UNIVERSITY OF LIMERICK
QUALITY MANUAL

QUALITY SUPPORT UNIT

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1 Introduction

1.1 Purpose and structure of this quality manual

This quality manual aims to bring together in one document an overview of the quality assurance (QA) and quality enhancement (QE) arrangements of the University of Limerick (the University).

Chapter 1 (this chapter) provides an overview of the University itself and its institutional-level QA and QE arrangements. Chapters 2 to 12 are structured around and address the individual elements of the core statutory QA guidelines established by Quality and Qualifications Ireland (QQI) for providers of higher, further and English language education and training. The 11 core guidelines relate to:

1. Governance and management of quality
2. Documented approach to quality assurance
3. Programmes of education and training
4. Staff recruitment, management and development
5. Teaching and learning
6. Assessment of learners
7. Supports for learners
8. Information and data management
9. Public information and communication
10. Other parties involved in education and training
11. Self-evaluation, monitoring and review

The core guidelines are based to a large extent on the European Standards and Guidelines (ESG). The table in Appendix 1 shows where the two sets of guidelines overlap.

In most cases, the sub-guidelines specified in the QQI core guidelines are included in this manual as sub-headings within the relevant chapter. Where this does not happen (for reasons of flow), the sub-guidelines are dealt with in detail in the University's (internal) documented response to how the institution complies with the core guidelines. In some instances there will be repetition in the responses to the sub-guidelines due to the structure of the core guidelines.

The final chapter of this quality manual focuses upon QA and QE arrangements specifically relating to the University's research endeavors.

The Quality Support Unit (QSU) will review and update this manual on an annual basis and ensure that the most recent version is published on its website. The manual is written and structured to be read online. Enquiries should be sent to quality@ul.ie if this format is not suitable.

1.2 Overview of the University

Established in 1972 as the National Institute for Higher Education, Limerick, the institution was granted university status in 1989. The University employs 1,600 staff (900 academic and research staff and 700 support staff) and has 15,000 students registered on its programmes: 81% on undergraduate and 19% on postgraduate programmes. Approximately 9% of our students are international.

The University places a strong emphasis on employability: it runs the largest student cooperative education (experiential work placement) programme in Ireland and one of the largest within the EU, and its graduate employability rate is 18% above the national average for the university sector.

The University engages in an ongoing strategic planning, implementation and review process, and the current strategic plan is published on the Office of the President's website. Strategically, the University places particular emphasis on academic reputation, research impact (with an emphasis on translational research), engagement with industry, employability and international profile.

A detailed profile of the University is available on the Office of the President's website.

1.3 Quality assurance in Irish higher education institutions

The Qualifications and Quality Assurance (Education and Training) Act 2012, as amended by the *Qualifications and Quality Assurance (Education and Training) (Amendment) Act 2019* articulates the statutory obligations placed on the state's higher education institutions (HEIs) with respect to QA. The Qualifications and Quality Assurance Authority of Ireland (better known as Quality and Qualifications Ireland, or QQI) was established under the 2012 Act. QQI is the state agency responsible for promoting and overseeing quality-related matters in higher education and training services in Ireland. QQI's responsibilities include developing QA guidelines, promoting quality enhancement, overseeing quality in HEIs, and coordinating and managing external institutional quality reviews.

Periodic institutional reviews assess the effectiveness of the HEIs' QA procedures in accordance with Part 2 of the European Standards and Guidelines (Standards and Guidelines for Quality Assurance in the European Higher Education Area, 2015, pp. 17–20) and national legislative requirements as enshrined in the 2012 Act. The University underwent institutional reviews in 2005 and 2012, and the resultant reports are published on the Office of the President's website. Nationally, the Cycle 3 institutional review schedule has now commenced. The schedule itself, along with review guidelines and other pertinent documentation, is available on the Institutional Reviews page of the QQI website.

1.4 Quality assurance at the University

The University's commitment to quality is articulated in its institutional quality policy, which commits us to fostering a culture of continual improvement and complying with national statutory quality requirements.

The University's institutional arrangements for developing, monitoring, reviewing, enhancing and managing the quality of its activities are necessarily multi-layered and multi-faceted. They have evolved and are tailored to suit the institutional organisational structure and mission. They are informed by national acts, statutory quality guidelines and international best practice. They are developed and overseen by relevant institutional and local unit-level governance committees and are reviewed by various means, including internal quality reviews and periodic institutional (external) reviews.

Primary institutional quality mechanisms and processes include:

- Maintenance of an appropriate institutional governance and organisational architecture
- Development of the University of Limerick Policy Hub as the single authoritative source for the University's Statutes and Policies. The Policy Management Framework and Policy Framework Toolkit are available to those responsible for developing and revising policy documents. They contain a variety of links to information that will assist in the policy development and review process.
- Application of a quality management system for the support units (professional services) based on the ISO seven principles of quality management. Collectively, these principles provide the framework that defines the scope and ethos of the QMS, which is then operationalised in practice by each unit through the unit's processes and procedures
- A system of internal quality reviews that focus on both QA and QE
- Inclusion of our programmes in the National Framework of Qualifications
- A system of programme approval, monitoring and review
- A system of external examination
- Continually updated academic regulations and procedures and implementation of same
- Development and application of (i) mechanisms by which key stakeholders – and in particular students – provide feedback on the University's activities and (ii) mechanisms by which such feedback is considered and actioned (e.g. student exit surveys and module satisfaction surveys)
- Systems for the recruitment, induction, continuing professional development (CPD) and performance and development review of staff

The University collaborates constructively with external agencies and bodies whose functions incorporate a quality remit. Most notable in this category are QQI and professional statutory and regulatory bodies that accredit particular University programmes.

1.5 Statutory quality requirements

Cornerstone statutory quality assurance requirements, as enshrined in Part 3 of the Qualifications and Quality Assurance (Education and Training) Act 2012, as amended by the *Qualifications and Quality Assurance (Education and Training) (Amendment) Act 2019* are summarised below. In each case, primary elements of the University's quality arrangements that specifically address these statutory requirements are included.

1. *Establish written quality assurance procedures for the purposes of assuring and enhancing the quality of activities and services*

   An overview of the University's core QA procedures is given in the University quality manual (this manual). Maintaining and periodically updating the manual is the responsibility of the Director of Quality, and the manual is made publicly available on the QSU website.

   The University's core quality architecture is recorded in an Annual Quality Report (AQR) submitted to QQI. The Director of Quality is responsible for coordinating the completion and submission of the AQR and for ensuring that the most recent AQR is published on the QSU website.

2. *Periodically review the effectiveness of activities and quality assurance procedures*

   The University reviews the effectiveness of its activities and QA procedures primarily through internal quality reviews. Working on a seven-year cycle, the implementation of the reviews is informed by statutory requirements and best international practice and is tailored to suit the University's mission, needs and organisational structure. The review schedule, along with general review process characteristics, is developed by the Director of Quality in consultation with relevant stakeholders and is approved by Executive Committee. The overall review process, including the development of guideline documents, is coordinated and managed by the QSU and overseen by the Vice President Academic Affairs and Student Engagement (VPAASE). The QSU is responsible for publishing on its website the review schedule, process guideline documents, review reports and resulting quality improvement plans.

   A number of routine QA-related activities are conducted annually, such as programme reviews, student surveys, risk register reviews (sometimes more frequently than once a year) and internal audits of support units' quality management systems (QMSs).

   Additional review mechanisms are used, as appropriate, to complement internal quality review activity. Such mechanisms include a programme-based review cycle, linked provider reviews and bespoke internally commissioned reviews of specific University endeavours. The University proactively engages with periodic institutional quality reviews managed by QQI and uses the review findings to drive institutional-level quality enhancements.

3. *As a designated awarding body, approve, monitor and review the effectiveness of the QA procedures of linked providers*[1]

   Institutional-level arrangements include (i) a policy statement in respect of linked provision; (ii) documented procedures for considering, establishing, reviewing and, where appropriate, terminating a linked provision relationship with linked providers; (iii) procedures for monitoring and reviewing the QA procedures of established linked providers; and (iv) documented governance and oversight responsibilities in relation to linked providers. The Director of Quality is responsible for coordinating quality-related activities in relation to linked providers, and quality documentation relating to linked providers is published on the QSU website. The University's Linked Provider Framework is available here.

[1] The 2012 Act defines a linked provider as "a provider that is not a designated awarding body but enters into an arrangement with a designated awarding body under which arrangement the provider provides a programme of education and training that satisfies all or part of the prerequisites for an award of the designated awarding body".

4. *Take due account of relevant guidelines published by QQI, the statutory body that, amongst its other responsibilities, reviews and monitors the effectiveness of HEIs' QA procedures*

   The QSU is responsible for coordinating internal exercises that assess the extent to which the University complies with specific statutory quality guidelines.

1.6 Quality Support Unit

Attached to the Office of the Provost and Deputy President, and led by the Director of Quality, the QSU plays a cross-cutting role in supporting the attainment of the University's strategic quality priorities and fulfilling institutional statutory quality obligations. Core QSU activities include:

- Quality-related strategic leadership and policy development
- Managing institutional compliance with statutory QA requirements and guidelines and being the University's contact point for QQI
- Managing internal, institutional and linked-provider quality reviews
- Supporting the development of QMSs
- Managing selected student surveys, most notably the Exit Survey and Module Satisfaction Survey, and providing a management reporting service

2 Governance and management of quality

2.1 Governance

2.1.1 Governing Authority

The University's key governance groups include Governing Authority (and its subcommittees), Academic Council (and its subcommittees) and Executive Committee. Governing Authority bears ultimate responsibility for and has ultimate authority over all University activities. See the Code of Governance (2019) for details.

Appointed on 1 December 2017, the current Governing Authority's term of office runs to 30 November 2022. In accordance with recommendations from previous reviews, the membership was reduced to 29 with a streamlined meeting schedule. There is now greater external representation on Governing Authority and a requirement that at least one external member bring senior, high-level leadership experience in academia to the authority. A revised committee structure was put in place taking into account best practice, effectiveness and efficiency. Full details of membership and committee structure is available here.

