

# ***QUALITY REVIEW GUIDELINES***

***(Revised September 2009)***

## Table of Contents

<b>Executive Summary</b>	<b>3</b>
<b>Chapter 1</b> Introduction	<b>4</b>
<b>Chapter 2</b> Guidance for Academic Departments Conducting a Self Assessment	<b>7</b>
<b>Chapter 3</b> Guidance Criteria for Administrative, Service & Professional Departments Conducting a Self-assessment	<b>14</b>
<b>Chapter 4</b> Guidelines for External Reviewers	<b>19</b>
<b>Chapter 5</b> Pattern of the Visits	<b>22</b>
<b>Appendices</b>	<b>24</b>

## Executive Summary

The second cycle of quality review maintains an active self-assessment at departmental level at the core of the process. Each Department is asked to contextualize its assessment by outlining the Departmental Profile, Mission and Strategic Objectives and indicating how these align with University Mission and Strategic Goals

In assessing each of its key areas of activity the department is asked to show how these activities contribute to the achievement of the strategic goals of the University, summarized as student learning, knowledge creation and dissemination and contribution to social, political and economic development.

Ownership at departmental level is a key value and the guidelines aim to support and facilitate departments in completing a process that is robust, useful and evidentially based without being too onerous. The review will normally encompass the following key areas:

- *Teaching, Learning and Assessment*
- *Research and Scholarship*
- *Service to Academic and other Communities: Internal and External to the university*
- *Any additional Key Activity (optional)*

In addition the review will show how the following areas support the delivery of the core activities:

- *Management and Leadership of the Department*
- *Training & Development*
- *Implementation of Policies and Processes requiring compliance\**
- *Integrating Support Services*
- *Specific Thematic Area shared with other departments (optional)*
- *Other Factors (optional)*

Writing a quality improvement plan is an integral part of the process – drawing together the insights gained from discussion and dialogue involved in the process and outlining what changes may be made in response to the knowledge gained. Departments are also encouraged to think beyond maintenance and stepwise development and consider Departmental Strategy towards 2011 and beyond this allowing for a closer articulation between the review process and the next University strategic plan. The final section heading for the self assessment might read:

- *Quality Improvement Plan*
- *Departmental Strategy Towards 2011 and beyond*

The following schedule is premised on a wish to have completed peer review reports for all departments by 31 December 2008.

<b>Schedule for Faculty of Social Sciences Review 2007- 2008</b>	
Self-assessment phase commences:	November 2007
Six Potential Peer Reviewers nominated	December 2007*
Peer Review Group appointed by President	Second Semester
Full draft self-assessments complete (25 pages)	1 September 2008*
Self assessments read by QPSC	September 2008
Reports to Peer Review Group following departmental revisions, if any	Two weeks in advance of visit
Visits by Peer Review Group	October – November 2008*
Peer Review Reports complete	31 December 2008

\* or earlier where departments have opted for an earlier date

# Guidelines for Quality Review Cycle

*We are now ready for a second phase of growth, to consolidate the achievements of the past ten years, to build upon the standards of excellence in teaching and research achieved to date, to extend our national and international reach and to implement the structures and supports needed to underpin our academic ambitions.*

*Prof. John Hughes NUIM Strategic Plan 2006-2011*

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## Chapter 1

### 1.1 Introduction

The second cycle of Quality Assurance Review commenced in NUI Maynooth in Autumn 2007. Whilst retaining an open model of quality assurance, NUI Maynooth has made a number of modifications to reflect both the changing landscape of Higher Education in Ireland and developments that have taken place within the University, and to build on the experience gained during Cycle One. The core elements of objectives identified and endorsed by the university community, a formal self-evaluation process, a peer group assessment and a published report remain at the heart of the process. Equally, the processes correspond to the guidelines set out at a national level in A Framework for Quality in Irish Universities, Second Edition 2007.

The key changes for the second cycle of review may be summarized as follows:

- The review will be based on a five-year cycle, in line with the University strategic planning cycle.
- The departments within one Faculty will undertake review in the same year, along with a review of the Faculty itself.
- The objective of the self-assessment reports prepared by departments and Faculties will be a focused quality improvement plan, aligned to the broad strategic outcomes of the University.
- All the activities of the department are assessed in relation to their contribution to the broad strategic outcomes of the University.

### 1.2 Role of the Quality Promotion Sub-Committee (QPSC)

This document sets out a set of criteria and procedures designed to support a department or unit in performing its own evaluation effectively. The role of the QPSC in the review process is to encourage and assist in the self-assessment process, assisting colleagues to match the process to the unique specialisms of particular departments.

The QPSC, through its executive office, will facilitate the process, working with departments and faculties in their preparation, planning and organizing of visits, and liaising with external reviewers.

### **1.3 Procedures**

The format of the second cycle review process will be broadly similar to the first, in that it will consist of self-assessment followed by a visit from a Peer Review Group and the publication of the Peer Review reports. There is a change of emphasis, however, in that the self-assessment phase will have more analytical and focussed objectives, linked to the University's strategic planning.

The Review process consists of three phases. The first is focussed primarily on the preparation of the self assessment report, the selection of internal and external reviewers and planning for phase 2. The Peer Review visit to the department and the preparation of the Peer Review Report are the main tasks in phase 2. A draft copy of the peer review report is sent to the Department for factual corrections after which a final version of the report is sent to the Department and the Quality Promotion Sub Committee. During the third and final phase the Department prepares a response to the Peer Review Report in the form of a Quality Improvement Plan. The QPSC will consider the Peer Review Report and the response of the Department, after which the Secretary will prepare a summary of the discussion for the President. A final meeting will then be arranged by the President or his nominee with the Head of Department in order to agree a Quality Implementation Plan and will be published on the web as the recorded outcome of the quality review process. The Department, in consultation with the Dean, will implement its quality improvement plan and contribute to the University Strategic Planning process. The Dean will report on an annual basis to the QPSC on the progress that has been achieved. A report on progress will be incorporated into the annual report of the QPSC to the Planning, Development and Finance Committee of the Governing Authority.

