



**UNIVERSITY *of* LIMERICK**

**O L L S C O I L L U I M N I G H**

**Quality Review Process for  
UniJobs**

**November 2017**

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## 1 Quality at the University of Limerick

### 1.1 What do we mean by 'quality', 'quality assurance' and 'quality improvement'?

The quality of an activity or process is a measure of its 'fitness for purpose'. 'Quality assurance' (QA) refers to actions taken to monitor, evaluate and report upon the fitness for purpose of a particular activity in an evidence-based manner, while 'quality improvement' (QI) (sometimes referred to as 'quality enhancement') refers to initiatives taken to improve the fitness for purpose of the target activity/process. QA and QI are intrinsically linked, and often the term QA is taken to incorporate QI activity. QA/QI activities are applied at institutional, unit and individual (personal) level. Continual improvement is achieved by applying QA/QI on an ongoing basis.

In a university context, typical activities or processes include teaching and assessment, research, curriculum development and a myriad of support services provided by support units. At the University of Limerick (UL), an example of an academic QA/QI process is the external examination process, in which external examiners monitor and evaluate the quality (fitness for purpose) of an academic programme or subject, report their findings to the university and include suggestions for improvement. An example of a support unit QA/QI process is the gathering and analysis of customer feedback with a view to identifying and implementing ways of improving services to customers.

The periodic quality review of functional units (academic and support) within the university represents a cornerstone institutional QA/QI mechanism. This document provides details on the quality review process for UniJobs ('the unit').

### 1.2 The quality review process

#### 1.2.1 Purpose

The general purpose of the university's unit-level quality review process is:

- To provide a structured opportunity for the unit to engage in periodic and strategic evidence-based self-reflection and assessment in the context of the quality of its activities and processes and to identify opportunities for quality improvement
- To provide a framework by which external peers, in an evidence-based manner, can independently review, evaluate, report upon and suggest improvements to the quality of the unit's activities and processes
- To provide a framework by which the unit implements quality improvements in a verifiable manner
- To provide UL, its students, its prospective students and other stakeholders with independent evidence of the quality of the unit's activities
- To ensure that all UL units and units associated with or linked to UL, as appropriate, are evaluated in a systematic and standardised manner in accordance with good international practice and in support of the objectives of UL's [quality statement](#)
- To satisfy good international practice in the context of quality assurance in higher education and to meet statutory QA requirements as enshrined in national law

#### 1.2.2 Ethos

The ethos of the quality review process is that participants proactively engage in a mutually supportive and constructive spirit and that the process be undertaken in a transparent, inclusive, independent, evidence-based and cost-effective manner. The process provides

scope for recognising achievement and good practice as well as identifying opportunities for potential quality enhancement.

### **1.2.3 Background**

UL's quality review process was developed and continues to evolve in order to satisfy the university's [quality statement](#) and meet legislative QA requirements. UL complies with the [Qualifications and Quality Assurance \(Education and Training\) Act 2012](#), 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) and/or predecessor organisations. 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.

### **1.2.4 Process modifications**

On rare occasions, circumstances may arise that make it necessary or desirable to modify elements of the quality review process. Minor modifications that have little or no impact on the overall process may be instigated directly by the Director of Quality. Substantive modifications require agreement between the Director of Quality and head of unit. If agreement cannot be reached, the matter is referred to the Vice President Academic & Registrar (VPA&R) for a final decision.

### **1.2.5 This document**

The purpose of this document is to outline UL's quality review process in general terms and to describe in detail the process as it relates to UniJobs. Each phase of the process is set out in its own section, and additional information is included in the appendices. The document owner is the Director of Quality.

## **2 The review of UniJobs**

### **2.1 UniJobs**

UniJobs is a public-sector staffing solutions agency established by UL for the purpose of providing a shared service to achieve efficiencies. Operating on a cost-recoupment basis only, the service is provided exclusively to the public sector. Cost recoupment is a model that essentially shares the cost of operating the business across the users of the business. There is no profit element in the model – costs are recouped and spread evenly among all users of the service.

This shared service model has been purposely adopted to align with the Government's strategy around developing a number of shared service centres across the public sector. UniJobs recruits and employs staff at all levels – from entry administration posts to professional skilled experts – as temporary agency personnel. Operating under licence as a recruitment company, UniJobs is a wholly owned subsidiary of the University of Limerick.

The UniJobs strategic plan has three simple objectives:

1. To be the chosen provider of workforce solutions to the public sector
2. To establish UniJobs as a shared service centre for workforce solutions in the public sector
3. To ensure that UniJobs provides savings to the public sector by being efficient and cost effective

### **2.2 The scope of the UniJobs quality review**

In addition to addressing the general purpose of UL's unit-level quality review activity, the terms of reference of the UniJobs review include the following:

1. To consider and advise on the effectiveness of the mission, strategy and principal activities undertaken by UniJobs
2. To consider and advise on the effectiveness of all aspects of the structure, governance, management and operation of UniJobs
3. To consider and advise on the effectiveness of linkages, relationships and interactions between UniJobs and its key stakeholders within UL
4. To consider and advise on the overall effectiveness of UniJobs and how this could be enhanced at UL

### **2.3 Process authorisation**

The UL cycle 3 quality review schedule and general process characteristics were approved by the Executive Committee on 1 March 2017. Tailored to suit the UniJobs quality review, this guidelines document was approved by the VPA&R on 30 October 2017 and by the UniJobs Board of Directors on 29 November 2017.