2.1.2 University leadership

- **President**, **Chief Executive Officer** with ultimate responsibility for all of the University's operations.
- **Provost/Deputy President,** with overall responsibility for ensuring that the University's core work of research, teaching and service to the wider community is enabled and supported as effectively, efficiently and economically as possible.
- **Chief Finance and Performance Officer** drives the financial performance and reporting, data-based benchmarking and decision making, quality management, integrated planning and the sustainability of the organisation. As a member of Executive Committee, the CFPO makes a significant contribution to the shaping of UL's strategic agenda, tactical operation and future planning.
- **Chief Operations Officer** is a member of Executive Committee with specific responsibility for a number of key services, including the Information Technology Division, Buildings & Estates, Enterprise, Entrepreneurship and Innovation, Technology Transfer Office and University subsidiaries - Plassey Campus Centre and UL Sport.
- **Vice President Global & Community Engagement** is a member of the Executive Committee and holds the key responsibility for the University strategies relating to relationship, partnership and collaboration development activities globally, regionally and locally.
- **Chief Corporate Officer** leads HR, Corporate Secretary, Communications, Alumni and People and Corporate Strategy. The CCO a member of Executive Committee.

- **Executive Deans** Reporting to the President, Executive Deans take a leadership role in planning the Faculty's/School's future strategic direction within the framework of the University's strategic plan. In addition to their strategic role in the development of the Faculty/School, Executive Deans have overall responsibility for its day-to-day management. The Executive Dean is also involved in a variety of University level committees, including the Executive Committee, Management Council and Academic Council. The Executive Dean is supported by the Faculty Management Team, comprising the Heads of the Academic Departments, the Assistant Deans and the Faculty Manager.

- **Vice President Research** (VPR) is a member of the Executive Committee with responsibility for the Research affairs of the University, including research support services, related enterprise and commercialisation of UL's research. Reporting to the President, the VPR also has a key role in the overall leadership and strategic management of the University.

Appointed and chaired by the President, **Executive Committee** is the senior management committee with responsibility for developing strategic policies and procedures, monitoring corporate performance and ensuring that all aspects of the corporate function operate with optimal efficiency and effectiveness. Executive Committee meets fortnightly and comprises the President, Chief Operating Officer and Registrar, Vice President Academic Affairs and Student Engagement, Vice President Research & Enterprise, the four deans of faculty, the Dean of Graduate & Professional Studies, Director of Strategic Projects and Transformation, the President's Special Advisor on Equality and Diversity, and the Corporate Secretary.

The second tier in the management structure is the 66-member **Management Council**, which comprises the President, vice presidents, deans, directors of support divisions, heads of academic units (i.e. department or school) and faculty managers. Management Council meets four to five times per year. Its main purpose is to advise Executive Committee, debate university-wide management issues and support the implementation of the University's strategic plan.

Academic Council is the supreme authority with regard to all academic matters. The Academic Programme Review Committee (APRC), a subcommittee of Academic Council, oversees programme development; it reviews new programme submissions and modifications to existing programmes. The Academic Regulations Committee (ARC), another Academic Council subcommittee, makes recommendations on the University's academic policies, regulations and procedures. ARC also advises and makes recommendations on admissions, including developing admissions policies and processes for under-represented groups.

The University's programmes are offered through 28 academic departments/schools grouped into four faculties (Arts, Humanities and Social Sciences; Business; Education and Health Sciences; and Science and Engineering). Each faculty is led by an executive dean. All academic members of a faculty, together with student representatives, comprise the Faculty Board, which meets regularly to discuss academic matters, such as proposals for new programmes. Academic role profiles and individual areas of responsibility, including responsibilities for quality assurance and enhancement are outlined on the HR website.

The University organisational structure is available here.

2.1.3 Institutional strategy

Published on a four-year cycle, the University's strategic plan specifies the institutional mission, vision, values, strategic goals, objectives and expected outcomes and set standards of accountability for people, programmes and allocated resources across all areas of University business. Driven by the sitting president, the plan is devised by Executive Committee in consultation with members of the campus community and external stakeholders, including the Higher Education Authority (HEA). The agreed strategy is approved by Governing Authority. Implementation of the plan is devolved to key academic, research[2] and support units.

Progress on the achievement of each objective in the plan is monitored on an ongoing basis by Executive Committee and reported upon in an annual update to Governing Authority. The review cycle examines the

[2] In this manual, the term research unit is used to denote research centres and institutes.

aims, objectives and intended outcomes in terms of their relevance and achievability in the context pertaining at that time.

The University's current strategic plan (UL@50 – Strategic Plan 2019-2024) commits the University to a quality improvement ethos. The overall strategic plan is supported by a number of strategic publications available on the University website.

2.1.4 Ownership of quality assurance and enhancement

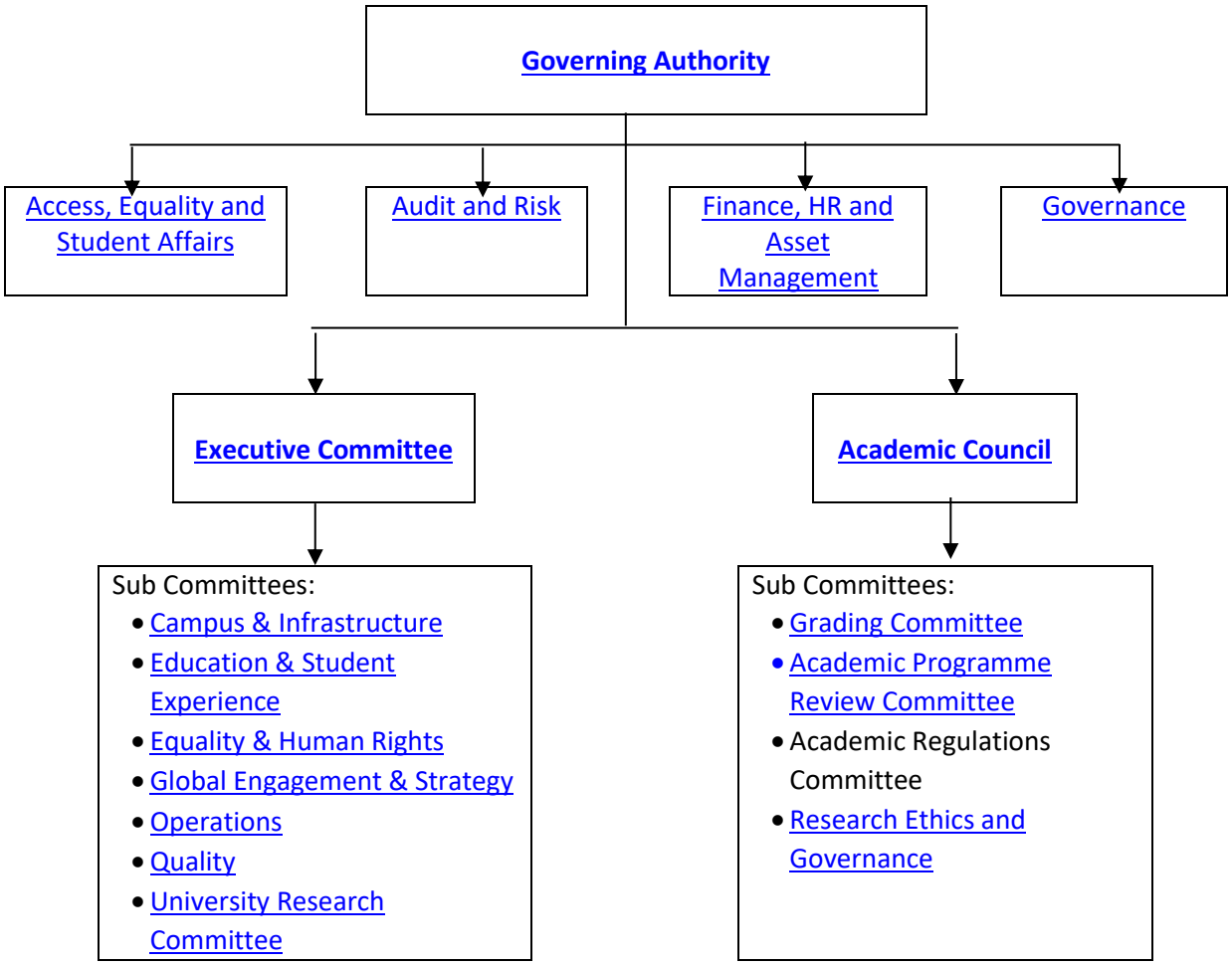
Every individual employee bears a personal responsibility for the quality of their endeavours. As a corporate entity, the University is responsible for supporting and resourcing those endeavours.

From a committee perspective, institutional-level QA and QE predominantly rests with Governing Authority, Academic Council and the Executive Committee. Figure 1 provides links to the terms of reference for the main committees with responsibility for quality assurance/quality enhancement.

In addition to the University leadership roles outlined in Section 2.1.2 above, the following roles profiles have specific responsibility for QA/QE.

- Associate Vice President Academic Affairs
- Associate Vice President Student Engagement
- Associate Vice President Academic Services and Deputy Registrar
- Assistant Deans Academic Affairs
- Assistant Deans International
- Assistant Deans Research
- Assistant Deans Postgraduate Studies
- Assistant Dean EDI
- Head of School / Department
- Faculty Manager
- Director of Quality
- Director EDI
- Accreditation Manager
- Directors/Heads of Professional Service Units

Figure 1: Committees Oversight of UL Quality Assurance / Quality Enhancement



2.1.5 Legislative obligations

The Corporate Secretary's Office ensures the University complies with the Universities Act 1997 and with current legislation and develops, revises and distributes (online) University statutes, regulations and corporate policies and procedures. The Human Resources Division (HR) publishes a number of policies and procedures that specify, *inter alia*, role profiles and induction guidelines for all levels of staff, including management.

In accordance with section 27 of the Universities Act 1997, Academic Council controls the academic affairs of the University. It oversees academic awards, standards and regulations and approves all new programmes and changes to existing programmes. Chaired by the President, Academic Council comprises senior officers, deans of faculty, heads of department/school, Student Life[3] and Postgraduate Students' Union officers, assistant deans of academic affairs and elected staff representatives. Academic Council has a number of subcommittees, whose reports are considered at Academic Council meetings.

In compliance with Part 3 of the Qualifications and Quality Assurance (Education and Training) Act 2012, as amended by the *Qualifications and Quality Assurance (Education and Training) (Amendment) Act 2019*, the QSU is responsible for assessing if statutory requirements relating to quality assurance are met by the University. In this respect, the QSU coordinates internal exercises that assess the extent to which the University complies with specific statutory quality guidelines.