The following schedule outlines the process more fully:

Table 1

<ul style="list-style-type: none"><li>• Self-assessment by the departments or unit undertaking the review.</li><li>• Nomination of potential members of Peer Review Groups.</li><li>• Preparation by the department and the Faculty of a report including a development plan based on the self-assessment process.</li><li>• Appointment of members of Peer Review Groups.</li><li>• External Reviewers visit departments.</li><li>• Peer Review Report is agreed by group members and circulated.</li><li>• Governing Authority receives Peer Review Reports.</li><li>• Publication of Peer Review Reports.</li><li>• Implementation with annual progress reports.</li></ul>
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As in the first cycle it is envisaged that the process will be completed within a twelve month timeframe. The descriptions that follow relate to the standard quality review. Provision has also been made for Complementary Quality Reviews, described in Appendix 5, and for reviews of small units, described in Appendix 6.

### **1.4 The Scope of the Review**

The review process is intended as a comprehensive evaluation of the work of the department undertaking it. It is designed to be formative, strategically aligned and developmentally focussed. The departments undertaking review are not constrained to any particular analytical tool, but are encouraged to identify and use the model which best fits the departmental activities. Models adapted from other settings such as SWOT, PESTLE or Forces Analyses\*

may offer useful insights. The use of such a model is not intended to replace the collegial dialogue and reflection which is the core of the process. The outcomes of the analysis may be integrated into the self assessment where appropriate and any recommendations included in the Quality Improvement Plan.

The procedures for Cycle 2 have been simplified. The Internal Review takes the form of the completion of a Quality Review Map, beginning with an introduction to the department, its mission and strategic objectives, and its place within the University's mission and strategic plan. Each of the key activities of the department is then identified and assessed in terms of the three broad strategic outcomes of the University – Student Learning, Knowledge Creation and Application, and Social, Political and Economic Development. Key activities will vary, as each department reflects on its own unique contribution to the University's mission. Table 1 is the general template in which each academic department will identify its own key activities.

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SWOT – Strengths, Weaknesses, Opportunities, Threats; PESTLE – Political, Economic, Social, Technological, Legal, Environmental; [www.jiscinfonet.ac.uk/InfoKits/project-management/pestle-swot](http://www.jiscinfonet.ac.uk/InfoKits/project-management/pestle-swot)  
Force Field Analysis - a framework for looking at the factors (*forces*) that influence a situation e.g. Porter 5 Field Analysis, Lewin, *Force field analysis*

## **Chapter 2**

### **Guidance for Academic Departments Conducting a Self-assessment**

#### **2.1 Introduction**

Over the past decade there have been major changes in Irish universities. Two developments that have far reaching consequences for teaching and learning at NUI Maynooth are the implementation of a fully modular curriculum and the alignment of this to the National Qualifications Framework. The structure of the University has changed to encompass three Faculties, Arts, Celtic Studies and Philosophy, Science and Engineering, and Social Science, and now offers a broader range of programmes. In addition, the student population has changed, with a greater concentration of mature entrants and students from diverse backgrounds. The pattern of student behaviour, with many students taking paid employment for significant periods of time during the academic term, is a further factor that has an impact on the university experience.

Moreover, the modernisation of governance and organisational structure within Irish education forms a key part of Government strategy. The Government emphasis on research and its contribution to society is a further defining element in the contemporary landscape of Irish education. All of these changes are reflected in the procedures for this round of review. The timetable for the completion of the cycle of review over a twelve month period, beginning in September, is envisaged as follows:

Table 2

<b>Typical Schedule for Quality Review Process</b>	
Departmental self-assessment begins	September
PRG's appointed	October
Full draft self-assessments complete (25 pages)	November
Self assessments read by QPSC	December-January
Revisions by departments	January– February
Reports sent to PRG's	2 weeks in advance of visit
Visits by PRG's	February - March
PRG reports complete	End May
Review of Faculty	June
Faculty report complete	End July
Publication of reports	End September

#### **2.2 Departmental Profile**

The purpose of this section of the self-assessment report is to provide an understanding of the context within which the department or unit operates. Quality review and quality improvement are part of the normal work of a university. Departments are therefore asked to reflect on their achievements following the first review cycle, what changes were made and how these have made an impact on the working of the department. A brief account of the range of programmes, the total student complement and the resources available in terms of staff and facilities should also be included. This summary will serve to set the context for future developments.

The introduction should include a consideration of the strategic direction of the department within the context of the Faculty and of the University Strategic Plan, and should indicate direction in the principal areas of work of the department. Copies of the Departmental/Faculty Strategic Plan should be appended to the relevant self-assessment document.

## **2.3 Key Activities**

The self-assessment is summarized in the form of a Quality Review Map, in which the key activities of the department undertaking review are identified and assessed in terms of the three broad strategic outcomes of the University – Student Learning, Knowledge Creation and Dissemination, and Contribution to Social, Political and Economic Development. An example for an academic department is given in Table 3 at the end of Chapter 2. The level to which an activity contributes to an objective will undoubtedly vary, with aspects of the work of a department contributing to one, two or all three of the strategic objectives. The map is intended as one possible means of summarizing the process and is in no way designed to constrain more narrative approaches.

### **2.3.1 Teaching, Learning and Assessment**

The University's *Teaching and Learning Strategy* defines our approach to the development of teaching and learning in the institution in four broad areas: undergraduate education, graduate education, access and lifelong learning and finally, pedagogical innovation and transformation. Each theme delineates developmental goals and actions. In reviewing its approach to teaching and learning the department is asked to outline how it addresses these areas and leads to the achievement of the strategy.

In addition to promoting reflection at the level of institutional and departmental strategy, one of the key strengths of the quality review process in NUI Maynooth is that it facilitates dialogue within departments and faculties at a detailed curricula level, encompassing both content and process. Courses and their delivery are discussed with a view to ongoing improvement.

For the purposes of this exercise, a course is defined as a set of modules, the successful completion of which will lead to the award of degree (single honours) or part of a degree (joint honours etc.) within an individual subject. Departments should organise responses so as to focus on the course, using individual modules for illustrative purposes, rather than reviewing at the level of the module. A detailed interrogation of selected modules – perhaps one at each level – might be used to evaluate current practice and investigate where good practice might be disseminated or difficulties solved.