### 3 The review process

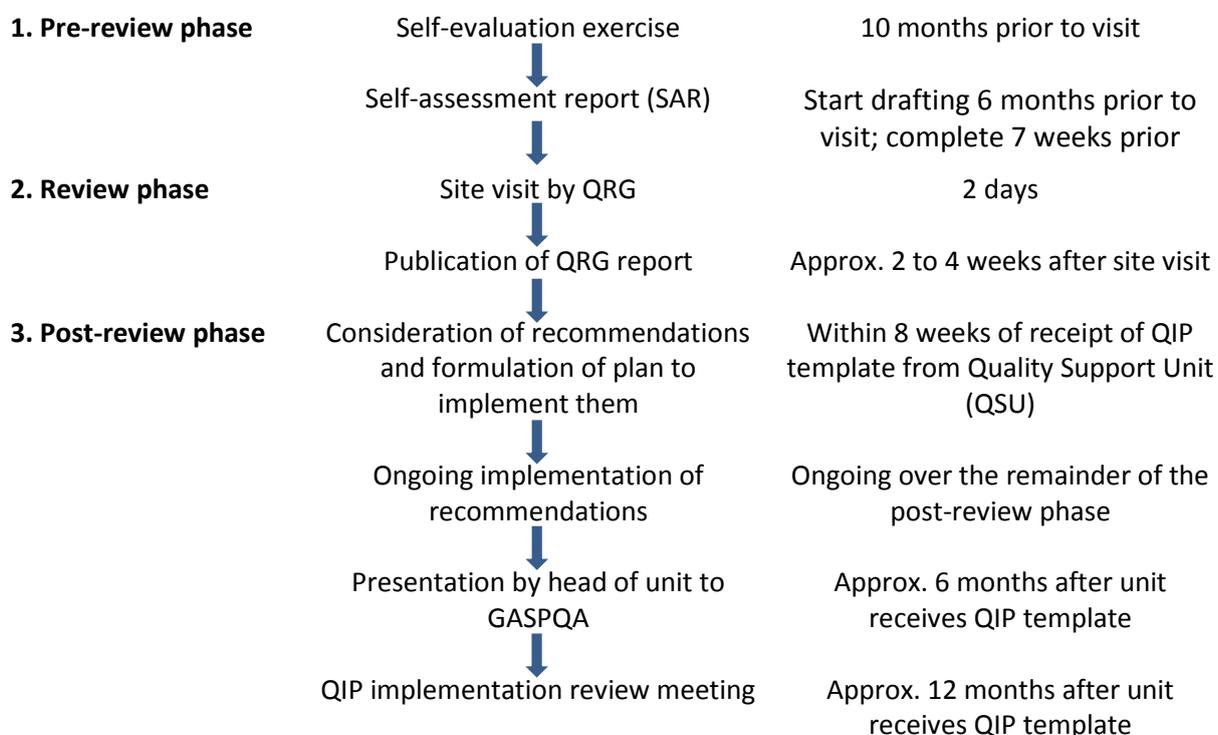
#### 3.1 Overview

UL's quality review process includes an initial self-evaluation by the unit followed by peer review, leading to the formulation and implementation of enhancement activities. The scope of the review encompasses only the unit under review and any groups affiliated to it. The review of the unit is conducted by an independent quality review group (QRG) comprising a chairperson, peers and student representatives.

#### 3.2 Phases of the review process

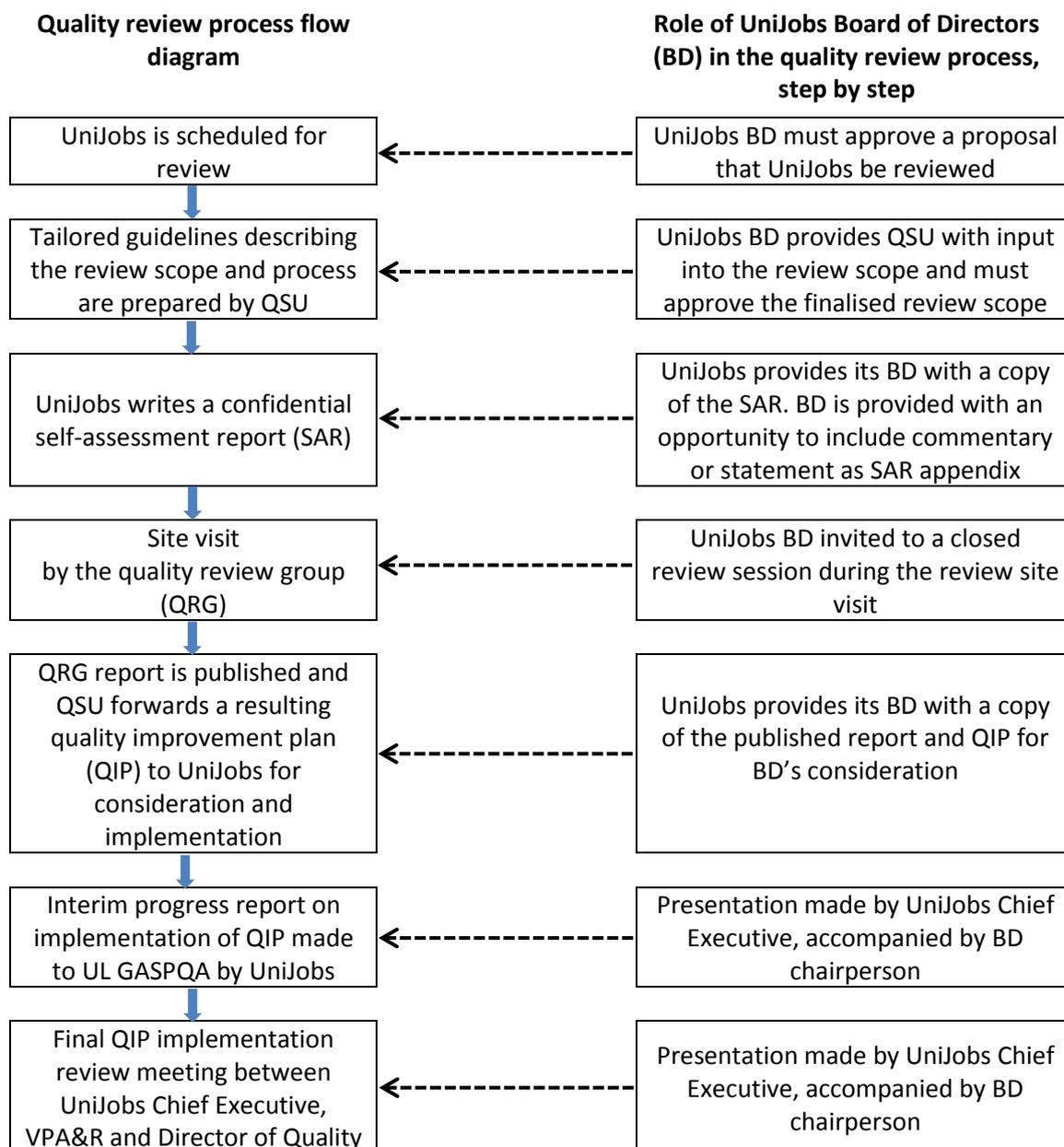
The review process has three distinct phases:

1. Pre-review phase, which includes:
  - i. A self-evaluation exercise conducted by the unit
  - ii. The production of a self-assessment report (SAR) by the unit
2. Review phase: An onsite, two-day review of the unit by the visiting QRG, culminating in the production and publication of a QRG report
3. Post-review phase, which is recorded in a quality improvement plan (QIP) template document. Stages in this phase include:
  - i. Consideration of recommendations by the unit and formulation of a plan to implement the recommendations
  - ii. Ongoing implementation of recommendations
  - iii. Interim progress report to the Governing Authority Strategic Planning and Quality Assurance (GASPQA) committee
  - iv. Implementation review meeting



### 3.3 Role of UniJobs Board of Directors

The quality review process for affiliate units is very similar to that for core units. However, because an affiliate unit is a distinct legal entity, the unit’s Board of Directors (or a subgroup appointed by the Board) is required to play a role in the review process. The stages of the review process requiring action by the UniJobs Board of Directors are outlined below.