[3] The Students' Union

2.1.6 Risk management

Overall responsibility for the management of risk at the University lies with Governing Authority. Governing Authority approves the University's Risk Management Policy and satisfies itself, through its Audit & Risk Committee, that the policy is effective, that an adequate risk management process is in place and that fundamental risks are being managed appropriately by Executive Committee. The risk management framework (i.e. the policy and accompanying Guide to Risk Management) ensures that risks associated with any activity, function or process are systematically identified, analysed, evaluated, treated, monitored and communicated. The framework provides assurance from academic and administrative functions to the senior management team and, through that team, to the Audit & Risk Committee and Governing Authority. The University has a full-time risk management officer, who reports to the Corporate Secretary.

2.1.7 Internal and external evaluation of activities

A diverse range of procedures are enacted at institutional and local level with a view to monitoring, self-evaluating and enhancing the quality of activities. These include:

- Self-evaluation activities (including the writing of a self-evaluation report) as part of unit quality reviews. The current review process, Cycle 3, operates at the local level of individual faculties, research institutes and support units. Review reports are made publicly available, and the review recommendations form the basis of each unit's subsequent quality improvement plan (QIP). The implementation of the plan is closely managed and monitored as described in quality review process guideline documents.
- An external examination process for taught and research programmes.
- Annual self-evaluation (and periodic external evaluation) of individual programmes by course review boards, which inform programme enhancements. The review outcomes are considered at departmental and faculty level and by APRC.
- Student feedback by means of various surveys, most notably the Module Satisfaction Survey, the Student Exit Survey and the Irish Survey of Student Engagement, with detailed and/or aggregate reports being considered by individual academics, heads of department/school, course boards, deans, Executive Committee and Academic Council, as relevant.
- Systematic and ongoing risk assessment exercises (feeding into risk registers) undertaken by academic, research and support units in line with the risk management policy. Executive Committee and the Governing Authority Audit & Risk Committee implement and monitor such exercises.
- In accordance with both the University's QMS framework for support units and its inter-department auditing process, regular auditing by trained auditors of their own and other support units. The audit recommendations and the unit's plans to implement them are documented in the unit's quality improvement plan.
- The documentation and subsequent implementation by academic units of recommendations from accrediting bodies relevant to the unit's programmes.

2.2 Managing quality assurance

2.2.1 QA procedures

The University's overarching quality policy commits the institution to assuring and enhancing the quality of all its endeavours and to complying with statutory and regulatory requirements relating to quality assurance and enhancement.

An overview of the University's QA procedures and links to additional information are given in this manual. The University's cornerstone institutional-level QA processes are outlined in Figure 2 below.

Figure 2: UL Quality Assurance/Quality Enhancement Framework

QA Processes	Outputs / Reports	Governance	Enhancements
Institutional • Strategic Planning • HEA Regulatory Framework • Athena Swan • UN Sustainable Development goals • Policy Management Framework	• UL@50 Strategic Plan • HEA Systems Performance Review • Equality, Diversity & Human Rights Strategy • Research Strategy • UL Enable - IT Strategy • Healthy UL Framework • Sustainable Development Action Plan • President's reports to GA	• Governing Authority • Executive Committee • Management Council	• Revisions of policies and procedures in line with national and international policy directives • Athena Swan accreditation • Teaching awards • Staff excellence awards
Quality Reviews • Institutional • Faculty • Research Institutes • Professional Service Units • UL Affiliates • Thematic	• Institutional Review (Cinnte) Report • QRG Quality Review Reports • Quality Improvement Plans • Presentations to Quality Committee • Final implementation review summary reports	• Governing Authority • Executive Committee • Quality Committee • Provost • Deans / Heads of Units	• Process improvements • Analysis of review themes • Case Studies • Quality Team Leaders' Forum best practice sharing
Academic Programmes • New programme proposals • Programme development and approval • Annual programme monitoring and periodic programme review • Professional/Statutory Body accreditation	• Academic Council report to Governing Authority • Inclusion of programmes on NFQ and Irish Register of Qualifications • Annual programme monitoring reports • Periodic programme review reports • Book of Modules • School response programme review and accreditation recommendations	• Governing Authority • Academic Council • Curriculum Review and Innovation Committee • Faculty Boards • Course Boards • Deans • Heads of Department	• Curriculum enhancements • Process improvements • Enhanced student experience
External Examiners • External Examiners Process	• External examiner reports • School response to report recommendations • School action plans	• Governing Authority • Academic Council • Faculty Boards • Exam Boards	• Process improvements • Programme enhancements • Enhanced student experience
Student Evaluation • Student Evaluation of Teaching • Module Satisfaction Survey • Student Exit Survey • National Student Survey.ie • International Student Barometer • Unit/School-level surveys	• Reports to Academic Council • Reports to individual lecturers • School/Department reports to Head of School / Dean • Published aggregate reports • School action plans • Closing the student feedback loop	• Academic Council • Executive Committee • Faculty Boards • Management Council	• Enhanced student engagement / experience • Process improvements • Programme enhancements
Alignment with QQI Policy • QQI published Guidelines • Linked Provider Framework • Collaborative and Transnational Provision Policy • Code of Practice for International Learners	• Annual Quality Report to QQI (AQR) • Assessment of Compliance exercises • Assessment of Compliance reports • Action Plans • Policy reviews	• Governing Authority • Executive Committee • Academic Council • Quality Committee	• Revision of policies and procedures • Process improvements • University compliance with legislative requirements

2.2.2 QA roles and responsibilities

Individuals and groups with responsibility for overseeing QA at an institutional level are specified at 2.1.4 above. The QSU is responsible for driving the institutional agenda for quality. Individuals and groups with responsibility for implementing QA policies and procedures in academic and research units are identified on the HR website in a document entitled Academic Role Profiles – Roles of Responsibility. In compliance with the University's Quality Management System Framework for Support Units, support units identify these roles and responsibilities in their QMS documentation.

The University's QA policies and procedures (as documented in the annual AQR) include reference to the person(s)/unit/committee accountable for ensuring the policy/procedure is fully implemented.

2.2.3 Measuring the effectiveness of policies and procedures

The effectiveness of support units' policies and procedures are assessed by means of the periodic quality review process and the inter-department auditing process. The self-assessment process that forms part of each unit's QMS ensures that the unit is audited on a regular basis by members of the unit itself and by a panel of trained auditors from other support units across campus. The auditing process includes an evaluation of the effectiveness of the unit's processes and procedures.

The performance of academic units is monitored through a number of mechanisms: periodic quality reviews, student retention and progression statistics, the external examining system, annual programme monitoring and periodic programme reviews and the evaluation of teaching and student surveys. All of these mechanisms are monitored and reported upon to the relevant management committee (e.g. Executive Committee).

In relation to research, the Research Office sets out institutional-wide research metrics in the University's research strategy, monitors the achievement of metrics and presents annual performance reports to Executive Committee.

As specified in the guidelines for the periodic review of academic, research and support units, the rigorous post-review phase of the review process includes the following steps:

1. Consideration of the quality review group's recommendations by the reviewed unit and formulation of an implementation plan
2. Ongoing implementation of recommendations
3. Interim progress report to the Quality Committee
4. Implementation review meeting

Quality review reports and the implementation of the associated QIPs are monitored by the Quality Committee and the VPAASE.

2.3 Embedding a quality culture

The University's QA policies and procedures are designed to engage all relevant users in creating and maintaining a culture of quality across all of the University's activities. This is best articulated in the published institutional quality policy.

2.3.1 How the University promotes a quality culture

The University is committed to fostering an authentic culture of quality throughout the institution. It does this by various means, including:

- Formally articulating a commitment to QA and QE in an institutional quality policy
- Explicitly and implicitly articulating the importance of quality as an underlying theme and core value in key documents, such as the University's strategic plan
- Ensuring its quality policy and any other commitments to quality articulated in other University documents or statements are robustly pursued and implemented in practice

- Recognising that some activities may occasionally fall short of the highest quality standards and, in such instances, committing to reviewing and learning from such experiences and implementing change to minimise the risk of repeat occurrences
- Leading by example: Demonstrating an overt commitment in word and in deed to QA and QE at all levels within the institution, up to and including leadership at the highest levels
- Fostering a personal connectivity to quality by stressing personal responsibility for the quality of individual activities
- Providing tangible support for individuals in their pursuit of excellence through, for example, staff induction and CPD
- Recognising and rewarding the demonstrable attainment of excellence through, for example, excellence awards, the Performance and Development Review System (PDRS) and the promotions process, and reporting upon and acknowledging excellence in reports and communications
- Organising, facilitating or coordinating the periodic review of institutional activities to assure and enhance their effectiveness

The periodic quality review of academic, research and support units also ensures that QA/QE activities are embedded across all the University's activities. The implementation of both the periodic quality review process and the QSM framework for support units ensures that all members of staff (and students and other stakeholders) engage in the University's QA system. For example, the previous quality review cycle for academic and support units (Cycle 2) resulted in the identification of 1,207 commendations (good practice) and 1,357 recommendations (opportunities for quality enhancement), which were followed up through quality improvement plans.

The QSU facilitates support units to implement a QMS by (i) advising on the composition of the unit's quality team and team leader; (ii) providing guideline documents and templates for documenting key processes, policies and procedures and a quality manual; (iii) providing support and advice with the documentation process; and (iv) managing the University's inter-department QMS auditing process. However, ultimate responsibility for embedding QA/QE into the everyday operations of the unit lies with the unit itself and is driven by the unit's quality team.

2.3.2 Fostering a culture of continual improvement

The guidelines for the quality review of academic, research and support units specify that continual improvement is achieved by carrying out QA and QE activities on an ongoing basis. Continual improvement is one of the seven key principles of the University's QMS framework.

The University's quality policy outlines the general characteristics of effective QA/QE mechanisms. Accordingly, those with responsibility for developing and reviewing an institutional QA mechanism should seek to (relevant to context):

- Ensure the mechanism has a clear and documented purpose or aim as well as a clear and documented scope or terms of reference.
- Ensure the mechanism is informed by and compatible with the quality policy.
- Where relevant, ensure the mechanism is informed by (i) other University policies, (ii) statutory laws and guidelines, (iii) international best practice and (iv) institutional mission and strategy.
- Consult with end users and relevant stakeholders during the developmental stage.
- Be mindful of the practicalities involved in implementing the mechanism effectively. For example, the mechanism should place an appropriate but not unreasonable burden on University resources, be they financial or human.
- Avoid or minimise overlap or duplication with pre-existing QA processes during the developmental stage.
- Ensure the mechanism is evidence-based and analytical; include benchmarking and longitudinal data trend analysis, as appropriate.
- Ensure the mechanism displays a clear focus on driving quality enhancement.
- Take into account the concepts of risk and value for money.