In Appendix 3 a detailed set of questions is included to assist departments in discussions, and facilitate the preparation of the self-assessment report. The evaluation should address the following areas, showing how the activities contribute to the broad strategic outcomes of the University as outlined in Table 3 at the end of this chapter.

**Curriculum design:** How is the curriculum planned and does it achieve its objectives?

**Teaching:** Do the teaching formats work well?

**Assessing student learning:** How does this contribute to student learning?

**Information for Students:** Is this comprehensive, accessible and appropriate?



**Course evaluation and appraisal:** What structures are in place to evaluate courses?

**Academic administration:** Is this managed effectively?

### **2.3.2 Research and Scholarship**

Research is an integral part of the work of any university. The self-assessment report should clearly define the research strategy of the department, and its relationship to the research strategy of the Faculty and of the university. Appendix 3 contains a set of questions to assist departments in discussions, and facilitate the preparation of the self-assessment report.

The report should provide:

- Evidence of research activity undertaken in the past three years. It may be helpful to categorise research in terms which are meaningful for a particular discipline, e.g. scholarship, basic, strategic, applied and contract research.
- A brief outline of the research interests of each staff member together with recent activity in this field.

While the self-assessment document should aim to be succinct the following is a list of materials which it would normally be expected would be available for consultation by the Peer Review Group:

Departmental research strategy/plan.

List of publications of all staff.

List of contribution to significant national and international conferences.

List of editorial and academic refereeing work of staff.

Record of research grants awarded to staff members.

Record of research visits by academic staff to academic libraries, repositories and other institutes.

Record of researchers visiting the department.

In writing a self-assessment, departments should make reference to these materials as evidence for their evaluation.

### **2.3.3 Service to Academic and other Communities: Internal and External**

The department's contribution to University administration, to staff and student activities, to knowledge transfer, to the development of the many communities the University serves and other appropriate activities outside the University should be considered. The department should consider the following questions:

- Does the staff play an active role in the development of the University by participation in committees and University boards?
- Do staff members participate in the development of their particular subject areas/specialisms through membership of scholarly societies and professional bodies?
- Do staff members contribute to the maintenance of standards in their subjects/specialisms by acting as external examiners for other third-level institutes at both undergraduate and postgraduate level?
- Does the staff contribute to the broader needs of society at local, regional and national level through for example:

1. Meeting demand for off-campus courses where appropriate?
2. Contributing to appropriate advisory bodies and consultancy to external agencies?
3. Supporting community engagement projects and volunteering?

### **2.3.4 Additional Key Activity**

A department may identify an additional key activity, which is not encompassed by the major activities of Teaching, Learning and Assessment, Research and Scholarship or service to the community. This might include emerging activities or areas of work undertaken on historical grounds. In these circumstances, the department is free to review this activity, which should be considered in terms of its contribution to the department's mission and the three strategic objectives of the university.

### **2.3.5 Management and Leadership**

Universities are complex organisations and good communication is essential to the smooth running of a department. In evaluating their performance departments should reflect on the following questions:

- Are mechanisms in place to ensure that significant information coming to the department from outside is brought to the attention of all relevant staff members?
- Are the staff aware of the department's internal policies and departmental strategies?
- Are there regular Departmental meetings at which all aspects of course provision and delivery can be discussed?
- Do structured communication mechanisms exist to enable an open exchange of views between staff and students, e.g., Staff/student committee or class representative/course director etc.?

### **2.3.6 Training and Development**

In evaluating their staff development, departments should consider the following questions:

- Are staff development needs systematically identified and supported in relation to individual aspirations, the curriculum and institutional requirements?
- Is a departmental staff development plan in place?
- Are all staff, academic, administrative and technical, encouraged to undertake appropriate staff development related to identified needs? These activities might include: conferences, workshops, induction, research visits, secondments, sabbatical leave and in-service training.
- Is the benefit of training and development activity to the individual, the department and the institution regularly evaluated?

### **2.3.7 Implementation of University Policies and Processes (e.g. Equality, Health & Safety etc.)**

- Are members of the department made aware of policy statements and protocols adopted by the University? Does the department have procedures in place to ensure that these policies are understood and implemented by all its members? The full list of such policy statements and protocols is available on the University Freedom of Information (FOI) Web page, under “Publications”.

### **2.3.8 Integrating Support Services**

Departments of the University do not work in isolation, but liaise with each other to optimise the functioning of the institution as a whole. In this section the department is asked to reflect on its systems for liaison between departmental and institution-wide services.

#### **Student Support**

- Through consultation with the admissions office, is provision made for information and advice to potential students during the application phase?
- Does the department recognize the need of all students for guidance and is provision made for counselling and assistance in the curricular, vocational and personal domains? Are there appropriate referral mechanisms in place in the department?
- Does the department have a systematic mechanism in place to ensure that all staff members are aware to the range of student support services and the appropriate referral systems?
- Is there a general attitude of concern for the well being of students among individual staff?

#### **Academic Support**

- Does the department have liaison systems in place with the library, audio-visual, computer and other academic services to ensure that appropriate support is in place for the curriculum?
- In collaboration with the International Office does the department ensure that systems are in place to enable new and existing students to obtain maximum benefit from international exchange programmes (ERASMUS, SOCRATES etc)?

#### **Administration**

- At departmental level, is responsibility for particular aspects of student and staff support clearly identified, and is liaison maintained between departmental and institution-wide services such as the Bursar’s Office, Human Resources, Health and Safety and Security?

### **2.3.9 Specific Thematic Area**

A group of cognate departments or a faculty may choose to consider a common theme jointly in their review where a common issue faces them – possible examples might include student absenteeism, student engagement or potential of shared programmes. This practice could prove valuable in the context of interdisciplinarity. In order to support an open and creative approach to such initiatives, all that is required for the inclusion of such a theme, is that the

participating departments agree on the scope, objectives and criteria to be used and document them in the self-assessment of each department involved.

### **2.3.10 Other factors**

Each department undertaking review contributes to the organization of the University in its own unique way. Any other relevant aspects of a department's work not covered above should be dealt with in this section.

## **2.4 Quality Improvement Plan**

The culmination of the process of self-assessment is the preparation of a strategic quality improvement plan, taking into account the strengths, weaknesses and opportunities for quality enhancement identified by the department arising from its comprehensive self-analysis.