### 3.4 Communications, inclusivity and feedback

In line with the ethos of the quality review process (section 1.2.2) and international good practice, the process places an emphasis on communication, inclusivity and feedback. This is achieved in a number of ways, the most notable of which are as follows:

- The campus community is made aware of upcoming quality reviews via a global email from the Quality Support Unit (QSU) to all students and staff.

## *UniJobs Quality Review Guidelines*

- The QSU provides the campus community with opportunities to contribute to the review process by registering their interest in:
  - Submitting commentary for consideration by the unit during the pre-review phase
  - Participating in stakeholder group meetings with the QRG during the site visitThe Director of Quality must be assured that the unit under review takes due cognisance of any such input received during the process.
- The QRG report and a final QIP implementation summary report are published on the websites of the QSU and the relevant unit, and the campus community is made aware of these publications via a global email from the QSU.

## **4 The pre-review phase**

The pre-review phase of the quality review process comprises the following two activities:

1. A self-evaluation exercise conducted by the unit
2. The production of a self-assessment report by the unit

### **4.1 Self-evaluation exercise**

#### **4.1.1 General**

Led by a quality team comprising staff members of the unit, the self-evaluation exercise should be thorough, should involve staff and stakeholder groups and should focus on all activities and services of the unit. The use of an external facilitator with relevant experience of SWOT (strengths, weaknesses, opportunities and threats) analysis and strategic planning can be beneficial to the unit when conducting the exercise.

#### **4.1.2 Quality team**

The first step of the process is for the head of unit to appoint a quality team from within the unit. The team should be put in place at least 10 months before the scheduled QRG visit.

The head of unit must be a member of the team but does not have to act as chairperson. The chairperson should be a senior member of the unit. The quality team should be as representative as possible of the staff profile of the unit. The unit must inform the QSU of the names of the quality team members.

#### **4.1.3 Self-evaluation activities**

Advice and guidance on the self-evaluation activities to be undertaken by UniJobs is available from the QSU. UniJobs may wish to engage the services of a quality consultant to plan the activities, which include, but are not limited to:

- A SWOT analysis
- Gathering and analysing customer/stakeholder feedback via surveys, focus groups or other mechanisms, as appropriate
- Any other activities that the UniJobs quality team believes would contribute to an evidence-based evaluation of the unit's performance

Reports gathered through the above activities should be included as appendices to the self-assessment report.

### **4.2 Self-assessment report**

#### **4.2.1 General**

Six months prior to the review, the quality team begins drafting an analytical, evidence-based self-assessment report (SAR). The reporting requirements for each main section are described in detail in Appendix A.

The SAR and its appendices are reviewed by the QRG in advance of the site visit and will form the basis of the QRG's assessment of UniJobs's performance. The SAR is confidential to UniJobs and will not be seen by persons other than UniJobs staff members, its Board of Directors, the QSU and the QRG without the prior consent of the UniJobs Chief Executive.

The suggested structure of the SAR is given in the next section. The layout and formatting of

the document and quality of the writing style should be professional. To this end, it is strongly recommended that the services of a technical writer be sought at the earliest opportunity.

#### **4.2.2 Structure**

The SAR of a typical UL unit can be up to 40 pages in length<sup>1</sup> (approx. 15,000–17,000 words) and must not exceed 50 pages (approx. 18,000–20,000 words). For smaller units, such as UniJobs, it is envisaged that the SAR would be somewhat shorter in length. The SAR should be structured in discrete sections (chapters). While default chapter headings are suggested below, the final structure of the SAR will be agreed between the QSU and UniJobs.

- Unit overview: mission, strategy and governance
- Functions, activities and processes
- Service users and feedback
- Relationships and engagement with UL

#### **4.2.3 Content**

The SAR should accurately describe UniJobs's strengths and weaknesses and should specify plans for continual improvement. Planned improvements should be specified within relevant sections of the SAR, summarised in bullet points at the end of each relevant section and listed in a quality improvement plan (QIP), which should be included as an appendix to the SAR. The QRG will expect to see evidence of routine stakeholder consultation. The details of surveys, focus groups and other feedback mechanisms should be described briefly in the relevant section and in full in the appendices.

#### **4.2.4 Consensus**

The SAR should reflect the input of all UniJobs staff and must be available to all UniJobs staff for comment during the final drafting stages.

#### **4.2.5 Chairperson's review of the SAR**

It is accepted practice for the QRG chairperson to be invited to read and comment on an advanced draft of the SAR 10 weeks before the review visit. This can beneficially be followed by a telephone discussion between the quality team leader and the QRG chairperson for the purposes of familiarisation and feedback.

#### **4.2.6 Distribution**

At least seven weeks before the QRG visit, the unit must email the finalised SAR and appendices to the QSU. All unit staff must have access to the final report and appendices. This can be achieved by placing the material in a location that is accessible only to the unit, such as SharePoint or a shared drive. The head of unit must provide the governance body (i.e., the UniJobs Board of Directors) with a copy of the SAR for information.

Six weeks before the review visit, the QSU sends the SAR and appendices to each member of the QRG. Before the material is sent out, the Director of Quality (or a nominee acceptable to the unit under review) reads the SAR to check for factual errors or the presence of statements that might be considered ambiguous, potentially biased or potentially misleading. Any concerns identified will be passed on in writing by the Director of Quality (or

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<sup>1</sup> Based on Calibri size 12, single-line spacing, MS Word standard margins

his nominee) to both the unit’s quality team and the QRG for their consideration in an evidence-based manner during the site visit.

If the SAR makes negative reference to the services (or lack thereof) provided by another UL unit or third party, UniJobs must make the relevant section of the SAR available to that unit or third party and invite them to the relevant session during the site visit.

### 4.3 Pre-review phase timeline

It is recommended that planning for the self-evaluation exercise commence approximately 10 months (40 weeks) in advance of the QRG site visit. The table to follow gives actual (in shade) and recommended deadlines for the completion of the self-evaluation exercise and SAR.