- Ensure the mechanism has a clear and documented operational process that avoids using excessive quality jargon.
- Ensure the mechanism has a clear and documented reporting structure or template, which provides scope for recognising achievement and good practice as well as identifying opportunities for enhancement.
- Ensure the mechanism has a clear reporting pathway in the context of findings generated.
- Reference those who are responsible for considering and implementing findings or recommendations and how such follow-up is project managed and monitored.
- Ensure the mechanism includes provision for closing the feedback loop, such as how findings and resultant (or planned) actions are made known to core and any other relevant stakeholders.
- Where relevant, ensure the mechanism has a clearly documented overall governance structure, indicating operational, oversight and ownership responsibilities.
- Design the mechanism to be adaptive to changing context by, for example, containing inbuilt provision for process modification and sign-off.
- Include in the mechanism a consideration of 'obligations and consequences', indicating the responsibilities or expected contributions of those involved and the consequences of not meeting those contributions or responsibilities.
- Ensure the documented mechanism is accessible to stakeholders, as relevant to context, by placing it on SharePoint[4] or publishing it on the University website.
- Ensure that participating stakeholders or other interested parties can provide feedback on the effectiveness of the mechanism, and use this feedback to improve the mechanism.
- If the mechanism is not itself automatically subject to periodic review (via, for example, an internal or external quality review), include a provision for its periodic assessment or review.

Continually enhancing activities is a core tenant of the institutional quality policy. Continual enhancement is driven by various practical means at institutional and local levels. Primary examples of mechanisms driving enhancement include:

- The institutional strategic plan, which clearly focuses on enhancing the University's endeavours
- The terms of reference of University committees, which, explicitly or implicitly, underpin a *de facto* focus on the continual enhancement of the activities for which the committees are responsible
- The University's Policy Management Framework, which dictates that institutional policies be periodically reviewed, typically every three to five years, to ensure they remain fit for purpose
- The recommendations and subsequent quality improvement plans (QIPs) that emanate from the internal quality reviews of units. The implementation of the QIPs is tightly project managed and monitored, as described in quality review guideline documents.
- The ongoing QIP that support units implement as part of their QMS
- The recommendations and subsequent QIPs that emanate from compliance exercises
- Bespoke, commissioned reviews or reports, which invariably include recommendations that are considered and followed up by the relevant unit, committee or officer
- Annual and periodic reviews of programmes of study, which involve reviewing and acting upon course-related data, external examiner reports and student survey feedback
- The Performance and Development Review System, one objective of which is to promote continual improvement
- The promotion policy, one aim of which is "to provide an incentive towards higher quality performance and achievement"
- The systematic collection and analysis of participant feedback from CPD courses, workshops and allied initiatives with a view to enhancing CPD offerings.

2.3.3 Resourcing quality

The University operates an Incentivisation Model (IM) based on a devolved budgetary process. The IM enables resources to be clearly realigned to the priorities specified in the institutional strategic plan and facilitates the process of balancing the University's budget out-turns. The IM informs the funding of all units,

[4] The University's internal file-sharing portal. Access rights to the portal's various sites are controlled locally by unit administrators.

including those directly involved in QA, such as the QSU. In turn, the QSU covers review-related costs, within predetermined limits, incurred by units while preparing for their periodic quality review.

One of the outcomes of the quality review is a QIP, which includes the quality review group's recommendations. The process places an onus on the head of unit to follow up on all recommendations, including those requiring resources. Additional staffing resources, for example, are sought through the annual staffing plan. Additional financial resources may be sought through submissions to the faculty dean or VPAASE.

3 Documented approach to quality assurance

The University documents its policies and procedures, including those relating to quality assurance, as a matter of course. Many policies and procedures are publicly accessibly on relevant web pages (links to many of which are provided in this document). This is true in particular of institutional policies and core institutional procedures. Additional documents, particularly those local to a specific unit, are often stored on SharePoint sites.

3.1 Institutional policy management

The University's Policy Management Framework sets out a standard set of principles to follow when developing, implementing and managing institutional policies with a view to promoting a consistent approach to both the development process and format of policies across the University. The framework applies to all policies developed by all units.

The framework addresses the following items:

- Policy management
- Policy principles
- Policy instruments
- Definitions
- Policy development and approval
- Equality impact assessment
- Policy template
- Approval pathway
- Review process

Policies sit within a range of regulatory instruments, which are defined as follows:

Legislation: All University policies must comply with relevant legislation.

Statutes: University Statutes as approved by Governing Authority.

Regulations: High level (e.g. national) overarching rules governing an area in which the University operates.

Policies: ***Any decision or directive that sets out the University's official position on an aspect of its activities. The Executive Committee, Academic Council, and/or Governing Authority can approve policies. These policies apply across the University.***

Procedures: Describe the approach to policy (principles) implementation. They are often created and approved locally in tandem with policy development/revision. The appropriate development, approval and communication workflow is at the discretion of the area responsible for the development/revision of a policy.

Guidelines: Approved as a recommended approach. They provide practical examples of how specific policies may apply in particular areas and suggestions for effective implementation.

This framework applies solely to '***Policies***' as defined above.

All University policies are stored centrally on the UL Policy Hub and are accessible from this page.

3.2 Institutional QA mechanisms

The institution's cornerstone QA mechanisms are summarised in the published University profile. The list to follow specifies each mechanism and where it is documented on the University website:

Cyclical quality review of units	https://www.ul.ie/quality/current-review-cycle
Quality management systems	https://www.ul.ie/quality/quality-management-systems
External examiner system	https://ulsites.ul.ie/executive/external-examiners
Student Evaluation of Teaching (SET)	https://www.ul.ie/ctl/staff/teaching-evaluation-set
Module Satisfaction Survey (MSS)	https://www.ul.ie/quality/module-satisfaction-surveys
Student Exit Survey	https://www.ul.ie/quality/student-exit-survey
Academic regulations and procedures	https://www.ul.ie/policy-hub/sites/policyhub/files/user_media/documents/Handbook_Academic_Regulations_and_Procedures.pdf
Academic programme review	https://www.ul.ie/policy-hub/sites/policyhub/files/user_media/documents/Academic_Programme_Review_Policy.pdf
Research policies and procedures	Policies & Procedures | UL - University of Limerick
Research Integrity	Research Integrity | UL - University of Limerick
Research Innovation and Strategy	Research & Innovation Strategy | UL - University of Limerick

QA policies and procedures are referenced in the University's annual AQR to QQI, which is published on the Quality Procedures/AQR section of the QSU website. The report covers the internal evaluation and continual improvement of the policies and procedures.

Input into institutional QA policies and procedures from students and other stakeholders, such as external agencies, practitioners, placement partners, employers, external examiners and researchers, is captured in a number of ways, such as through representation on course boards, quality review panels, quality review stakeholder meetings and employer networks.

3.3 Local-level QA policies, processes and procedures

The University's QMS for support units requires each unit to document and publish its key business and QMS processes and procedures. These are usually published on the Quality section of the unit's website.

4 Programmes of education and training

4.1 Programme development and approval

In accordance with QQI Core Statutory Quality Assurance Guideline 3.1 (Programme development and approval) and European Standards and Guidelines (ESG) no. 2 (Design and approval of programmes), the University follows a well-established, rigorous process for developing and approving new programmes. The process and its related procedures and guidelines are documented internally on SharePoint. All new programmes must align with the institutional strategic plan, with justification included in approval documentation, and must comply with the National Framework of Qualifications (NFQ). The NFQ level, award type, entry requirements, total credits, calculated credits, mode of delivery (full-time, part-time, blended, distance, evening, etc.), progression points and core pathway must all be specified on the programme submission application form for subsequent consideration by the approving groups.

New programmes are formally approved in five stages by five different groups: the host department, host faculty, Executive Committee, APRC and Academic Council. Academic Council approves new programmes on the advice of APRC. Students and representative stakeholders of the academic units (faculty and department/school) proposing the programme are represented on Academic Council.

Procedures for institution-wide programme design, approval and modification are stored on SharePoint. The approval process procedures and guidelines, including defined criteria, are documented in *Procedures for Processing Programme Proposals* and *Guidelines to Ensure Quality and Consistency of Submissions*, respectively.

4.2 Learner admission, progression and recognition

4.2.1 Criteria, policies and regulations

The University's policies and procedures in relation to admission, progression and recognition of prior learning are informed by QQI's Policy and Criteria for Access, Transfer and Progression in Relation to Learners for Providers of Further and Higher Education and Training.

The online prospectuses for undergraduate and postgraduate programmes and the Graduate & Professional Studies and UL Global Division websites specify the admission processes and entry criteria for the University's programme offerings. Programme award titles are aligned with the institution's Award Titles Framework. The Access and Widening Participation Policy provides for entry mechanisms, programmes and support services that ensure equality of entry, participation and outcome for all student groups at the University. The Recognition of Prior Learning Policy complies with national and European principles on recognition and recognises all types of prior learning, including that acquired by formal, non-formal and informal routes. Appeals with regard to admissions decisions are managed under the admissions appeals process for undergraduates and postgraduates.

The Handbook of Academic Regulations and Procedures specifies the regulations relating to learner admission (sections 1.2, 1.3, 5.3, 5.4), progression (4, 5.5, 5.6), recognition (1.4, 1.5, 2) and certification of awards (1.6, 5.2). The handbook is updated annually to ensure all regulations and procedures remain fit for purpose. Handbook updates are recommended by ARC and approved by Academic Council. The Academic Programme Transfer Policy specifies conditions under which students can apply to transfer between programmes internally or from a programme in another HEI.

4.2.2 Learner progression and completion rates

The Institutional Research Officer gathers statistics on student admission and progression. Reports on student progression per programme are compiled and presented to course directors, heads of department/school, faculty deans and Executive Committee.

In accordance with the Academic Programme Review Policy (which is covered in more detail in section 4.3), each programme's course review board is provided with the following sets of anonymised data, which they use in their annual and periodic programme review reports:

- Course data report, including:
  - Application data – CAO + international
  - New entrant CAO points – minimum and median
  - New entrant entry mode – DARE, FETAC, HEAR and mature
  - Student enrolment and progression data
  - First-year presence and progression after one year
  - Graduates by award level
- Course-specific results from the Student Exit Survey
- External examiner reports from the previous three academic years
- Graduate first destination reports
- All available annual programme review reports since the previous periodic review

4.3 Programme monitoring and review

Under the terms of the University's Academic Programme Review Policy, all taught programmes are subject to formal annual review by the relevant course review board and to periodic review (usually every five years) by a panel that includes external personnel.