The improvement plan should be firmly placed in the context of the department's capabilities and resources as well as the strategic direction of the Department, the Faculty and of the University as a whole.

## **2.5 Departmental Strategy Proposals**

In this section the department should summarise specific strategic developments it proposes to undertake within the current strategic planning period, and, where applicable, indicate areas of development that it proposes to explore towards the next five year planning period.

## **2.6 Supporting Material**

The self-assessment will be grounded in part on statistical information from the University MIS systems. Student data will be available online and should be analysed in collaboration with the Institutional Research Officer of the University. The following categories of information may be relevant:

### Student Numbers

- Students numbers, undergraduate and postgraduate x 3 years
- FTE undergraduate and postgraduate x 3 years
- Occasional Students by module x 3 years

### Progression Indicators

- Undergraduate Pass / Fail per module (Average Marks)
- Undergraduate Pass / Fail by course
- Classification – distribution of grades
- Completion by whole University and Faculty, over 6 year term
- Entry points of students by course
- Progression – Proxy for it in student numbers tables

### Data Collection Instruments

Standardised questionnaires which may be tailored to departmental needs.

Table 3

<b>DEPARTMENT QUALITY REVIEW MAP</b>			
<b>2.2 Departmental Profile, Mission and Strategic Objectives Alignment with University Mission and Strategic Goals</b>			
	<b>BROAD STRATEGIC GOALS OF UNIVERSITY</b>		
	<b>Student Learning</b>	<b>Knowledge Creation and dissemination</b>	<b>Social, Political and Economic Development</b>
<b>Departmental Activities</b>	<b>Contribution to achievement of strategic goal</b>	<b>Contribution to achievement of strategic goal</b>	<b>Contribution to achievement of strategic goal</b>
<b>2.3.1 Teaching, Learning and Assessment</b>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>
<b>2.3.2 Research and Scholarship</b>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>
<b>2.3.3 Service to Academic and other Communities: Internal and External to the University</b>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>
<b>2.3.4 Additional Key Activity (where applicable)</b>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>
<b>2.3.5 Management and Leadership of the Department</b>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>
<b>2.3.6 Training &amp; Development</b>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>
<b>2.3.7 Implementation of Policies and Processes requiring compliance*</b>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>
<b>2.3.8 Integrating Support Services</b>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>
<b>2.3.9 Specific Thematic Area (optional)</b>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>
<b>2.3.10 Other Factors</b>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>
<b>2.4. Quality Improvement Plan</b>	<b>QUALITY IMPROVEMENT PLAN</b>		
<b>2.5 Department Strategy Proposals</b>	<b>DEPARTMENT STRATEGY towards 2011 and beyond</b>		

## Chapter 3

### Guidance Criteria for Administrative, Service and Professional Departments Conducting a Self-assessment

#### 3.1 Introduction

Over the past decade there have been major changes in Irish universities. Two developments that have far reaching consequences for teaching and learning at NUI Maynooth are the implementation of a fully modular curriculum and the alignment of this to the National Qualifications Framework. In addition, the student population has changed, with a greater concentration of mature entrants and students from diverse backgrounds. The pattern of student behaviour, with many students taking paid employment for significant periods of time during the academic term, is a further factor that has an impact on the university experience.

Moreover, the modernisation of governance and organisational structure within Irish education forms a key part of Government strategy. The Government emphasis on research and its contribution to society is a further defining element in the contemporary landscape of Irish education. All of these changes are reflected in the procedures for this round of review. The timetable for the completion of the cycle of review over twelve months is envisaged as follows:

Table 4

<b>Typical Schedule for Quality Review Process</b>	
Departmental and Faculty self-assessment begin.	September
Department submits list of potential PRG members	October
PRG's appointed	November
Full draft self-assessments complete (25 pages)	December 15
Self assessments read by QPSC	January 15
Revisions by departments	January 15 – February 15
Reports sent to PRG's	2 weeks in advance of visit
Visits by PRG's	February - May
PRG reports complete	End May
Review of Faculty	June
Faculty report complete	End July
Publication of reports	End September

#### 3.2 Departmental Profile

The purpose of this section of the self-assessment report is to provide an understanding of the context within which the department operates. Quality review and quality improvement are part of the normal work of a university. Units are therefore asked to reflect on their achievements following the first review cycle, what changes were made and how these have made an impact on the working of the department. A brief account of the range of services provided, the nature of interfaces with staff, students and external agencies and the resources available in terms of staff and facilities should also be included. This summary will serve to set the context for future developments. The introduction should include a consideration of the strategic direction of the unit within the context of the University Strategic Plan.

### **3.3 Key Activities**

The self-assessment is summarized in the form of a Quality Review Map, in which the key activities of the department undertaking review are identified and assessed in terms of the three broad strategic outcomes of the University – Student Learning, Knowledge Creation and Dissemination, and Social, Political and Economic Development. An example for an administrative department is given in Table 5 at the end of Chapter 3.

#### **3.3.1 Identify Key Activities**

Each Administrative and Service Department within NUI Maynooth will differ in its structure and in the service it provides to the staff and students of the University. The department is asked to identify its own Key Activities for the self-assessment process as shown in Table 5, showing how these contribute to the overall strategic outcomes of the University.

#### **3.3.2 The Number of Key Activities**

The template allows space for two key activities; however, the numbering on the table serves merely as a reference tool and should in no way constrain departments from identifying all their key activities

Some activities will be common to all administrative departments. These are listed below.

#### **3.3.3 Service to professional and other communities: internal and external**

The department's contribution to University administration, to staff and student activities, to knowledge transfer, to the development of the many communities the University serves and other appropriate activities outside the University should be considered. The department should address the following questions:

- Does the staff play an active role in the development of the University by participation in committees and University boards?
- Does staff participate in the development of their particular professional areas/specialisms through membership of professional bodies?
- Does staff contribute to the maintenance of standards in their specialisms by participating in university sector networks, e.g. IUA Group?
- Does the staff contribute to the broader needs of society at local, regional and national level through contributing to appropriate advisory bodies and consultancy to community and other external agencies?

