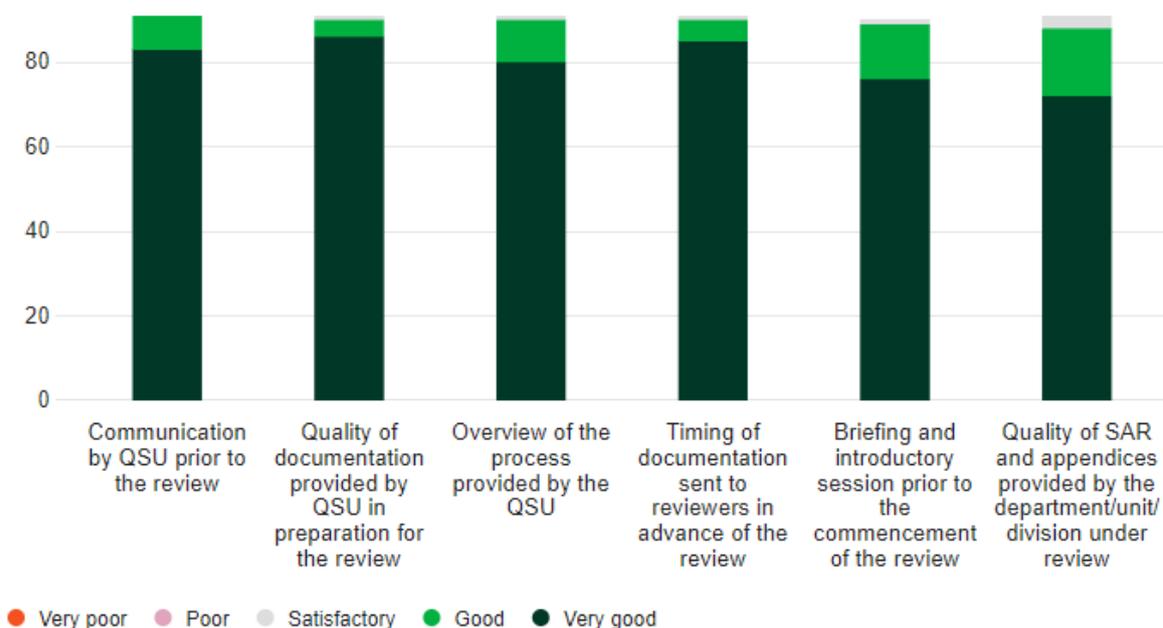


Figure 12: QRG Feedback on Experience Prior to the Review Visit

Figure 20 shows a largely similar experience during the site visit⁴ where reviewers find the process mainly 'good' or 'very good'. One reviewer rated the experience of meetings with stakeholders and departmental staff as poor. This was explained in qualitative feedback where the reviewer believed stakeholders were poorly prepared and did not seem to be aware of the purpose of the meetings.

Other feedback from reviewers relating to meetings with stakeholders indicated a preference for unit management to attend fewer meetings.

MS Teams was introduced to the review process in November 2020 to facilitate online reviews during the Covid-19 pandemic. Familiarity with MS Teams grew as its use has increased in general, however not all reviewers found it easy to use. In continuing with MS Teams as a repository for documentation, QSU will develop a consistent approach to its use for all reviews and provide additional guidance notes for those unfamiliar with the tool.

Reviewers have commented on the intensity of the process and have suggested that more time is allowed for reflection between meetings. Although another reviewer commented on the amount of time that reviewers are asked to give to the process and suggested that the review time be curtailed to two intensive days.

While completion of the report while onsite is appreciated by reviewers, it does make the final day of the review process quite intense. The value of the 'read back' of the report has been questioned by reviewers as is the value of the collective authoring of the report where there may be better value and support provided to the review team by having one person charged with responsibility for writing the final report.

⁴ The 'site visit' will have been online from November 2020 to August 2022.