Master's and PhD theses by research are monitored by means of an annual progression and monitoring system involving research review panels within each academic unit. The theses are examined and reported upon by internal and external examiners. Refer to the Postgraduate Research Forms page of the Graduate & Professional Studies website for details.

4.3.1 Annual review

As specified in Appendix 2 of the Academic Programme Review Policy, the terms of reference for the annual course review board are:

- To support and enhance academic quality and standards of the programme of study
- To review programme performance metrics on an annual basis, and propose actions to be considered by the department and faculty
- To provide feedback on proposed programme changes for the following academic year
- To consider reports from external examiners and where appropriate recommend follow-up actions
- To consider university, external accrediting body or national policy developments on the programme of study, and where appropriate recommend follow-up action

4.3.2 Periodic review

As specified on page 4 of the Academic Programme Review Policy, the objective of the periodic programme review is "to review the programme(s)' aims and objectives, programme outcomes and Annual Reports, and make recommendations to the Academic Programme Review Committee on the continued suitability and quality of the programme offered." The terms of reference for the periodic programme review panel (Appendix 7 of the policy) are:

- Quality and sustainability of the programme(s) including electives and specialist options
- Graduate progression and employability trends
- Consideration of external and other stakeholder input, e.g. alumni, employers, accrediting bodies
- Consideration of student feedback and the students' learning experience
- Effectiveness of structures for responding to annual programme reports. Particular attention will be required for inter-departmental and interfaculty programmes.
- Programme outcomes aligned with NFQ Levels
- Effects of changes and revisions to programme since last review
- Alignment with University strategy and policies (e.g. teaching and learning strategies, Graduate Attributes, Plagiarism guidelines)

The periodic programme review is based largely on a self-assessment report that is compiled by the course director in conjunction with the course review board. The self-assessment report includes the annual programme review reports as appendices. After analysing all the presented data, the review panel reports to APRC, which subsequently reports to Academic Council. Prior to reporting to Academic Council, APRC considers the periodic programme review panel's report and makes recommendations to the course review boards, department and faculty on how the programme could be improved. The course board is responsible for ensuring that such recommendations are acted upon. Subsequent revised programme specifications are incorporated into the programme description published on the University online prospectus.

APRC's report to Academic Council includes a recommendation to take one of the following courses of action: (i) renew the approval for a period of time, normally five years; (ii) renew accreditation subject to conditions and for a maximum period of five years; (iii) not approve the programme for future intakes.

5 Staff recruitment, management and development

5.1 Staff recruitment

The University's HR policies and procedures for the recruitment of academic, support and research staff comply with Irish public sector recruitment and appointment procedures. Recruitment policies, procedures and practices comply with the Universities Act 1997, the Employment Equality Acts 1998/2004, the Equal Status Acts 2000/2004 and the Qualifications and Quality Assurance (Education and Training) Act 2012, as amended by the *Qualifications and Quality Assurance (Education and Training) (Amendment) Act 2019*. The University's Equality and Diversity Policy is designed to ensure that the University's procedures and practices operate in a manner that is consistent with the institution's commitment to equality of opportunity and do not discriminate against individuals on grounds of gender, gender identity, gender expression, civil status, family status, sexual orientation, religious belief, age, disability, race or membership of the Traveller community, socio-economic status, ethnicity, national identity or neurodiversity.

The University's recruitment and staff development procedures for academic staff are designed to ensure that teaching staff are suitably qualified and experienced for their teaching and research roles. Applicants called to interview are required to submit references prior to interview, and subsequent offers of employment are subject to receipt of satisfactory references. Prior to taking up an offered position, the successful candidate must submit evidence (original copies) of academic, professional or technical qualifications. PhD qualifications are the norm for academic staff.

The recruitment policies are reviewed regularly, updated as required, approved by Governing Authority and published on the HR website.

5.2 Staff management

Terms of probation and tenure are addressed in each new hire's contract and job specification. Members of staff report to and are managed by their line manager. Established members of staff (i.e. those with a contract of at least 10 months) participate in the University's formal, mandatory Performance and Development Review System (PDRS). The PDRS is designed to identify the CPD needs of staff and to ensure those needs are met. Section 5.3.2 provides more details on the PDRS.

5.3 Staff development

5.3.1 Induction

Newly recruited members of staff participate in an intensive, one-day general induction programme delivered by HR. General induction includes reference to web-accessible HR employee policies and procedures, including the Code of Conduct for Employees and the Acceptable Behaviour in the Workplace Policy. In addition, new staff are provided with local induction to familiarise them with their designated roles and responsibilities and their place within the unit.

5.3.2 Ongoing CPD

Ongoing CPD is a central feature of the University's professional development environment. Through the PDRS, the head of department/school meets with each member of staff to agree on specific CPD requirements for that staff member. The Centre for Teaching and Learning (CTL) operates a peer observation of teaching process whereby an academic member of staff observes a colleague's teaching and gives them feedback on how their teaching could be improved. The CTL offers the Student Evaluation of Teaching (SET) process, which is designed to provide useful information to individual lectures on their students' experiences of the modules they teach. The CTL promotes graduate diploma and master's courses in teaching, learning and scholarship. In conjunction with the National Forum for the Enhancement of Teaching and Learning in Higher Education and the Mid West Regional Cluster the CTL offers teaching staff regular workshops on various aspects of pedagogy and a wide variety of resources and supports for improving their teaching. The University's (TELU) Learning Technologists Forum provides a coordinated approach to the use of technology-enhanced and blended learning strategic plan (*UL@50*).

The HR Learning, Development and Equal Opportunities section promotes and coordinates professional training and development courses, including teaching-related courses, and a campus-wide mentoring scheme.

6 Teaching and learning

6.1 Monitoring the quality of the learning experience

UL@50 commits the University to providing a highly engaged learning experience for students. Student feedback on the learning experience is sought annually through the Module Satisfaction Survey (MSS), the SET process and the Student Exit Survey, the results of which are reviewed and acted upon by course boards and directors. The mandatory MSS enables students to provide feedback on specific aspects of their learning experience. The voluntary SET process asks students to rate the quality of their modules, their lecturers' teaching and their own learning experiences. The MSS and SET run alternately on a two-semester-on and two-semester-off basis. The Student Exit Survey asks final-year students to give feedback on their overall experience of the University and their programme and to rate their satisfaction levels with teaching and learning, assessment and feedback, academic support, programme organisation and management, learning resources, personal development and work placements.

Coordinated at national level, the Student Survey.ie) asks students about their experiences of higher education with a view to informing developments within the participating institutions. Each HEI is provided with institutional results, which can be analysed at faculty, departmental and programme level. At the University, the ISSE is coordinated by the ISSE Working Group, which comprises representatives from across the campus, including the Student Engagement & Success Unit (SESU) and Student Life. The CTL analyses the ISSE data and presents findings to a number of senior management groups, including Academic Council. Where response rates can support the use of granular data, academic units are encouraged to refer to ISSE results in annual programme reviews.

The external examining system contributes to assuring the quality of the learning experience. Course review boards consider external examiners' annual reports and must document their response to the reports in their annual programme review report. The outcome of programme reviews are considered at unit and faculty levels and by APRC in accordance with University procedures.

Under the terms of the Academic Programme Review Policy, each programme's annual course review board and periodic programme review panel are provided with data that enable the board/panel to consider the quality of teaching and learning. Such data include student enrolment and progression statistics, exit survey results and external examiner reports.

6.2 Promoting an ethos of learning

6.2.1 Promoting engaged learning

One of the main ways that the University instils an ethos of learning among learners and educators is through *Engaged Learning*, its teaching and learning strategy. The strategy is based on a framework that includes the following five pillars: academic rigour, enriched educational experiences, supportive campus environment, active and collaborative learning, and meaningful student/staff interaction.

UL Engage was established in September 2015 in accordance with the institutional strategic plan. The aim of UL Engage is to integrate civic engagement into the University's core missions in research, teaching and internationalisation. UL Engage supports institutional/community collaborations through a variety of new and existing University programmes and projects. It serves as the hub for civic engagement activities across campus and works with staff in all faculties to amplify, incubate and coordinate the various ways that students and staff can work to make a difference.

6.2.2 Diverse learner needs

Students with diverse learning needs are catered for by the Access Office while those with disabilities are catered for by Disability Support Services. The Mature Student Office provides support to all mature students.

As part of its long-term commitment to equality, diversity and inclusion in all of its activities, the University engages with the Athena SWAN (Scientific Women's Academic Network) charter organisation, which was established in the United Kingdom to recognise and celebrate good practices in higher education and research institutions to promote the advancement of gender equality. In 2019, the University was awarded a Bronze Athena SWAN award to the expanded charter (which includes the arts, humanities, social sciences, business and law) in recognition of its proactive attitudes towards gender equality.

The University is committed to providing access for people from all backgrounds. As a University of Sanctuary since 2017, the University enables access to higher education for refugees and asylum seekers through a number of financial support plans and programmes to aid with the transition to a new educational environment.

The University is committed to providing access for people from all backgrounds. As a University of Sanctuary since 2017, the University implements a number of financial support plans and programmes to enable refugees and asylum seekers to access higher education and to adjust well to the new educational environment.

The Centre for Teaching and Learning (CTL) manages five learner support centres, each of which provides a space where students can feel comfortable learning in small groups or in one-to-one situations. The five centres are the Science Learning Centre, Mathematics Learning Centre, ICT Learning Centre, Regional Peer-Supported Learning Centre and Regional Writing Centre. Co-managed by the CTL, Student Affairs Division and Library, SESU provides dedicated support to first-year students during their transition to third-level education.

Working with the University's four faculties, the Graduate & Professional Studies (GPS) unit manages the development and delivery of flexible and relevant professional and personal development programmes. GPS uses a hybrid model: academic units retain ownership of courses and academic material while GPS provides the support, procedures and processes that enable the delivery of flexible learning pathways.

6.2.3 Pedagogical methods

The teaching and learning committee of each faculty (and of some of the larger academic units) encourages and supports the use of a variety of pedagogical methods, which are evaluated by the course board, the external examiners and final-year students (Exit Survey).

Activity 1.3.1 of *Engaged Learning*, our teaching, learning and assessment strategy, commits us to developing technology-enhanced pedagogy. The use of technology-enhanced learning is supported by the CTL, TELU and the Information Technology Division (ITD). TELU was established to streamline all current institutional initiatives relating to the enhancement of technology.