#### **3.3.4 Additional key activity**

A department may identify an additional key activity, which is not encompassed by the major activities of Teaching, Learning and Assessment, Research and Scholarship or service to the community. This might include emerging activities or areas or work undertaken on historical grounds. In these circumstances, the department is free to review this activity, which should be considered in terms of its contribution to the department's mission and the three strategic objectives of the university.

### **3.3.5 Management and Leadership**

Universities are complex organisations and good communication is essential to the smooth running of a department. In evaluating their performance departments should reflect on the following questions:

- Are mechanisms in place to ensure that significant information coming to the department from outside is brought to the attention of all relevant staff members?
- Are the staff aware of the department's internal policies and departmental strategies?
- Are there regular departmental meetings at which all aspects of the smooth running of the department can be discussed?

### **3.3.6 Training and development**

In evaluating their staff development, departments should consider the following questions:

- Are staff development needs systematically identified and supported in relation to individual aspirations and institutional requirements?
- Is a departmental staff development plan in place?
- Is all staff encouraged to undertake appropriate staff development related to identified needs? These activities might include: conferences, workshops, induction, secondments, sabbatical leave and in-service training.
- Is the benefit of training and development activity to the individual, the department and the institution regularly evaluated?
- Are members of the department made aware of policy statements and protocols adopted by the University? Does the department have procedures in place to ensure that these policies are understood and implemented by all its members? The full list of such policy statements and protocols is available on the University Freedom of Information (FOI) Web page, under "Publications."

### **3.3.7 Implementation of Policies and Processes requiring compliance**

- Are members of the department made aware of policy statements and protocols adopted by the University? Does the department have procedures in place to ensure that these policies are understood and implemented by all its members? The full list of such policy statements and protocols is available on the University Freedom of Information (FOI) Web page, under "Publications".

### **3.3.8 Integrating support services**

Departments of the University do not work in isolation, but liaise with each other to optimise the functioning of the institution as a whole. In this section the department is asked to reflect on its systems for liaison between departmental and institution-wide services.

### **3.3.9 Specific Thematic area**

A group of services or departments may choose to consider a common theme jointly in their review where a common issue faces them – possible examples might include communications, referral systems, student engagement or term-time student working. In order to support an open and creative approach to such initiatives all that is required for the inclusion of such a theme is that the participating departments agree on the scope, objectives and criteria to be used and document them in the self-assessment of each department involved.



### **3.3.10 Other factors**

Each department undertaking review contributes to the organization of the University in its own unique way. Any other relevant aspects of a department's work not covered above should be dealt with in this section.

### **3.4 Quality Improvement Plan**

The culmination of the process of self-assessment is the preparation of a quality improvement plan, situated within the department's strategic and operational plans, taking into account the strengths, weaknesses and opportunities for quality enhancement identified by the department arising from Section 2 above.

The plan should be firmly placed in the context of the department's capabilities and resources as well as the strategic direction of the University as a whole.

### **3.5 Department Strategy Proposals**

In this section the department should summarise specific strategic developments it proposes to undertake within the current strategic planning period, and, where applicable, indicate areas of development that it proposes to explore towards the next five year planning period.

### **3.6 Supplementary Material**

The self-assessment will be grounded in part on statistical information from the University MIS systems. Student data will be available online and should be analysed in collaboration with the Institutional Research Service of the University. The following categories of information may be relevant:

- Staff data, e.g. numbers, categories and gradings, qualifications and age profile if appropriate. In addition, routinely collected statistical information on specific aspects of the service will be included. Three years of statistical information is generally sufficient to see patterns.
- List of support documentation.
- Any other data relevant to the self-assessment process or to the Peer Review Group.

Table 5

<b>DEPARTMENT QUALITY REVIEW MAP</b>			
<b>3.2 Departmental Profile, Mission and Strategic Objectives Alignment with University Mission and Strategic Goals</b>			
	<b>BROAD STRATEGIC GOALS OF UNIVERSITY</b>		
	<b>Student Learning</b>	<b>Knowledge Creation and dissemination</b>	<b>Social, Political and Economic Development</b>
<b>Departmental Activities</b>	<b>Contribution to achievement of strategic goal</b>	<b>Contribution to achievement of strategic goal</b>	<b>Contribution to achievement of strategic goal</b>
<b>3.3 Key Activity One</b>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>
<b>3.3 Key Activity Two</b>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>
<b>3.3.3 Service to Professional and other Communities: Internal and External to the University</b>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>
<b>3.3.4 Additional Key Activity (where applicable)</b>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>
<b>3.3.5 Management and Leadership of the Department</b>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>
<b>3.3.6 Training &amp; Development</b>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>
<b>3.3.7 Implementation of Policies and Processes requiring compliance*</b>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>
<b>3.3.8 Integrating Support Services</b>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>
<b>3.3.9 Specific Thematic Area (optional)</b>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>
<b>3.3.10 Other Factors</b>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>	<i>Evidence, analysis, evaluations</i>
<b>3.4. Quality Improvement Plan</b>	<b>QUALITY IMPROVEMENT PLAN</b>		
<b>3.5 Department Strategy Proposals</b>	<b>DEPARTMENT STRATEGY towards 2011 and beyond</b>		

## **Chapter 4**

### **Guidelines for External Reviewers**

*This systematic organization and promotion of quality assurance at the initiative of the universities themselves is, in the opinion of the EUA teams, unparalleled in any other country in Europe, or indeed in the United States and Canada. The system would appear to strike the right tone and combination of public interest, accountability and university autonomy. It encourages a greater focus on quality and improvement than some systems worldwide, while at the same time being less intrusive than some other systems in Europe.*

*European Universities Association Review of Quality Assurance in Irish Universities 2005*

#### **4.1 The Irish Context**

The Universities Act (1997) requires the Chief Executive of each university to put in place procedures for “quality assurance aimed at quality improvement”. The Quality review exercise is such a procedure. In this section colleagues reflect on contextual factors that influence the operation of quality review procedures at a local level. This is done particularly in view of the participation of international reviewers in the process. The typical pattern of the process and the University’s expectations of the external review especially in terms of reporting are also set out in some detail.

The system of Quality Review adopted by the Irish Universities has been the subject of international review and judged favourably, as the above quotation confirms. It is intended that the holistic approach to quality improvement be maintained, as well as the principle of devolved ownership of the process. NUI Maynooth has already demonstrated its commitment to the principle of quality improvement and will engage fully with the second cycle of review.