Self-evaluation exercise [optional items in square brackets]	Deadline in weeks*	Self-assessment report (SAR) [optional items in square brackets]
Put in place a quality team and start to plan self-evaluation activities	-40	
Liaise with Director of Quality on identifying potential QRG members	-36	
Finalise plans for self-evaluation and SAR	-32	
[Engage and brief quality consultants]	-30	[Engage and brief technical writer]
Identify and request relevant data	-28	
[Engage in SWOT/strategic planning exercise]	-25	
Arrange independently facilitated focus group meeting(s)	-25	
Finalise analysis of student and other ‘customer’ and stakeholder feedback	-24	
Prepare support documents and data	-23	Start drafting SAR
	-20	Finalise and brief QRG (QSU responsibility)
	-17	Finalise SAR and appendices
	-16	Give draft SAR and appendices to technical writer
	-12	Circulate draft SAR within UniJobs
	-10	[Draft SAR to QRG chair for review]
	-8	[Quality team leader and QRG chair discuss draft]
	-7	Deliver final draft of report and files to QSU
	-6	SAR to QRG (from QSU)
	-2	Respond to requests for additional data
	0	QRG visit

\* Number of weeks prior to QRG visit

## **5 The review phase**

The review phase of the process refers to the week during which the quality review group (QRG) visits the university (the site visit) to meet with the unit under review and its stakeholders.

### **5.1 Purpose of visit and role of QRG**

The visit is intended to give the QRG members the opportunity to further explore the unit's activities and processes, to investigate issues identified in the SAR and to reassure themselves that the SAR is a comprehensive and accurate reflection of the unit's operations. The visit enables the QRG to meet and enter into dialogue with the unit's staff, members of governance body and other stakeholders, tour the unit's facilities and meet UL senior management. This, in turn, allows the QRG to record its findings in an evidence-based QRG report, at the heart of which are both commendations and recommendations to the unit.

A detailed overview of the role of individual QRG members is provided in Appendix B. The details of the visit schedule are arranged between the QRG chair and the Director of Quality in advance of the visit.

### **5.2 Composition and appointment of QRG**

The QRG for the UniJobs quality review will comprise a chairperson and two senior peers (typically international). The Director of Quality consults with the head of unit and/or independently identifies potential candidates. The Director of Quality takes due diligence in relation to the suitability of all potential QRG members. Once he is satisfied with the calibre, impartiality and independence of the potential candidates, the Director of Quality makes recommendations on the composition of the QRG to the VPA&R, who then appoints the members. Once appointed and prior to the site visit, any necessary communication between the unit and members of the QRG must be facilitated by the QSU.

In the case of a late withdrawal of one member of the group, it may be possible to co-opt a replacement or to continue with reduced numbers; this decision will be taken by the Director of Quality in consultation with the QRG chairperson.

The composition of the QRG and the procedure for appointing people to the group is described in detail in Appendix B.

### **5.3 Preparatory steps**

Six weeks before the visit, the SAR and appendices are sent by the QSU to the QRG. The QRG chairperson asks each member of the QRG to study the entire SAR but to take special interest in specific assigned SAR chapters or sections with a view to leading the questioning and reporting on those sections during the visit. Individual QRG members will be asked to prepare a one-page brief on each of their assigned sections under the following headings:

- Positive and praiseworthy aspects
- Apparent weaknesses and/or areas of concern
- Topics that need to be explored during discussions
- Additional data required in advance of the site visit
- Opportunities that the unit has identified for further enhancement

These brief overviews are circulated to all members of the QRG before the visit and form the basis of the initial questioning and discussions during the visit. These briefs will *not* be made available to the unit concerned. It may be the case that additional material is required; if so, the chair requests the unit, through the QSU, to prepare and provide such material.

#### **5.4 Visit schedule**

The visit to UL commences at 19h00 on a Monday evening and concludes on Wednesday at approximately 16h00. A briefing meeting between the QRG and a member of the QSU is undertaken on the Monday evening, after which members of the QRG convene in private session to become acquainted with each other, share their first impressions of the unit and seek clarifications, if necessary, from the chairperson. On Tuesday, the QRG meets UL senior management and the unit's staff and stakeholders.

Beginning on Tuesday evening, members of the QRG draft those sections of the report for which they are taking the lead. Wednesday morning and early afternoon is spent sharing the drafts and finalising the report while working as a team. The finalised report is read back to the unit's staff at approximately 16h00.

The provisional visit schedule is provided in Appendix C. The schedule outline is given as a guideline only. After practical considerations have been taken into account, the final schedule may differ in duration and detail and will be finalised closer to the review site visit.

#### **5.5 QRG report**

The QRG report follows a QSU report template. All members of the QRG have collective responsibility for the contents of the report. The main body of the report lists the QRG's commendations and recommendations to the unit. Recommendations are divided into two categories, level 1 and level 2. Level 1 recommendations are those that the QRG believes to be particularly significant in assisting the unit to better meet the needs of its stakeholders.

Immediately after the review visit, the QSU inserts introductory pages into the QRG report. Refer to Appendix D for further details on the QRG report, and refer to the [academic unit reports](#) and [support unit reports](#) pages of the QSU website for access to previous reports.<sup>2</sup>

#### **5.6 Report feedback to unit**

It is key to the success of the review that the findings of the QRG be made available promptly to all staff members of the unit. This is achieved in two ways:

1. Prior to departure on the Wednesday, the QRG chairperson reads back sections 3 and 4 of the report to the unit's staff. No paper copy of the report is made available to the unit at this stage.
2. Immediately after the visit, the QRG chairperson formally approves the report.

Following the site visit, the QSU makes the report available to the unit strictly for the purpose of checking for factual errors.

UniJobs is invited to provide an optional, formal response (one page max.) to the QRG

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<sup>2</sup> These reports are from previous quality review cycles. The structure of the UniJobs QRG report template will be substantially similar to them but will be tailored by the QSU to best suit the scope of the UniJobs review.

report. UniJobs's response and an optional response by UL to the report will be published as appendices to the report.

### **5.7 Finalisation and publication of QRG report**

The QSU sends the QRG report to the Executive Committee, whose members (i) check the report for institutional-level factual errors, (ii) verify that the recommendations fall within the scope and purpose of the quality review process and (iii) approve its publication on the QSU website. Should issues arise as a result of the verification process, the QSU brings these to the attention of the QRG chair, who then works with the QRG to respond to or amend the report, as appropriate. The final report is then published on the QSU website.

The UniJobs Chief Executive should alert the Board of Directors that the report has been published.

## **6 The post-review phase**

The post-review phase of the quality review process comprises the following stages:

1. Consideration of recommendations by unit and formulation of implementation plan
2. Ongoing implementation of recommendations
3. Interim progress report to GASPQA
4. Implementation review meeting

### **6.1 The QIP template**

The QRG recommendations and progress with their implementation are recorded in a quality improvement plan (QIP), for which the QSU provides a template (Appendix E). Within one week following the site visit, the QSU copies the recommendations from the QRG report into sections 1 and 2 the QIP template. Once the QRG report has been published, the QSU forwards the template to the unit for consideration and follow up.