The University's virtual learning environment (SULIS) is used by lecturers to communication with their students. SULIS can be used for posting online quizzes and assessments and providing students with feedback on projects and assignments. Based on feedback from staff and student users, TELU evaluates and improves SULIS as required.

6.2.4 Learner appeals and complaints

Regulation 4.2.10 of the Handbook of Academic Regulations and Procedures and section 6 of the Student Handbook specify the grade rechecks and grade appeals process. The Student Complaints Procedure deals with complaints from learners. The undergraduate, postgraduate and Erasmus student charters are available on the Corporate Secretary's website.

6.3 National and international effective practice

Excellent teaching at the University is recognised and rewarded through four teaching award schemes: (i) University of Limerick Excellence in Teaching Awards; (ii) Shannon Consortium Regional Teaching Excellence Awards; (iii) the National Forum's Teaching Expert Awards; and (iv) the National Forum's Teaching Hero Awards. Activity 2.1.4 of *Engaged Learning* centres on endorsing excellence in teaching and commits the University to reviewing and developing the institution's teaching awards scheme (no. (i) above) to strategically align it more closely with relevant regional and national systems. Based on the findings of such a review, the awards scheme now recognises excellent teaching across three categories: individual teaching, team teaching and the provision of pedagogic support.

The CTL provides a wide range of professional development supports for academics. The activities are aligned to institutional strategies and to Shannon Consortium agreements. In addition, the centre's CPD activities for teaching staff are informed by the National Forum for the Enhancement of Teaching and Learning's National Professional Development Framework for All Staff Who Teach in Higher Education (August 2016). The framework was developed in consultation with higher education institutions over a two-year period. As part of the National Forum's enhancement theme, the CTL hosts national workshops with invited speakers.

As documented in their periodic quality review self-assessment reports, academic units collaborate with colleagues in cognate institutions overseas and participate in international networks to enhance teaching, learning and research. The University engages international experts to join the quality review groups for these periodic reviews. During Cycle 2 of the review process (2009 to 2017), 55% of the review group members came from outside the island of Ireland.

As documented in the External Examiner Policy, two of the functions of external examiners are to consider whether or not the programme of study meets the professional requirements of the discipline and to provide a formal annual report to the University on how student attainment compares with accepted standards in the particular discipline. The annual external examiner report template invites the examiner to make suggestions on how the programme or module learning outcomes could be modified. Two-thirds of external examiners of taught programmes and PhD theses are international.

HR's Learning, Development and Equal Opportunities section offers staff CPD programmes designed to make their practice more effective. In addition to training and development courses offered on an annual basis, programmes include leadership and management development, performance development and review, research, mentoring, dignity & respect and e-learning.

6.4 Learning environments

6.4.1 Different learning environments

The application forms for proposing new programmes (*New Programme Template*) and modifications to existing programmes (*Existing Programme Template*) both include a section for describing the learning environment. Guideline no. 11 of the *Guidelines to Ensure Quality and Consistency of Submissions* states that those submitting applications for new programmes must ensure that any special features of the programme (e.g. the use of shared facilities, distance education or other delivery modes) are clearly specified.

6.4.2 Off-campus learning

Undergraduate programmes include either a six-to-eight-month cooperative education placement ('Co-op') or practice placement (clinical or teaching). Both types of placement are formal, compulsory and academically accredited elements of the programme. For programmes with professional placements regulated in part by an accrediting body such as the Medical Council or Teaching Council, placements are restricted to sites that are recognised by that accrediting body. In addition to Co-op, language students may undertake an Erasmus placement at a European partner institution.

A company that will be used for the first time for Co-op students is visited in advance, if possible, by a staff member of the Cooperative Education & Careers Division (CECD) to check the suitability of the placement for

the student(s). After the Co-op period has concluded, the placement is reported upon by the student and the visiting academic; if problems are flagged by either party, CECD investigates the issue and takes remedial action.

6.4.3 Physical premises, equipment and facilities

The Buildings and Estates Department manages and allocates space on campus in accordance with the University's Space Management Protocol (approved by Executive Committee). Buildings and Estates ensures that all aspects of the University's infrastructure are safe.

The Glucksman Library, which is managed and quality assured by the Library and Information Services Division, provides information resources and facilities to students, staff and researchers.

In relation to research, laboratory space and associated equipment falls under the auspices of the individual academic unit and/or research institute in which the facilities reside.

As part of their periodic quality reviews, academic, research and support units evaluate and report upon the adequacy of their physical premises, equipment and facilities. Any recommendations put forward to a unit by the reviewers are itemised in the unit's post-review quality improvement plan.

Students are asked to give feedback on teaching and learning facilities. The Exit Survey asks students about the appropriateness of the learning environment while the MSS asks students to rate how they feel about their modules' resources, rooms and facilities.

The institutional Safety Statement provides a framework for the organisation of safety throughout the University. The statement includes guidelines for personnel with delegated safety duties who will, by their actions and encouragement to others, ensure that the University continues to be a safe place in which to work and learn. The Health & Safety Essentials booklet, to be read in conjunction with the Safety Statement, provides guidance on the very broad scope of health & safety at work. The purpose of the booklet is to summarise the main points of the Safety Statement (Part 1) and provide information on a number of general health and safety issues relevant to the whole institution (Part 2). Further details of health and safety policies and procedures, including Garda vetting and foreign police clearance, are available on the Health and Safety page of the HR website.

7 Assessment of learners

7.1 Assessment regulations

The Provost and Deputy President has overall responsibility for the assessment of learners. As specified in section 2.1.2 of Marks and Standards in the Handbook of Academic Regulations and Procedures, the VPAASE ensures:

i. the proper conduct of assessments, including invigilation
ii. implementation of maximum security in all matters pertaining to assessments
iii. that assessment papers/materials are prepared by internal examiners, approved by external examiners and printed in good time for final assessments
iv. that appropriate assessment arrangements are made for each candidate
v. that scripts and other assessment materials are examined by internal examiners and that results for each candidate as approved by the external examiners are made available for meetings of Academic Council Examination Boards
vi. that accurate records in regard to continuous assessment, along with all associated materials, are maintained and made available as required and, in particular, to external examiners
vii. that proper arrangements are made for holding meetings of Academic Council and Faculty Examination Boards in accordance with the provisions of section 2.3 below

viii. timely transmission of the recommendations of meetings of Academic Council Examination Boards to the Academic Council

The Handbook of Academic Regulations and Procedures is updated annually by ARC and approved by Academic Council. The handbook is published on the policy hub. Once the handbook has been updated, ACADEMIC REGISTRY sends a notification email to all members of the campus community specifying what has changed.

7.2 Assessing attainment of learning outcomes

As specified in the Handbook of Academic Regulations and Procedures (regulation 2.4.1), awards are made "on the basis of a candidate's performance in assessments or other tests of the attainment of learning outcomes which have been duly set by the academic staff members of the University and approved and monitored by external examiner(s)". Module assessment is designed to measure the extent to which learners have achieved the module's learning outcomes.

Academic regulation 1.4.3 requires the academic staff member(s) to provide details to the students of the learning outcomes of the module, indicative grade descriptors corresponding to each grade, the criteria on which assessment is to be based, the minimum performance standard, the weighting allocated to each assessment instrument associated with the module and the repeat assessment instrument(s) associated with the module. This information is given to the students in the form of a module outline at the start of the module.

In their annual reports, external examiners must comment on the extent to which the chosen assessment methods assess students' attainment of the learning outcomes and facilitate the academic to provide feedback to the students on their performance.

7.3 Assessment records

The University's Records Management and Retention Policy specifies the retention policy relating to examination documentation (i.e. papers, scripts, forms, external examiner reports, grade records, transcripts, etc.). The retention times set out in the schedule in the policy reflect national legislation, where relevant, and sector-wide best practice standards.

ACADEMIC REGISTRY is responsible for the security of end-of-semester examination papers and, in the first instance, exam scripts. Once exam scripts have been collected by individual lecturers, the security of the scripts becomes the responsibility of the relevant department. Scripts sent to external examiners are done so by courier or registered post. Refer to section 4.1.3 (Academic Staff Attendance at End-of-Semester Assessments) of chapter 4 (Supporting Procedures) of the Handbook of Academic Regulations and Procedures for more details.

7.4 How assessment promotes effective teaching and learning

The University operates a modular credit continuous assessment system, which provides continual feedback of information to students on their academic performance (regulation 1.4.1 of section 1.4 (Assessment and Grading) of the Handbook of Academic Regulations and Procedures). Regulation 1.4.2 states that the University provides formal examinations at the end of each semester and at annual repeats. Following formal exams, students are provided with a transcript of their current academic performance, and it is their responsibility to use the transcript to monitor their own progress and to take action to ensure they comply with required standards of quality and performance (regulations 1.4.13 and 1.4.14).

As documented in the Student Handbook (section 6), students are encouraged to seek feedback from lecturers on assessment. Academic staff set aside time for students to call in for one-to-one feedback and academic guidance. In addition, students can view their scripts on designated days.

7.5 How assessment is regulated

The regulation of assessment is covered in section 1.4 of the academic regulations. As specified in the external examiner policy, one of the roles of the external examiner is to review assessment methods and student performance and advise Academic Council whether or not students' attainment of the programme's learning outcomes has been fairly assessed (page 1). One of the questions in the external examiner annual report template asks the examiner to comment on the suitability of the assessment methods to assessing student attainment of the learning outcomes of the modules and programme. Any such feedback is reported upon by the examiner in the annual report.

Course review boards review the programme's assessment procedures during the annual programme review.

7.6 Learner involvement in reviewing assessment

Student feedback on assessment is sought annually through the MSS and Exit Survey. The results of these feedback mechanisms are reviewed annually and acted upon by course review boards (which include student reps) and directors.

Student reps sit on ARC, APRC and Academic Council, where formal institutional-level changes to assessment procedures are proposed, debated and approved (by Academic Council) and published in the Handbook of Academic Regulations and Procedures.

7.7 Complaints and appeals

The assessment appeals process is rigorously documented in the Handbook of Academic Regulations and Procedures (regs. 1.5.5 and 4.2.10 and procedures 4.4.4 and 4.4.9). The appeals process for research students is specified in section 5.15 of chapter 5 (Research Postgraduate Academic Regulations) of the handbook.

8 Supports for learners

8.1 Adequacy of resources

Learning resources are specified in the formal programme proposal application, which must be approved by the committees and through the process outlined in section 4.1 of this manual.

The course review board's annual review of a programme includes an evaluation of the adequacy of the programme's learning resources. The review takes into account feedback from external examiner reports and from the student survey mechanisms described in section 8.3 below.