#### **4.2 The Irish Funding Context**

Universities in Ireland are largely funded from public resources with limited augmentation through research income from other sources and very small amounts of private donations. Against this background there are stringent controls to ensure that all resources are used efficiently and effectively. Over recent years competitive processes have been introduced in respect of significant components of the funding model. For example, higher weightings are attached to postgraduate students as opposed to undergraduates which may impact on the recruitment strategies of departments; indicators such as completion rates, research income, and scholarly publications are being used more frequently; and strategic coherence, innovation and collaboration are key factors in the allocation of Strategic Innovation Fund resources.

Within the University almost all personnel and infrastructural expenditure is managed centrally. In addition Departments are allocated annual operational budgets to cover occasional staff payments, normal running costs, and examinations in the case of the academic departments. The budgets are determined by a number of factors including the numbers of staff and students in the department, and also evidence of innovation to support the goals of the University Strategic Plan.

### **4.3 Approach**

The approach to Quality Assurance at NUI Maynooth is formative rather than summative in its intent and is based on departments gathering and interpreting information about their work in order to improve. Work is continuing internally through the second cycle of Quality Review and nationally under the aegis of the Irish University Quality Board (IUQB) on the on-going enhancement of the process and the sharing of good practice.

The two key elements of the quality review process are self-assessment and Peer Group Review. The Guidelines set out in this document offer clear guidance on how to address each of these aspects while offering scope to the departments to adapt the methodology to particular needs that may arise in an individual department. The approach emphasises the co-operation of the departments and encourages them to discover their own strengths and weaknesses and plan for enhancement in a practical and realistic way.

This approach has led to an atmosphere of constructive dialogue and trust between the QPSC and the participating units, which is vital to the successful outcome of the whole exercise and is therefore unchanged in the second cycle.

### **4.4 Procedures**

The Quality Review Exercise encompasses all aspects of the work of the department. It includes teaching and learning, research and administration, in addition to the department's relationship with the national and international scholarly community and its external relationship with society and the professions. All members of the department – academic, administrative and members of the student body – are involved in the process, which should be as comprehensive as possible. It is important to note that teaching and research are viewed as part of a coherent whole and are not subject to separate review exercises.

Particular emphasis is placed on the description of quality improvement which has been at the heart of the quality review process in Irish Universities since its inception. NUI Maynooth committed itself to the principle of Quality Review and Quality Improvement in 1995 and this is the second review cycle for most departments and units. The Quality Review of Irish Universities by the EUA quoted above commended the process, and in order to build on their success recommended that external reviewers should:

- Take a wide view of quality including internationalisation, interdisciplinarity and research.
- Make a clear distinction between those recommendations that can be implemented without additional resources and those which require investment.
- Focus on larger groups of departments such as Faculties.

These recommendations are addressed in this cycle by organising the review schedule so that all the departments in one Faculty are reviewed in one year. This enables the Faculty to conduct a review as outlined in 5.4.

#### **4.5 Peer Review Group**

*“A common framework for quality assurance has been agreed collectively by all the Irish universities through the IUQB. This framework is based on the internationally accepted and recognized principles of an initial self-assessment, a peer review and report, followed by action to ensure quality improvement.”*

The Peer Review Group is an essential motivating and constructive element of Quality Review. It offers an external and international perspective on a department’s activities, whilst at the same time supporting colleagues within their discipline or professional area from a position of knowledge and understanding which is uniquely available to experts in the same field.

The membership of the Peer Review Group is comprised of:

- Two senior members of the University, usually drawn from the QPSC
- Two international peers

The QPO liaises with the peer review team and oversees the arrangements.

#### **4.6 Role of the Peer Review Group**

The peer review is a response to a department’s internal review as documented in the Self-assessment Report. It is focussed on the department’s strategic plan for improvement, but may also deal with matters which have not arisen in the internal review. The report should comment on the strengths and weaknesses of the department, identifying examples of the good practice to be disseminated throughout the University and making constructive recommendations on matters which require improvement. There should be specific comment on the department’s quality improvement plan.

In keeping with the formative nature of the process, it is desirable that a Peer Review Group expresses its recommendations in a manner which supports quality improvement at a departmental level. Such an approach would be in keeping with the spirit in which the exercise has been undertaken to date and would help to maintain the ethos of partnership and trust which currently prevails. It is not intended that the work of individual members of the department be subject to comment. Similarly, it is not intended that the process lead to comparisons between departments or institutions. Although recommendations made by the Peer Review Group will form part of the general consideration of funding, there is no direct link between the exercise and the allocation of resources.

The length of the report is at the discretion of the writers, who should bear in mind the following provisos:

- The report should contain sufficient contextual information for the document to be read and understood as a stand alone document.
- It should be focussed on realistic quality enhancement goals aligned to the strategic direction of the University.

## **Chapter 5**

### **Pattern of the Visits**

#### **5.1 Duration**

The visit to the department will take place during a three day period. On arrival, the external reviewers will normally meet the President of the University, the internal reviewers, the Head of Department and other members of the department undertaking assessment.

#### **5.2 Schedule**

The visit will be the occasion for the external reviewers to consider the report and the action plan prepared by the department, in the context of the departmental facilities and with the opportunity to speak directly to its staff and students. The visit will include the following components:

- Meeting of external reviewers with the Head of Department
- Tour of facilities.
- Meetings of external reviewers with individual staff – academic, technical, administrative, etc.
- Meetings of external reviewers with students, both undergraduate and postgraduate.
- Review of the documentation presented by the department
- Meetings of the Peer Review Group

The schedule for each visit will be designed in consultation with the Head of Department and the Peer Review Group.

#### **5.3 Report**

A draft report of up to 5000 words will normally be forwarded to the University within three weeks of the visit. Before it is finalised the Head of Department is asked to read the draft with a view to factual correction only. The report will follow the format set out in Appendix 4, and will be published on the QPO webpage, <http://qpo.nuim.ie/>.