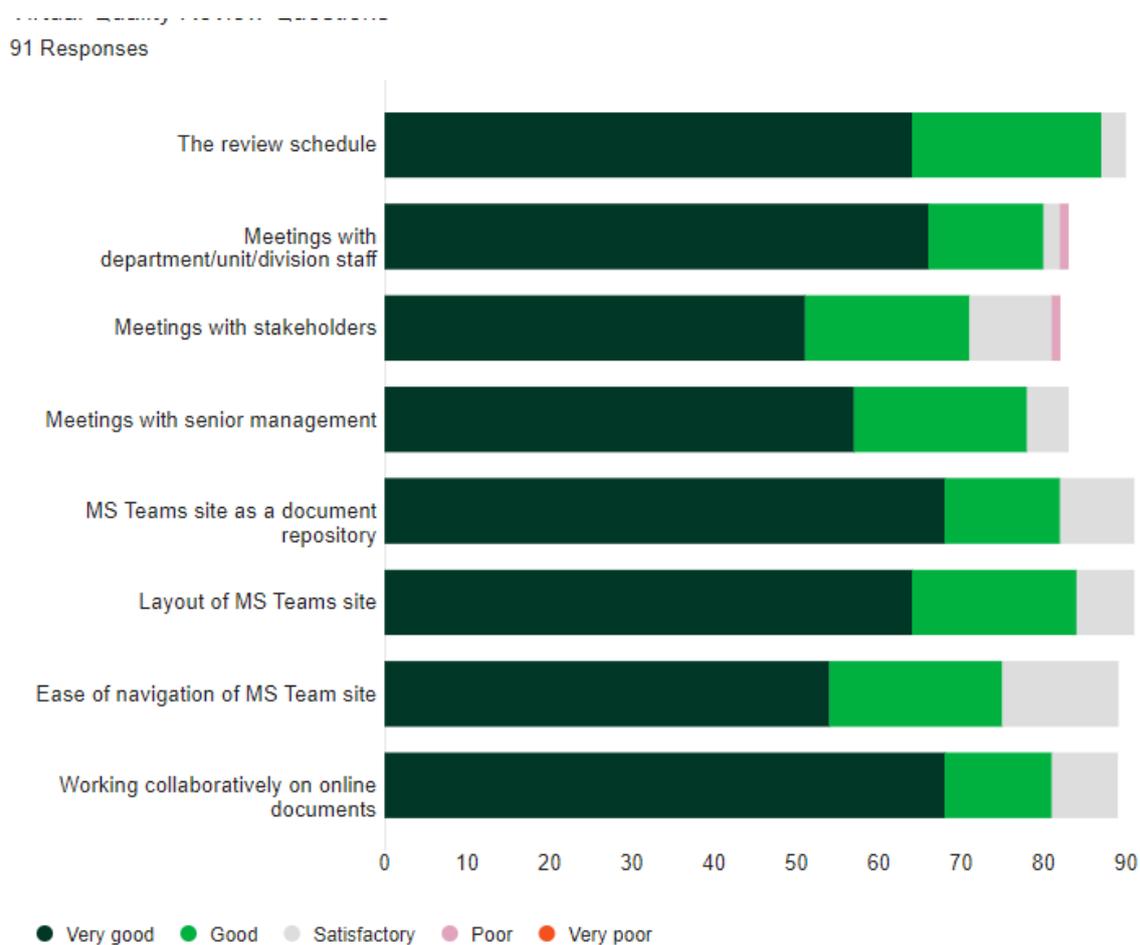


Figure 13: QRG Experience During the Site Visit

Overall, all respondents (n=82) to the question regarding the effectiveness of the process, found it to be effective or very effective. (Figure 21).

In commenting on the strengths of the review process, reviewers point to the calibre and independence of colleagues on the review group itself and the support provided by QSU and the individual review co-ordinators. Socialisation activities such as the preparation meetings prior to arriving (introduced during Covid-19 pandemic and made possible through the introduction of MS Teams) and first night meal is also valued by reviewers. Other strengths commented on by review group members include the openness and engagement of staff of the university, accessibility of senior staff members and importantly the enhancement led nature of the review process.

As a quality assurance tool, how effective did you find the review process?

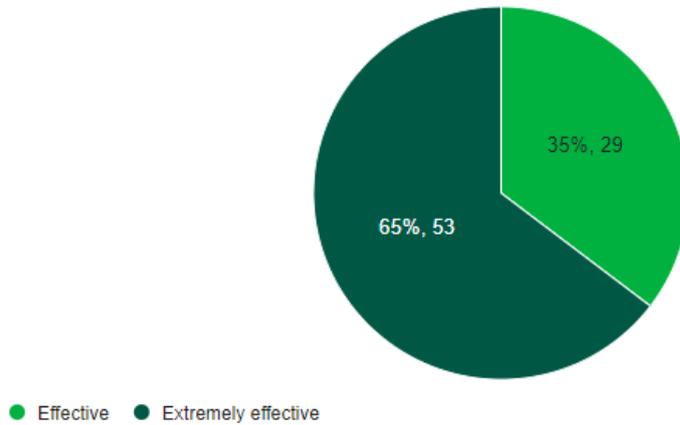


Figure 14: QRG Opinion of Effectiveness of the Review Process

Reflecting on this feedback and considering the proposed scope of Cycle 4 Academic Reviews, QSU is likely to engage a panel of recording secretaries who will be charged with drafting the final report, which will be subject to the agreement of the other members of the panel. We currently rely on one provider which will be unsustainable given the number of reviews proposed.