The periodic quality review of academic and research units includes a review of the unit's learning resources. The unit reports upon the adequacy of the resources in its self-assessment report. If it sees fit to do so, the quality review group makes recommendations in relation to improving resources. The periodic quality review of support units includes a review of the adequacy and effectiveness of the educational resources and services provided to learners by the relevant units. In addition, support units ensure the effectiveness of the services they provide through their QMSs, which are based on the University's QMS framework.

8.2 Responsibilities for provision

The provision of module resources is the responsibility of relevant academic and support units. Relevant examples of the latter include ITD, Buildings and Estates, the Library and the Student Affairs Division. Where review processes (course review board annual programme review, external examiner reports, student surveys) point to a shortfall in a programme's learning resources and/or learner supports, the course director liaises with the head of department/school to rectify the situation.

Academic Registry is the main provider of administrative services (e.g. maintains student records, administers end-of-semester examinations, issues graduate parchments and transcripts, and develops and

administers procedures for complying with the University's academic regulations and marks and standards) to units running programmes of study and their students. ACADEMIC REGISTRY is subject to periodic quality review and, through its QMS, regular QMS auditing.

The main learner support units (Access Office, Mature Student Office, Disability Support Services, Counselling, Chaplaincy and Student Health Centre) reside in the Student Affairs umbrella division. The Access Office works to promote and support the participation of students from groups that have been under-represented in the third-level education sector. The Mature Student Office supports mature students who are registered on full-time undergraduate programmes and students who are registered on the Mature Student Access Certificate. The office helps to ease these students' transition into full-time higher education. Students with additional requirements are supported by Disability Support Services, which provides a range of services to students, including assistive technology. The Disability Support Services handbook provides detailed information for current and prospective students. Pastoral care is provided to students through the Personal Academic Support System (PASS), Counselling, Chaplaincy and the two students' unions (Student Life and Postgraduate Students' Union). The Student Health Centre's service is provided to registered students only.

The Careers Service (a section of the Cooperative Education & Careers Division) offers support to students and recent graduates in developing and implementing successful career plans and facilitates the recruitment process for students and employers.

The remit of the University's Access, Equality and Student Affairs Committee includes ensuring that "policies prepared are in accordance with good practice, student equality and diversity principles, and student, University and legislative requirements".

Led by the UL Global, the University's compliance with the Code of Practice for Provision of Education and Training to International Learners is documented here.

The Centre for Teaching and Learning offers a number of initiatives to students to support their learning, including the First Seven Weeks programme, study skills and exam technique workshops, and a number of student support centres (the five learner support centres listed in section 6.2.2 and SESU).

HR's Learning, Development and Equal Opportunities section provides training and development courses to support the development of research skills for research and academic staff. Popular programmes include networking for research, grant writing, communicating research effectively, research ethics and PhD supervision. In addition, HR operates a research coaching programme, which brings together those involved in research to exchange experience and provide each other with guidance and support in achieving research outputs, including publications, books and research grants.

8.3 The learner's perspective

Three students sit on the 29-member Governing Authority. Students are represented on Academic Council, faculty boards, annual and periodic programme review boards, quality review panels and many more University committees and working groups (approximately 60 in total). In addition, the student voice is captured through surveys, focus groups and meetings with external examiners.

Learners are represented by their class representative at module, programme and department level. The class rep system is part of Student Life, to which all students automatically become members when they enrol at the University. The union's three sabbatical officers (President, Welfare Officer and Academic Officer) and part-time members of the union's Executive Committee represent students at institutional management level. In addition, students' academic advisors make representations on behalf of students at various fora. As well as being represented by Student Life, postgraduate students are represented by the Postgraduate Students' Union.

Students are informed about available resources at orientation. The annually updated Student Handbook, a hard copy of which is given to taught students at orientation and which is accessible on the ACADEMIC REGISTRY website, includes detailed information on all University support services. The promotion of learner

resources and supports comprises a significant part of student orientation (First Seven Weeks programme). The First Seven Weeks programme is heavily promoted on campus in September and October each year.

The annual Student Exit Survey includes a question on learning materials, a three-part question on learning resources and a three-part question on welfare resources and facilities and asks students to make suggestions on ways to improve resources. The (mandatory) MSS asks students to rate how they feel about their modules' resources, rooms and facilities. In addition, the (voluntary) Student Evaluation of Teaching (SET) process asks students to rate the extent to which their teachers make appropriate and effective use of technology in their teaching.

Students can pass on their perspectives on learning resources and supports to their class representative, in person to the module leader or course director or through the exit or MSS survey. Student feedback is acted upon by the module leader or course director, if possible, or escalated to the head of department/school and/or course board.

9 Information and data management

9.1 Information technology and systems

In addition to maintaining and developing the University's network and communications infrastructure, including the campus data centre facilities, the Information Technology Division (ITD) maintains a suite of enterprise applications and software systems that are critical to the teaching, learning, research and administrative goals of the institution. The IT strategy, *UL Enable 2018-2022*, is about positioning IT in the institution as an enabling and leading capability for the University in realising its mission and strategic objectives. A list of IT-related policies and regulations is available on the ITD website.

The University operates the following information management systems:

- SI (student records system)
- Core (HR information management system)
- Agresso (finance management system)
- ULRIS (research information system)

Profiles of the student population as well as student progression, success and drop-out rates are gathered, reported and analysed in a number of ways. The Institutional Research Officer gathers statistics on student admission and progression. Reports on student progression per programme are compiled and presented to course directors, heads of department/school, faculty deans and Executive Committee.

The Office of the President compiles student profile data for inclusion in the University's annual Strategic Dialogue self-assessment report to the Higher Education Authority (HEA) – see the published HEA's Higher Education System Performance Institutional and Sectoral Profiles for details.

The annual institutional-level Student Exit Survey process includes internal longitudinal benchmarking and benchmarking against our linked providers.

The University's Student Engagement & Success Unit (SESU) undertakes research and analyses data relating to student engagement. The source of the data is the Istudentsurvey.ie (query this!)

Overseen by the Academic Registry Division, ACADEMIC REGISTRY maintains and controls the University's student records through its student records system (SI), from which various officers and offices can extract and tailor data to generate reports. Reports are generated from SI for relevant internal stakeholders at institutional level (e.g. Academic Council and Executive Committee) and local level (e.g. course review boards). Reports are generated from SI as required for external stakeholders, such as the HEA and the Department of Education and Skills.

A list of University programmes is generated annually by ACADEMIC REGISTRY from SI for submitting to the HEA. Twice a year (mid-semester), a 'not-registered' report is generated by ACADEMIC REGISTRY from SI and sent to the HEA and grant-funding bodies (e.g. SUSI). The security of SI is maintained through access levels,

which are controlled by ITD and the system administrator in the units that use SI. Academics input their students' assessment results into the system, and data integrity scripts are run (Oracle Discoverer) to check the accuracy and completeness of the data.

9.2 Records maintenance and retention

The University operates an institutional records management and retention policy. Policies and procedures on the maintenance and retention of quality-related documentation at unit level form part of each support unit's QMS. One of the quality management processes of the QMS is documentation control. All QMS processes are published on the Quality section of each unit's website.

9.3 Data protection and freedom of information

Data protection forms part of the remit of the Corporate Secretary's Office. The University operates a data protection policy, which was revised in 2018 to reflect changes under the General Data Protection Regulation (GDPR), a European Union (EU) regulation introduced in May 2018 to strengthen and unify data protection within the EU. GPDR replaces the Irish Data Protection Acts 1988 and 2003.

The Corporate Secretary's Office website has a dedicated web page that outlines how and why the University shares personal data with third parties and lists all relevant parties. The Corporate Secretary's Office also manages the University's freedom of information function. The University complies with the Freedom of Information Act 2014 and has an FOI unit and FOI officer.

The Corporate Secretary's Office website includes an Information and Compliance page. In addition to the aforementioned records management, FOI and data protection, this page provides information on the Disability Act, the Official Languages Act, copyright and environmental regulations.

10 Public information and communication

10.1 Public information

The University regularly updates its website so that its wide range of stakeholders can easily source information relevant to them. The Office of the President is responsible for maintaining the high-level pages, such as those providing information on institutional leadership, Governing Authority, Academic Council and strategic publications. Individual units are responsible for maintaining their own websites, all of which are accessible from the University homepage.

The University adheres to the Freedom of Information Act 2014, which informs institutional practice in this area. Section 8 of the Act requires FOI bodies to prepare and publish as much information as possible in an open and accessible manner on a routine basis, having regard to the principles of openness, transparency and accountability as set out in sections 8(5) and 11(3) of the Act. Links to each section of the University's FOI Publication Scheme are maintained by the FOI section of the Corporate Secretary's Office. Links include:

- Information on Functions & Services Provided
- Other Routinely Published Information / FOI Disclosure Log

The Corporate Secretary's Office website also includes sections on data protection, records management and environmental information.

The University's Student and Staff Gateway provides information on calendars and timetables; policies, procedures and handbooks; learning resources; support and administration; further study; and details on upcoming events.

The Marketing and Communications Division is responsible for gathering and disseminating a wide range of information to audiences both internal and external to the University. The Division also manages the University's institutional social media accounts. The University's Social Media Strategy and Social Media Policy are available here. The focus of the strategy is to develop a core tier of social media channels and

adopt a proactive social media publishing process that integrates the four faculties and key business units. The Division supports the campus-wide University Social Media Community Group and offers training, strategic advice and policy guidelines.

10.2 Learner information

The online prospectuses for undergraduate and postgraduate programmes and the Graduate & Professional Studies (GPS) and UL Global Division websites specify details of (or provide links to) the University's programme offerings. The published information for each programme specifies the programme's title; NFQ level; entry requirements; duration; structure; list of modules; career prospects; student profiles; video clips from students, graduates and staff; and a contact name and email address for more information. Hard copies of the prospectuses and supplementary programme descriptor documents are made available to the public during open days, career fairs and information evenings.

Current and prospective research students can access information on the University's research activities and offerings on the Research and GPS websites.

All programmes published on the online prospectuses lead to an award. UL Global International Foundation Programme web page makes it clear that the programme does not lead to an award itself but provides international students with an alternative application route to undergraduate study. The Programmes and Courses pages of the GPS website specify whether the programme in question leads to an award and, if so, what the award is.

Information on internal transfer and progression is available in the Student Handbook, which all new students receive during enrolment.