The UniJobs Chief Executive is responsible for implementing the QRG recommendations, and the QIP template is designed to facilitate him to do this effectively. The template allocates one page to each recommendation and provides space to record:

- The unit's response to the recommendation
- Specific actions to be taken by the unit to address the recommendation
- The state of resolution of the recommendation and outstanding actions that need to be taken to fully implement the recommendation

### **6.2 Consideration of recommendations and formulation of implementation plan**

Within six weeks of receiving the QIP template from the QSU, the unit meets to formally consider and respond to each recommendation. The unit records its response by completing section 3 of each page of the QIP. At that meeting or as a follow-up action, the unit develops specific implementation plans and records them in section 4 of each page of the QIP. Section 4 is also used to record who is responsible for ensuring the planned actions are carried out and setting the timeframe for completion.

### **6.3 Ongoing implementation of recommendations**

Over the next few months, the unit works to implement the recommendations. Four to five months after receiving the QIP template, the unit carries out a brief, interim self-assessment of progress made in relation to the implementation of the level 1 recommendations and records the assessment in sections 5 and 6 of each page of the QIP. The head of unit then sends a copy of the QIP to the QSU.

### **6.4 Presentation to GASPQA**

Approximately six months after the unit has been given the QIP template, the QSU submits the partially complete QIP and the QRG report to GASPQA for consideration at the committee's next meeting. The chairperson of the UniJobs's Board of Directors (or his nominee) will attend the meeting for this agenda item to facilitate independent oversight of the implementation of the QIP by the Board of Directors. The UniJobs Chief Executive, who is responsible for project managing the implementation of the QIP, is invited to deliver a short presentation at the meeting. While the Chief Executive may wish to provide an initial commentary on the QRG report, the presentation will focus on the level 1 recommendations only, the unit's response to those recommendations, specific implementation progress

made to date and planned actions, as appropriate. The presentation is then followed by a question-and-answer session with the committee members.

### **6.5 QIP implementation review meeting**

Following the GASPOA presentation, the unit continues to implement the planned QIP recommendations. Approximately 12 months after the unit has been given the QIP template by the QSU, the Director of Quality organises a QIP implementation review meeting between the UniJobs Chief Executive, Director of Quality and VPA&R (chair). The meeting will also be attended by the chairperson of the UniJobs Board of Directors (or his nominee) to facilitate independent oversight of the implementation of the QIP by UniJobs.

To prepare for this meeting, the unit summarises in section 7 of the QIP progress to date on each recommendation and specifies outstanding matters or actions required. The head of unit returns the QIP to the QSU at least two weeks before the implementation meeting. The status of resolution of each recommendation is considered at the meeting, and any further actions required are identified and recorded. The exact follow-up and reporting process relating to these further actions is at the discretion of the VPA&R. A final QIP implementation summary report is prepared by the QSU (Appendix F) and is published on the QSU and unit's websites.

The implementation of the QIP must be evidence-based. The head of unit should ensure that those leading the implementation of each recommendation retain records that provide evidence of their actions (e.g., headline email correspondence, meeting minutes, etc.). When preparing for the implementation review meeting, the Director of Quality will routinely ask the unit for a copy of the evidence records pertaining to a representative sample of recommendations, particularly when insufficient detail is given in the plan on progress made to date, and/or copies of key documents cited by the unit in the completed QIP.

### **6.6 The unit's obligations**

The Director of Quality must be assured that UniJobs has engaged fully, constructively and in accordance with the ethos of the quality review process at all stages. In particular, he must be satisfied that the unit has genuinely made all reasonable efforts to implement the QIP and that the unit has provided a sufficiently compelling justification in cases where a recommendation has been rejected.

Although not an anticipated occurrence, if the Director of Quality forms an evidence-based opinion that UniJobs has failed to satisfy the above obligations, he must discuss this with the VPA&R and Board of Directors chairperson. Using their joint discretion, this group may recommend that specific follow-up action be taken.

## **7 Process verification**

The effectiveness of the quality review process is evaluated through internal audits, feedback from quality reviewers (i.e., members of the QRG), the unit's head and quality team and the ongoing monitoring of key timelines by the QSU. Moreover, oversight of the process by QCI occurs through the annual monitoring mechanisms (annual dialogue meeting and annual institutional quality report) and through periodic institutional quality reviews.

## Appendices

### Appendix A: Self-assessment report (SAR)

#### 1 Overview

Typically a self-assessment report (SAR) can be up to 40 pages in length<sup>3</sup> (approx. 15,000–17,000 words) and must not exceed 50 pages (approx. 18,000–20,000 words). It is anticipated that due to the size of UniJobs, the SAR will be considerably shorter in length but each chapter must still include sufficient detail. The SAR should be supported by appendices specifying the evidence upon which the report is based.

#### 2 Structure

The SAR chapter headings, which will be agreed with UniJobs, are given in section 4 below.

#### 3 General content and approach

Clarity and cohesion are the hallmarks of a well-written SAR. The narrative should be succinct but comprehensive. It is appropriate to embed links in the text and provide supporting data in appendices. Apart from UniJobs itself, the document audience is the external quality review group, and the report should be written with this in mind. In addition:

- The writers of the SAR must take due account of the scope of the review.
- The narrative should be data/evidence-based and analytical. The report should provide an appropriate balance of information and analysis and should include the ultimate conclusions drawn by the unit.
- The self-assessment of the quality of the unit's activities must include a clear and prominent focus upon the unit's overall fitness for purpose and performance (e.g., setting key performance indicators (KPIs), attaining targets and evaluating the unit's outputs and their impact, particularly upon 'customers' and the university as a whole).
- The report should provide evidence of the views of customers/stakeholders.
- A realistic, open and honest discussion of strengths, weaknesses, opportunities and challenges, as well as planned improvements, is vital to accurately inform the review group members and to allow them to appropriately prepare for the site visit and ultimately to produce a report that is of maximum benefit to the unit and university. The review ethos emphasises the mutually supportive and constructive spirit underpinning interaction between the unit, the reviewers and the university. The SAR is confidential to the unit, the reviewers and the QSU and will not be shared with third parties (unless the unit itself elects to do so).
- The layout, formatting and writing style of the document should be consistent and professional. To this end, it is recommended that the services of a technical writer be sought early in the planning process.