In considering feedback regarding the duration of the review, balance is required to ensure that the review is robust and detailed with being able to attract reviewers to come to UL and take time from their own busy schedules.

While informal feedback is taken from internal quality review teams after review and discussed at the Quality Team Leaders Forum, QSU does not request systematic feedback from those involved in quality review teams and their experience of the process. This is a gap in our process and would provide important feedback.

6 Recommendations for Enhancement Arising from This Evaluation

6.1 Cycle 4 Reviews

The return to a review of each academic department and fulfilling institutional commitments and obligations to periodic programme review during Cycle 4 has significantly increased the number of reviews that are required to be scheduled. To allow programmes to benchmark against current institutional strategies, academic reviews have been ‘frontloaded’ in the proposed schedule.

Established professional services divisions have been reviewed 3 times and it is opportune to consider what additional value a traditional departmental review will bring. In considering the recommendations arising from Cycle 3 for these departments or at institutional level, the University may benefit from taking a more thematic approach in some cases. Newer divisions or units, however, will still benefit from a departmental approach as their development matures.

6.1.1 Internal Cost of Quality Reviews

Quality reviews are often referred to as ‘free consulting’. While the quality review process does provide access to experts in their field and provides an objective review of our processes, they are costly to run. Increases in direct costs such as accommodation and travel costs as well as consideration of the University’s sustainability framework requires us to consider other ways in which reviews are undertaken, while not diluting in any way the robustness of the process.

An unseen cost is the time required by internal quality review teams to undertake the self-evaluation work. Observations from Cycle 3 indicate that there is a different approach taken across the University depending on the resource base of the unit. In some cases, time is ‘bought’ to allow the review chair to concentrate on the process supported by a project management resource and in many other cases, it is undertaken as additional work. This approach may become unsustainable. The inclusion of ‘quality work’ as an element of the Work Allocation Model is welcome, however a similar approach may also be needed for professional services staff for the process to deliver true value for the University.

6.1.2 Sourcing Reviewers

The requirement by the Revenue Commissioners to consider quality reviewers and external examiners as ‘employees’ of the University has impacted on how these important contributors to the quality assurance framework of the University are treated by the University’s systems. While a solution has been found to having a requirement for a PPS number, there continues to be a query as to whether a reviewer from outside of the EU and potentially now from the UK, will be required to have a work permit. This level of additional administrative overhead, coupled with financial and sustainability concerns may result in the narrowing of the pool of reviewers used, which in turn may narrow experiences.

6.1.3 Future of Face-to-Face Reviews

Consideration could be given to returning to online reviews to reduce costs and carbon footprint; however, feedback is that face to face reviews are considered to be more effective in terms of engagement, practice sharing and networking.

6.1.4 Cycle 4 Structure

Taking these issues into consideration, the overall approach to Cycle 4 of professional services or thematic reviews is proposed as follows.

1. the traditional departmental review for newer divisions/units or where the Divisional head requests it
2. a thematic review of a cross institutional service or theme lead by an identified unit/division which an external review team will be invited to evaluate.
3. a thematic review of a cross institutional service or theme lead by an identified unit/division which an internal review team will be invited to evaluate.

The use of an internal review team will allow recognition of internal expertise and understanding of where enhancements can be made, develop internal stakeholder relationships and practice sharing and provide CPD opportunities for staff. These internal reviews will likely to be of smaller discrete themes where sufficient internal expertise resides.

6.2 Institutional Recommendations

1. The outcomes of quality reviews and status of implementation of recommendations from Cycle 3 should be used to inform strategic direction or realignment where recommendations point to consistent themes.
2. The University should support the quality review process through additional funding to be made available to 'buy out' time to allow quality team leaders to concentrate on preparation and self-evaluation activities where quality posts are not formally within the staffing of a unit/division/department/faculty.
3. Guidance on the University position with respect to the travel of international reviewers vis a vis budget availability and University sustainability framework is required.
4. While recognising the link with UL, its subsidiaries and other affiliates, subsidiaries and affiliates should be required to contribute to the cost of quality reviews.

6.3 Recommendations to enhance process within QSU.

1. Develop linkages to source QRG members from a broader range of countries within the scope of the cost framework and sustainability framework.
2. The appointment of a panel of recording secretaries to support Cycle 4 of reviews. Recording secretaries may be appointed from within the staff of the University.
3. The role of the recording secretary will include the drafting of the final report.
4. Consideration to be given to providing more time for meetings with stakeholders and panel reflection and that the report may be completed after the site visit.
5. QSU will explore the digitisation of quality improvement planning tools to assist end users and increase visibility of progress.
6. QSU will review its use of MS Teams for the management of reviews to ensure a consistent experience for all users, regardless of their experience with MS Teams

7. QSU will request feedback from internal quality review teams on their experience of the internal quality review process.