#### **5.4 Faculty Review**

After the Quality Reviews have taken place for each Department and Research Institute in a Faculty, and the Peer Review Reports for each such unit have been published on the web in the usual fashion, the Dean of the Faculty shall convene and chair a meeting of the Heads of the Departments, the Directors of Research Centres and Institutes, and the Director of Quality, who shall act as Secretary. The Director of Quality shall prepare a document summarizing the main features of the Peer Review Reports under various headings, for consideration by the meeting:

1. The comments of a positive nature which do not require action from units or the University, whether these relate to a particular unit or are common to a number of Reviews;

2. Recommendations which involve more than one unit and require those units to act together with each other and possibly officers and offices of the University;
3. Recommendations which involve only one unit, which require actions from that unit, possibly in collaboration with officers and offices of the University, and which contribute to the enabling of those recommendations mentioned under 2.

The meeting shall note the matters mentioned under 1 and 3, and focus on the recommendations under 2. In particular, the meeting should identify which recommendations need to be acted on in the areas of common concern, and agree on precisely what actions should be undertaken in order to implement the recommendations.

After this meeting, the Director of Quality shall prepare a draft report of the agreed outcomes and circulate the draft report by email to the Dean, Heads of Departments and Directors of Institutes for their comments. Once approved, this document will be known as the Faculty Quality Assurance and Development Report. The Dean shall bring the Report to the attention of the Faculty, for noting and forwarding to the Academic Council for information. After the Faculty has noted the Report, the Director of Quality shall send the Report to the Quality Promotion Sub-Committee, to be noted and forwarded for information to the Planning and Development Committee. The Report shall be published on the web, and the Governing Authority so informed.

### **5.5 Implementation**

The Department, in consultation with the Dean, will implement its quality improvement plan and contribute to the University Strategic Planning process. The Dean will report on an annual basis to the QPSC on the progress that has been achieved. A report on progress will be incorporated into the annual report of the QPSC to Governing Authority.

*Extract from*

***The Universities Act (1997)***

Quality Assurance

**35 — (1)** A governing authority, in consultation with the academic council, shall, as soon as practicable after the governing authority is established under this Act and at such other times as it thinks fit, require the chief officer to establish procedures for quality assurance aimed at improving the quality of education and related services provided by the university.

**(2)** The procedures shall include-

- (a)** the evaluation, at regular intervals and in any case not less than once in every 10 years or such longer period as may be determined by the university in agreement with An tÚdúrá, of each department and, where appropriate, faculty of the university and any service provided by the university, by employees of the university in the first instance and by persons, other than employees, who are competent to make national and international comparisons on the quality of teaching and research and the provision of other services at university level,
- (b)** and assessment by those, including students, availing of the teaching, research and other services provided by the university,

and shall provide for the publication in such form and manner as the governing authority thinks fit of findings arising out of the application of those procedures.

**(3)** A governing authority shall implement any findings arising out of an evaluation carried out in accordance with procedures established under this section unless, having regard to the resources available to the university or for any other reason, it would, in the opinion of the governing authority, be impractical or unreasonable to do so.

**(4)** A governing authority shall, from time to time, and in any case at least every 15 years, having regard to the resources available to the university and having consulted with An tÚdúrá, arrange for a review of the effectiveness of the procedures provided for by this section and the implementation of the findings arising out of the application of those procedures.

**(5)** A governing authority, in a report prepared in accordance with section 41, shall publish the results of a review conducted under *sub-section (4)*.



### ***Terms of Reference for the Quality Promotion Sub-Committee***

- To promote and encourage principles which will enhance the quality of the educational and work experience of students and staff.
- To promote and update guidelines for departments and units to carry out self-evaluation
- To liaise with departments or units in their self-evaluation.
- To organise peer review procedures for departments or units.
- To liaise with the Human Resources Committee and the Quality Promotion Office regarding programmes for staff development.
- To promote the integration of policies and processes aimed at enhancing the quality of outcomes across the University
- To prepare an annual report for the Planning and Development Committee and such other reports as the President may require.

The membership of the Sub-Committee in September 2009 consists of:

- Professor Jim Walsh, Deputy President and Vice President for Innovation (Chair)
- Professor Ray O'Neill, Vice President for Research
- Dr David Redmond, Registrar
- Dr Thomas O'Connor, Dean of the Faculty of Arts, Celtic Studies and Philosophy
- Professor Rowena Pecchenino, Dean of the Faculty of Social Sciences
- Dr Bernard Mahon, Dean of the Faculty of Science and Engineering
- Professor Tom Collins, Dean of Teaching and Learning
- Dr Honor Fagan, Dean of Graduate Studies
- Professor Margaret Kelleher, Director, An Foras Feasa
- Mr Cathal McCauley, Librarian
- Mr Colm Nelson, Campus Services Officer
- Mr Eoin Byrne, Vice President, Communications and Development, Students' Union
- Dr Richard Watson, Director of Quality (Secretary)

### **Questions for discussion during preparation of self-assessment report**

#### **Teaching and Learning**

- **Curriculum design:** Why are these particular areas chosen for inclusion in the student learning experience? Are other areas of the discipline excluded and if so why? Do the chosen areas form a coherent experience? Is it appropriate to the students who are studying the programme? Does the choice conform with international practice in the discipline? Departments should illustrate how modules contribute to the achievement of the stated programme learning outcomes.
- **Teaching:** How does the teaching approach encourage students to take responsibility for their own learning? Does the pace of teaching take account of the nature of the course and the students' varied abilities?  
Is the academic environment, physical and social, generally conducive to learning? Is the level of research and other scholarly activity appropriate to the level of teaching? Are there adequate specialist facilities – including practical and experimental learning facilities – for the curriculum on offer?  
Is teaching format consistent with the aims and objectives of the course, e.g. large lecture, small tutorial group, laboratory, project or fieldwork? Are general skills such as communication and teamwork encouraged?  
Are teaching methods innovative, varied, and do they make effective use of new technology? While recognising that individual teaching styles are a potential enrichment of the educational experience of a student, what efforts are made to take maximum benefit from new teaching techniques?
- **Assessing student learning:** Is student learning assessment consistent with the aims and objectives of the course?  
Is a range of assessment methods used and procedures regularly applied to ensure that assessment schemes are valid and reliable?  
Is the scope and weighting of assessment schemes clear and known to staff and students?
- **Information for Students:** At the commencement of the module, is each student provided with detailed information (in written format) on the modular learning outcome and objective of the course, the organisation of the module, the scheduling, and the allocation of the marks for formal examinations, continuous assessment and project work, and the format of examination paper? Are the handouts given to students on the above and on course work of an appropriate standard?  
Is student progress systematically recorded and monitored, fed back to students in a timely fashion and supportive intervention undertaken if necessary?  
Are appropriate credit transfer provision mechanisms (e.g. ECTS, etc.) in place to facilitate student exchanges?
- **Course evaluation and appraisal:** What formal structures exist to obtain regular feedback on aspects of the course from students, graduates, employers, professional bodies and external examiners? How is this feedback acted upon?  
How is student performance monitored within and across modules and how are data used to inform curriculum review?  
How does the department revise its modules and courses for content and coherence?