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<sup>3</sup> Based on Calibri size 12, single-line spacing, MS Word standard margins

#### **4 Sections of the SAR**

As agreed with UniJobs, the structure of the SAR is as follows:

- Chapter 1: Unit overview: mission, strategy and governance
- Chapter 2: Functions, activities and processes
- Chapter 3: Service users and feedback
- Chapter 4: Relationships and engagement with UL

##### **4.1 Chapter 1: Unit overview: mission, strategy and governance**

Chapter 1 focuses on the UniJobs mission, strategy and governance structures. Issues/topics to address include:

- Brief introductory overview of UniJobs and its mission
- Mission implementation strategies (i.e., strategic planning) and key implementation success indicators
- How the mission is periodically reviewed
- Governance (including financial governance) and reporting structures: description, effectiveness and appropriateness. Evaluation of the extent to which UniJobs has clear leadership and direction and how UniJobs's statutory obligations are met (e.g., compliance with labour laws)
- UniJobs's organisational structure and reporting lines
- Clear identification of UniJobs's 'customers' (those to whom it provides services/supports) and stakeholders (those with an interest or concern, e.g., UL)
- Overall evaluation of UniJobs's fitness for purpose and impact on customers and the university
- Indication of key areas on which UniJobs would find reviewer input to be especially useful

##### **4.2 Chapter 2: Functions, activities and processes**

Chapter 2 focuses on UniJobs's core activities (key processes) and areas of responsibility. For each core activity, process and responsibility, it would be appropriate to include:

- A short description of the activity (what you do and how you do it) and how the activity specifically supports UniJobs's strategy and/or policies
- How UniJobs systematically assesses the effectiveness of the activity in an evidence-based manner (how do you know it works?)
- How UniJobs systematically improves the activity
- The extent to which the activity/process is documented
- Whether or not the activity/process is underpinned by a specific UniJobs (or broader UL) policy
- How UniJobs ensures the activity/process is (and remains) in compliance with UniJobs and, if applicable, UL policies
- How UniJobs ensures transparency, accountability and best practice in relation to its budgetary and financial practices
- How risk is identified and managed
- A brief evaluation of the extent to which the activity/process is fit for purpose

#### **4.3 Chapter 3: Service users and feedback**

Chapter 3 outlines how UniJobs seeks feedback from its customers and what it does with that feedback. Issues to consider include:

- How UniJobs gathers feedback from staff, customers and stakeholders
- How UniJobs ensures that it provides a high-quality service to all its customers
- The extent to which channels of communication between UniJobs and its customers/stakeholders are open
- How UniJobs measures customer satisfaction and improves the services it offers
- Changes that have been made as a result of feedback
- How feedback loops are closed. (For example, to whom do you report the activity, how do you communicate outputs to relevant stakeholders, how do you keep the campus community informed of your activities and how do you collect, analyse and use feedback to improve the process/activity?)

#### **4.4 Chapter 4: Relationships and engagement with UL**

Chapter 4 outlines how UniJobs builds and maintains meaningful relationships and engages with UL stakeholders. Issues to consider include:

- The nature of the relationship between UniJobs and UL
- UniJobs's partners and key UL stakeholders
- How UniJobs communicates with its partners and key UL stakeholders
- The measures taken to ensure two-way communication
- Plans or recommendations to improve relationships and engagement

### **5 Consensus**

The SAR should reflect the opinions of all UniJobs staff members and must be available to all staff for comment during the final drafting stages.

### **6 Distribution of material to QSU**

Seven weeks in advance of the QRG visit, soft copies of the final submission (SAR and appendices) must be submitted to the QSU. A memory stick that contains the SAR and appendices is then created by the QSU. Six weeks prior to the site visit, the memory stick and one hard copy of the SAR will be sent by the QSU to each member of the QRG.

It is very important that everyone in the unit has free access to the final SAR and appendices well before the QRG visit. The head of unit should arrange for the documents to be made available to all unit staff.

## Appendix B: QRG composition, appointment and roles

### QRG composition

The QRG for the UniJobs quality review will comprise three persons, as follows:

- **Chairperson:** The chairperson is selected by the QSU, usually from a panel of standing chairs. This panel of chairs has been approved by the VPA&R.
- **Two senior peers:** Peers (typically international) will possess the requisite knowledge and experience to render them competent to evaluate the core activities of UniJobs.

In addition to the above positions, the QSU appoints a recording secretary to the group. This role is usually fulfilled by an external technical writer.

### QRG appointment

The Director of Quality consults with the UniJobs Chief Executive and/or independently identifies potential QRG candidates. The Director of Quality exercises due diligence in relation to the suitability of all potential QRG members. Once he is satisfied with the calibre, impartiality and independence of the potential candidates, the Director of Quality makes recommendations on the composition of the QRG to the VPA&R, who then appoints the group. Letters of invitation are issued from the VPA&R's office. Once appointed and prior to the site visit, any necessary communication between the unit and members of the QRG should be facilitated by the QSU.

### QRG roles and responsibilities

The university takes due care to ensure that the members of the QRG are independent and impartial and, accordingly, attributes particular importance to the independence and impartial nature of the QRG report. The overall role of the QRG is presented in section 5.1. The following sections outline the specific roles and responsibilities of (i) all members; (ii) the chairperson; (iii) members other than the chairperson; and (iv) the recording secretary.

### Role of all QRG members

The university asks each member of the QRG to:

- Commit to attending the site visit in its entirety
- Read the SAR and supporting documentation prior to the site visit
- Arrive promptly for all meetings during the site visit
- Participate in the discussions leading to the finalisation of the report
- Attend the report read-back session with the unit
- Respond in a timely manner to any post-visit communication
- Complete and submit the QRG feedback survey after the visit

In addition, in accordance with the QSU's travel and expenses policy, the QSU asks the members of the QRG to make their own travel arrangements to Limerick and to submit their travel expenses to the QSU in a timely manner after the review.

### Specific role of chair

The primary role of the chairperson is:

- To project manage the QRG site visit meetings and reporting process

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- To ensure that the QRG review and reporting process is conducted in accordance with the review guidelines document (this document) and that the process is independent, impartial and evidence-based
- To act as a liaison person between the QRG and the QSU or other stakeholders

On a practical level, the chairperson will typically carry out the following tasks:

- Approximately 10 weeks before the review, read the SAR and offer feedback to the unit head or quality team leader.
- With assistance from the QSU, assign to individual QRG members a specific section/chapter of the SAR, for which each individual will act as topic coordinator during the site visit.
- With assistance from the QSU, outline roles and responsibilities to each member of the QRG prior to the site visit.
- Give a verbal briefing to the QRG at the opening meeting.
- Coordinate the site visit: ensure that all meetings are conducted according to the schedule.
- Encourage reviewers to draft their commendations and recommendations after each session.
- Write the introductory section of the QRG report.
- Facilitate the completion of commendations and recommendations for the QRG report.
- Read out in its entirety the QRG report or assign sections of the report to members of the QRG to read out at the final meeting with the unit.
- In the days following the visit, read and approve the QRG report after it has been finalised by the technical writer.
- In the days following the visit, communicate any suggested changes in the report to the QRG (if necessary).

### **Role of QRG members other than the chair**

The university asks each member of the QRG other than the chair to:

- Prepare a one-page, pre-visit report (on a provided template) for each assigned topic.
- Within the required timeframe, email the pre-visit report to the chairperson, copying the QSU.
- Act as topic coordinator for the specific sections of the SAR that have been allocated by the chair. Being the coordinator of a topic involves:
  - Leading the questioning for that topic during the site visit
  - Consulting with other members of the QRG to gather opinions and ideas
  - Preparing first-draft commendations and recommendations relating to that topic
- Submit completed commendations and recommendations to the recording secretary and the QSU in a timely manner during the site visit.

### **Role of the recording secretary**

The recording secretary generates summary notes during the quality review site visit meetings to serve as a memory aide to the group during its deliberations. The notes are confidential to the QRG and are destroyed at the conclusion of the visit in line with UL's [Records Management and Retention Policy](#).

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The recording secretary helps to collate and finalise the QRG report.

### **Documentation**

All documentation and knowledge shared with and by the QRG must be treated in strict confidence by all members of the QRG. Documentation received for the review must be returned at the end of the review for confidential disposal by the QSU.

### Appendix C: Sample site visit schedule

This sample site visit schedule is informed by the suggested SAR chapter titles (see Appendix A). The main session topics (red font below) mirror those chapter titles. This schedule is included as a guideline only. After practical considerations have been taken into account, the final schedule may differ in duration and detail and will be finalised closer to the review site visit. The final schedule is set by the Director of Quality.

Mins	Day 1	Monday 3 December 2018		
	Time	Parties	Agenda	Location
30	19h00	QRG, DQ, QO	Introductory meeting and briefing	Castletroy Park Hotel (CPH)
	19h30	QRG	Dinner	CPH

Mins	Day 2	Tuesday 4 December 2018		
	Time	Parties	Agenda	Location
10	08h30–08h40	QRG, VPA&R, DQ, QO	Welcome	TBD
60	08h40–09h40	QRG	Planning session. Brief overview by each of the QRG members of their findings from the self-assessment report, focusing on any big issues. Planning for meetings with UniJobs and stakeholders.	TBD
90	09h45–11h15	QRG, UniJobs staff reps	Brief introductions, discussions and questions <b>Unit overview: mission, strategy and governance</b> (topic 1) <b>Functions, activities and processes</b> (topic 2)	TBD
20	11h15–11h35	QRG, all members of UniJobs staff	Coffee break with UniJobs staff	TBD
60	11h40–12h40	QRG & stakeholders	<b>Stakeholder meeting (1)</b>	TBD
30	12h45–13h15	QRG	Lunch	TBD
75	13h20–14h35	QRG, UniJobs staff reps	Discussions and questions <b>Service users and feedback</b> (topic 3) <b>Relationships and engagement with UL</b> (topic 4)	TBD
60	14h40–15h40	QRG & stakeholders	<b>Stakeholder meeting (2)</b> (if required)	TBD
45	15h45–16h30	QRG	Review of day's findings. <b>Begin drafting report.</b> Coffee served at 15h45 to QRG in meeting room.	TBD
	18h30	QRG	Email draft commendations and recommendations to technical writer.	TBD
	19h30	QRG, DQ, QO	Informal dinner	CPH

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<b>Mins</b>	<b>Day 3</b>	<b>Wednesday 5 December 2018</b>		
	<b>Time</b>	<b>Parties</b>	<b>Agenda</b>	<b>Location</b>
90	09h30–11h00	QRG, QO	Draft QRG report Finalisation of QRG commendations and recommendations (including context and rationale for level 1 recommendations)	TBD
15	11h00–11h15	QRG	Coffee break	TBD
70	11h20–12h30	QRG, QO	Draft QRG report Finalisation of QRG commendations and recommendations (including context and rationale for level 1 recommendations)	TBD
20	12h40–13h00	QRG, VPA&R, DQ	Update VPA&R on review findings	TBD
45	13h00–13h45	QRG, DQ, QO	Light lunch served	TBD
60	13h50–14h50	QRG, UniJobs Chief Executive/staff	Final questions for clarification on any issues (to be confirmed by QRG on the day, if required)	TBD
30	15h00–15h30	QRG, DQ, QO, UniJobs staff	QRG report read out to UniJobs staff	TBD
	15h45	QRG, DQ, QO, UniJobs staff	Tea/Coffee <b>Conclusion of visit</b>	TBD

### Key:

CPH	Castletroy Park Hotel	QT	Quality team
DQ	Director of Quality	TBD	To be determined
QO	Quality Officer	VPA&R	Vice President Academic & Registrar
QRG	Quality review group		

## **Appendix D: QRG report template**

### **Structure**

The QSU provides the QRG with a report template in which to record its findings. The default template comprises four sections and appendices, as follows:

1. Background (to UL's quality review process)
2. The unit (a brief description of the unit, its roles, etc.)
3. Preliminary comments and overall findings of the QRG
4. QRG commendations and recommendations
5. Appendices – membership of the QRG and the unit's quality team

This default template can be modified by the QSU to best suit the reporting requirements of the UniJobs review.

### **Section content**

Section 1 is a standard introduction to UL's quality review process. Section 2 is a brief description of the unit by the unit itself, usually prepared in advance of the visit. Sections 3 and 4 are written by the QRG, and these are the sections that are read back to the unit at the conclusion of the site visit. Appendices specify the members of the QRG and the unit's quality team. It is the responsibility of the QSU to complete sections 1 and 2 and the appendices after the visit has been concluded.

Typically one or two pages in length, section 3 provides the QRG with an opportunity to report upon:

- The extent to which the unit engaged enthusiastically, honestly and effectively in the self-evaluation exercise
- The unit's openness during the visit
- The quality of the self-assessment report (SAR)
- Stakeholder feedback relating to the unit and the extent to which the unit is fulfilling stakeholder needs
- The overall findings of the review

Section 4.1 lists the QRG's commendations to the unit. Commendations should be clear, concise, evidence-based and, as far as possible, single issue. Sample commendations from previous reports include:

- The unit's mission statement, which embraces the importance of excellence in learning for students and the significance of collaboration with key stakeholders
- The strong and productive relationship of the Office with the student representative bodies and the demonstrable commitment to working in partnership to deliver initiatives that respond to student demand and improve the student experience
- The high level of cross-training and scope for cover among staff in the unit

The total number of commendations included is at the discretion of the QRG and will be driven by the review findings but, as a general guideline, 5 to 15 would be appropriate.