How are the levels of modules and courses established and mapped on to the national qualifications framework?

- **Academic administration:** Is there effective management of teaching and learning? Are staff resources effectively deployed; roles and relationships well defined and understood by students and staff? Are responsibilities allocated according to an effective work-load model, reflecting qualifications, experience and aptitude?

### ***Research Activity and Output***

The following questions should be addressed:

- To what extent does research activity inform teaching at the undergraduate and postgraduate level?
- To what extent does research activity play a part in postgraduate training?
- Are research results published in a timely and appropriate fashion?
- Are there links with other academics in Ireland and abroad?
- Are there links to research institutes where appropriate?
- Does staff participate in collaborative projects both nationally and internationally?
- Are there links with industry and effective promotion of research and its funding (where relevant)?
- How is research applicable to national policies (where relevant)?
- What is the future direction of research?

### ***Template for a Peer Review Report***

#### ***Introduction***

This should take the form of a brief factual introduction to the department, situating it within the Faculty and the University, and setting out its key areas of activity and resources. There should be a listing of the academic programmes offered by the academic departments and the functions of an administrative department. Details of the visit may also be included.

#### ***Response to the Self-assessment***

This should be a brief analysis following the headings of the self-assessment report.

#### ***Conclusions***

This will be a summary of the strengths, weaknesses and recommendations for quality enhancement of the department. Opportunities for development arising from the strengths should also be addressed. An identification of anything to be highlighted as exemplary practice that might be shared more widely may also be included.

#### ***Recommendations***

Comment on where the department sits within its discipline and to its contribution at all levels e.g. at academic, professional and community level. Comment on the proposals for quality enhancement set out in the departmental quality improvement plan, adding, amending, commending or removing as appropriate.

#### ***Comments on the methodology of the review process***

Any comments the reviewers may wish to make on the process and its implementation may be added here.

### **Complementary Quality Reviews**

Some of the Departments and Research Institutes in the University are already subject to rigorous, extensive and frequent evaluation by professional accrediting bodies and/or funding agencies, and a full Quality Review along the usual lines might be thought to be unnecessary and wasteful of time. At the same time, there is the legal requirement to conduct evaluations and assessments in accordance with Section 35 of the *Universities Act (1997)*.

The Quality Promotion Sub-Committee (QPSC) has agreed to develop a Complementary Quality Review in consultation with the Heads and Directors of the Departments and Institutes which have been previously evaluated in various ways. This will follow the broad outlines of the standard Quality Review and retain the three features of Self Assessment, Peer Review and Follow-up, but it will differ from this model in various ways, to be agreed between the Head of Department or Director of Institute and the Director of Quality in each case.

The main features of this approach that distinguish it from the standard quality review are the following:

- The Self Assessment Report will make full use of whatever material may be used from the previous evaluations, assessments and accreditations, by providing appendices or references to published sources
- The self assessment process will focus on those areas which have not been covered in the previous processes (these might include matters like support for postgraduates and post doctoral fellows, career paths for young researchers, undergraduate teaching if any, and outreach activities)
- Only one external peer reviewer will be invited to visit the Department or Institute
- Only one internal reviewer, drawn as usual from the QPSC, will serve on the Peer Review Group
- The duration of the visit will be for two days rather than three, typically beginning around midday on the first day
- The Self Assessment Report and the Peer Review Report may be quite brief depending on the nature and extent of the previous scrutinies.

### **Reviews of small units**

Some of the Departments, Research Institutes and Administrative Units in the University are quite small, and a full Quality Review along the usual lines might be thought to be unduly expensive and wasteful of time. At the same time, there is the legal requirement to conduct evaluations and assessments in accordance with Section 35 of the *Universities Act (1997)*. Further, it is important that the University be seen to adhere to national norms (as set out, for example, in *A Framework for Quality in Irish Universities*) relating to reviews of standards in teaching and qualifications.

It is proposed that any review of academic Departments, other than Departments which are already subject to rigorous, extensive and frequent evaluation by professional accrediting bodies and/or funding agencies, and hence are eligible to undergo Complementary Reviews, should always include at least two external peer reviewers. It was thought that this was essential to ensure that standards are being maintained, particularly in teaching: if an institution's research is substandard, then this will reveal itself eventually in a loss of funding, whereas no such signal occurs when teaching is substandard.

Subject to this condition, it is proposed to develop a process for Quality Review of Small Units, in consultation with the Heads and Directors of those Departments, Institutes and Units which, in the opinion of the QPSC, do not require a full three day review visit involving up to three external reviewers. This will follow the broad outlines of the standard Quality Review and retain the three features of Self Assessment, Peer Review and Follow-up, but it will differ from this model in various ways, to be agreed between the Head of Department or Unit and the Director of Quality in each case.

The main features of this approach that distinguish it from the standard quality review are the following:

- The duration of the visit will be for two days rather than three, typically beginning around midday on the first day;
- For small Institutes and Units not directly involved in teaching, normally only one external peer reviewer will be invited to form part of a Peer Review Group;
- For small Institutes and Units not directly involved in teaching, normally only one internal reviewer, drawn as usual from the QPSC or the panel of reviewers, will serve on the Peer Review Group.

These modifications should not suggest that the review process is intended to be in any way less rigorous than the standard process.

***Resources***

<http://www.iuqb.ie>

<http://www.neasc.org>

<http://www.eua.be/index.php>