Section 4.2 lists the QRG's recommendations to the unit. Recommendations are divided into two categories, level 1 and level 2. Level 1 recommendations are those that the QRG believes to be particularly significant in assisting the unit to better meet the needs of its

stakeholders. Level 1 recommendations may be more expansive than level 2 recommendations; the QRG must include a short narrative with each level 1 recommendation. The commentary should provide a context, rationale or any other elaboration that might help the unit to effectively interpret, implement and monitor the recommendation. (The inclusion of commentary with level 2 recommendations is optional.)

The QRG lists the recommendations as follows:

#### 4.2.1 Level 1 recommendations

No.	Recommendation	Context and commentary
1.		
2.		
3.		
4.		
5.		

#### 4.2.2 Level 2 recommendations

No.	Recommendation	Context and commentary (optional)
6.		
7.		
8.		
9.		
10.		
11.		
12.		
13.		
14.		
15.		

The total number of recommendations given (i.e., level 1 and level 2) is at the discretion of the QRG and will be driven by the group’s findings but, as a general guideline, 15 to 25 could be appropriate. The inclusion of more than 25 recommendations should be considered carefully by the QRG in terms of practical implementation.

Recommendations should be clear, concise, evidence-based and, as far as possible, single issue. Each recommendation should ideally start with a verb. Sample recommendations from previous unit reports include:

- Articulate clear plans for inter-professional learning, e-learning, distance learning and blended learning.
- Review and revise communication channels with UL staff to improve awareness of the outputs of the unit.
- Identify and publish owners (in terms of both institutional function and name) for each policy and process in the remit of the unit.

In writing recommendations, the QRG should bear in mind that the review is of the unit in question and not of other units or the university as a whole. Therefore, recommendations

should be addressed solely to the unit under review. However, resolving some recommendations may require cooperation from individuals, committees or organisational units outside of the unit under review. The head of unit is responsible for ensuring that all recommendations are considered for implementation. Therefore, an appropriate wording of such recommendations could be along the lines of:

- **Work** with senior management to ensure that all staff across UL (academic, management and administrative) 'own' the UL international strategy and promote the use of appropriate KPIs by relevant units within the university.
- **Liaise** with senior management to ensure that long-term strategic goals and current funding models are better aligned to reflect the fact that some investment projects may have the characteristics of capital projects.

**Appendix E: QIP template document**

The quality improvement plan (QIP) template document includes an inside cover page (shown immediately below) and a single page dedicated to each recommendation (one sample page given on the next page).

## Quality Improvement Plan (QIP) Template

**QIP Implementation Record**  
**(to be completed by the head of unit as each milestone is reached)**

**Unit:** \_\_\_\_\_

**Head of Unit:** \_\_\_\_\_

***(responsible for QIP implementation)***

1. Date on which QIP received from QSU:
2. Date on which unit met to discuss and ratify the QIP:
3. Date on which interim self-assessment of progress on level 1 recommendations (sections 5 and 6 in table) was returned to QSU:
4. Date on which QIP progress was presented to GASPQA:
5. Date on which implementation review meeting with DQ and VPA&R was held:

\_\_\_\_\_  
Head of Unit

\_\_\_\_\_  
Date

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**Notes:**

- + denotes time after the unit receives the QIP template from the Quality Support Unit (QSU)
- DQ = Director of Quality; GASPQA = Governing Authority Strategic Planning and Quality Assurance
- Sections 5 and 6 to be completed for level 1 recommendations only.

Sections 1 and 2 to be completed by the QSU					
1	n/a	Rec. no. _ (Level _)			
2	n/a	Recommendation:			
Sections 3 and 4 to be completed by unit					
3	+ 1 to 2 months	Unit response to recommendation: (e.g. accepted in full, accepted in part/modified form, rejected. Include succinct justification if recommendation not accepted in full)			
4	+ 1 to 2 months	Action planned by unit (add more rows as required)			
		Action item	Action item description	Person responsible	Target completion date
		a.			
		b.			
		c.			
	d.				
Sections 5 and 6 to be completed for level 1 recommendations only. Both sections to be completed by unit and copied back to QSU prior to presentation by head of unit to GASPQA					
5	+ 4 to 5 months	Action item	Progress made	Outstanding matters	
		a.			
		b.			
		c.			
		d.			
6	+ 4 to 5 months	<b>Self-evaluation by unit of progress to date</b> Status of progress: On a scale of 0-5, where 0 = no progress, 5 = fully resolved, underline the most appropriate score: 0 1 2 3 4 5 Any additional comments if appropriate:			

Head of unit makes presentation to GASPQA approx. + 6 months				
Section 7 to be completed by unit and copied back to QSU prior to implementation review meeting				
7	+ 11.5 months	Action item	Progress made for level 2 recommendations and further progress made for level 1 recommendations	Outstanding matters
		a.		
		b.		
		c.		
		d.		
Section 8 to be completed by DQ immediately prior to implementation review meeting				
8	+12 months	Status of progress: On a scale of 0-5, where 0 = no progress, 5 = fully resolved: 0 1 2 3 4 5  Comments as appropriate:		
Review implementation meeting between head of unit, Dean, DQ and VPA&R approx. + 12 months				
Section 9 to be completed by DQ immediately after implementation review meeting				
9	+ 12 months	Actions arising from the implementation meeting (including person responsible & timeframe for completion):		
Section 10 to be completed by unit and copied back to QSU				
10	+ 13-15 months	Description of actions taken since implementation review meeting:		
Section 11 to be completed by DQ on receipt of QIP from unit				
11	+ 13-15 months	Final status of recommendation (Closed, Open, Rejected):		



**Appendix G: List of acronyms used in this document**

<b>Acronym</b>	<b>Meaning</b>
BD	Board of Directors
CPH	Castletroy Park Hotel
DQ	Director of Quality
GASPQA	Governing Authority Strategic Planning and Quality Assurance
KPI	Key performance indicator
QA	Quality assurance
QI	Quality improvement
QIP	Quality improvement plan
QO	Quality Officer
QQI	Quality and Qualifications Ireland
QRG	Quality review group
QSU	Quality Support Unit
QT	Quality team
SAR	Self-assessment report
SLA	Service level agreement
SWOT	Strengths, weaknesses, opportunities and threats
UL	University of Limerick
VPA&R	Vice President Academic & Registrar