10.3 Publication of QA reports

QA evaluation reports are published at unit level in the context of the periodic quality review process for academic, research and support units. The outputs of the process for each unit include (i) a reviewers' report, which is published on the QSU website; and (ii) a quality improvement plan (QIP) for the unit, which is based on the recommendations from the reviewers' report. The final QIP implementation summary report is published on the websites of the QSU and the relevant unit, and the QSU informs the campus community (by email) about the publications.

The University publishes the reports from its institutional reviews 2011 and 2020) on the Office of the President and QSU websites.

11 Other parties involved in education and training

11.1 Peer relationships with the broader education and training community

A diverse range of initiatives, procedures and activities are enacted at institutional and local level with a view to promoting stakeholder engagement. The following are some examples:

- UL Engage fosters engaged learning and research with the communities of Limerick city and the region. UL Engage aims to inculcate civic values and promote access to higher education, learning attainment, research with societal impact and knowledge exchange. Building and strengthening community relations informs the development and delivery of programmes of study and research.
- In line with the 2025 National Skills Strategy, the University is an active member of the Regional Skills Forum and participates in initiatives such as Springboard, Apprenticeships and Skillnets to develop, deliver, accredit and quality-manage flexible, work-based programmes.
- Students are systematically represented in all aspects of University governance and quality assurance activity (e.g. student representation on Governing Authority, Academic Council, faculty boards, course review boards and review panels of academic units).

- As part of the quality review process for academic, research and support units, individual units identify their customers and stakeholders and reflect upon levels of engagement with a view to identifying opportunities for enhancing quality. The quality reviewers meet with stakeholders as part of review site visits, and key stakeholders (e.g. student and employer representatives) are invited to participate on quality review teams.
- Engagement with employer and related stakeholders is largely facilitated by the Research Office (research, intellectual property and technology transfer), the Cooperative Education & Careers Division (managing a network of over 2,000 employers in the context of student placements) and Graduate & Professional Studies. These networks and linkages are routinely used to identify employer and related stakeholders for participation in QA activities (such as the external examining process, unit quality reviews and periodic programme reviews).
- The UL Global Division facilitates stakeholder engagement by the faculties with academic institutions and other relevant organisations abroad. These networks and linkages are at the heart of the University's internationalisation agenda and are used to inform institutional quality improvement (learning from best practice).
- The University has a Director of China Engagement. The director's main function is to contribute significantly to the University's profile in China and the growth of Chinese student numbers at the University.
- One of the principles of the QMS framework operated by every support unit is relationship management, which involves managing relationships with suppliers, partners and other relevant parties. One aspect of this work is the establishment of criteria to select and evaluate external service providers. The extent to which units achieve this is audited through the inter-department auditing process and the periodic quality review process.

11.2 External partnerships

The University considers entering into partnership agreements with public and private bodies to develop and accredit programmes of study that align with the institution's aims and goals as described in the strategic plan. The University pursues a defined framework (documented on SharePoint) to establish, following discussion with the external partner, the terms of reference of any accreditation arrangement. The accreditation process involves a review of the academic programmes of study and the capacity of the external partner to deliver the programmes in a manner consistent with the University's QA processes. The process entails establishing an accreditation committee tasked with reviewing external partner documentation and facilities and reporting recommendations to the relevant institutional committee. The University policy on Collaborative and Transnational Education Provision is available on the policy hub.

11.3 Linked providers

In the context of the 2012 Education and Training Act and in its role as a designated awarding body, the University accredits a number of programmes offered by linked providers. The University's linked provision arrangements are guided by its linked provider framework. The framework covers linked provider approval, annual monitoring and periodic review processes, which include clear governance guidelines.

As a designated awarding body, the University has established relationships with two educational linked providers: Mary Immaculate College (MIC), Limerick and the Garda College, Templemore, Co. Tipperary.

QA procedures for engaging with linked providers are governed by memorandums of understanding and agreement (MoU/MoAs) between the University and individual linked providers. The MoU/MoAs, and hence the exact profile and scope of the resultant QA oversight, are tailored to best suit individual institutional contexts and are approved ultimately by Academic Council and Executive Committee.

11.4 Expert panellists

In compliance with the guidelines for the periodic quality reviews of academic, research and support units, the review groups include senior academics (academic units), peers (research units) and cognates (support units), who come from outside the Republic of Ireland and work in disciplines that provide them with a

strong degree of familiarity with the core activities of the unit under review. The expert panellists on academic and research unit reviews typically have a significant international reputation in their field of expertise and come from a prestigious international university or other appropriate institutional setting. The expert panellists on support unit reviews are typically directors or senior members of a similar unit in a leading international university or comparable educational institution outside Ireland. The QSU maintains a record of all quality review group members.

In compliance with the University's procedures for the recruitment of academic staff, selection panels include one or two (depending on the level of appointment) external and one internal subject specialist. In compliance with procedures for the recruitment of research scholars, selection panels include at least one external and at least one internal subject specialist. In compliance with procedures for the recruitment of support staff, selection panels include a person external to the unit who has expertise in the unit's business. In compliance with the procedures for the promotion of academic staff, promotion panels include two external academics.

In compliance with the Academic Programme Review Policy, (i) expert personnel may be invited onto the course review board (for annual programme review) at the discretion of the chairperson, and (ii) the period programme review panel will include two external academic subject experts and at least one employer representative.

11.5 External examiners

In accordance with the University's QA procedures, Academic Council appoints external examiners to all taught programmes to provide an independent report on student performance, programme outcomes and proposed awards. The External Examiner Policy specifies the examiners' roles and function, how they are appointed (including reference to conflict of interest) and how the system is administered.

External examiners of research programmes are approved by the relevant head of department/school and the Assistant Dean Research and appointed by Academic Council.

Two-thirds of external examiners of taught programmes and PhD theses are international.

12 Self-evaluation, monitoring and review

12.1 Provider-owned internal review, self-evaluation and monitoring

The University's governance committees (Governing Authority, Executive Committee, Academic Council and faculty boards) receive a range of reports for their ongoing consideration. For example, the annual student exit survey results are sent to Executive Committee and Academic Council.

Overseen by the VPAASE and managed by the QSU, the University operates a rolling, systematic, internal quality review process. Following their quality review by peers every seven years, academic, research and support units compile a quality improvement plan (QIP), which includes the review group's recommendations. Each unit's QIP specifies objectives, related action items and a date by which the objectives should be achieved. In liaison with the head of unit, progress on the plan is monitored by the Director of Quality, VPAASE and (for academic units) faculty dean. A consideration of the extent to which the review group's recommendations have been implemented is included in each unit's subsequent quality review self-assessment report.

In accordance with the University's QMS framework for support units and inter-department auditing process, each support unit is regularly audited by trained auditors. The auditor team includes members of the audited unit and members of other support units. The audit recommendations and the unit's plans to implement them are documented in the unit's action plan.

The QSU facilitates support units to complete an annual quality report. Using a template approach, the process provides a formal mechanism by which quality assurance and enhancement initiatives can be documented, which allows good practice to be shared across campus.

12.2 Self-monitoring procedures

Self-monitoring procedures involve identifying quality measures, prioritising objectives, gathering evidence that objectives have been achieved and acting on findings.

12.2.1 Quality measures

The University collects, analyses and reports upon a whole range of datasets and other information to both internal (e.g. course boards and governance committees such as Academic Council, Executive Committee and Governing Authority) and external stakeholders (e.g. the HEA, QQI and the Department of Education and Skills). These activities are undertaken by a wide range of (largely) support units and offices/officers, as relevant to functional area. The datasets and reports are forwarded for consideration and action to the relevant committee.

The quality measures/indicators are chosen to best meet the intended purpose. In the case of the external stakeholders mentioned above, quality measures are usually stipulated by the external body but are also considered internally. Therefore, for example, the reports generated by the Institutional Research Officer for the HEA are also considered by Executive Committee.

Internal quality measures/indicators are set to conform to the institution's mission, strategy and policy. For example, the quality measures used in annual programme monitoring and periodic programme reviews are dictated by the Academic-Council-approved Academic Programme Review Policy, which involves annual monitoring by course review boards and periodic monitoring by programme review panels.

12.2.2 Prioritising and achieving objectives

At an institutional level, the strategic plan sets aims, objectives, outcomes and indicators of success. Progress on the achievement of the plan's aims and objectives, as defined in terms of indicators of success and outcomes, is monitored on an ongoing basis by Executive Committee.

The University's research strategy specifies action items and targets for each strategic objective. The Vice President Research & Enterprise oversees regular reviews of the strategy and reports on performance against targets to Executive Committee and Governing Authority.

At the local level, the QIPs of reviewed units specify actions, persons responsible and target completion dates for each quality review group recommendation. In addition, support units maintain their own QIPs on an ongoing basis. These plans are in addition to the post-quality-review plans and specify persons responsible and target completion dates for each specified action item.

12.2.3 Acting on findings

The 'General Characteristics of Effective QA/QE Mechanisms' section of the institutional quality policy sets out the following requirements, amongst others, to be complied with by those with responsibility for developing and reviewing institutional QA mechanisms:

- Ensure the mechanism has a clear reporting pathway in the context of findings generated.
- Reference those who are responsible for considering and implementing findings or recommendations and how such follow-up action is project managed and monitored.

As an example, the quality review guideline documents outline how the findings of internal quality reviews are acted upon. The process includes implementing a quality improvement plan, and the guidelines clearly specify participant responsibilities and oversight mechanisms.

12.3 Self-evaluation, improvement and enhancement

A significant element of the periodic quality review process is the production by the reviewed unit of a self-assessment report (SAR). Academic and research units' SARs describe the state of development of the unit in relation to a number of prescribed topics. Support units' SARs describe the state of development of the unit's QMS with respect to the seven quality management principles of the University's QMS framework. All SARs identify significant gaps or weaknesses and specify areas that need to be improved. All units consult

with their stakeholders before writing the SAR. The details of surveys, focus groups and other measures, including results and actions arising, are all briefly described in the relevant section of the SAR and in more detail in appendices.

12.4 Engagement with external QA

Led by the QSU, the University conducts compliance exercises to document the extent to which the institution meets its external QA obligations. This work is guided by the *Process for Assessing Compliance with Statutory and Related Quality Requirements* (an internal document stored on SharePoint). Once the University receives notice of a new or revised quality requirement, the QSU coordinates an exercise that assesses the extent to which the University complies with that requirement. Examples include the 2015 ESG and QQI guidelines and codes of practice. Responsibility for assessing how the University complies with the requirement lies with the unit(s) or officers that have functional responsibility in the area concerned. Refer to the Compliance page of the QSU website for more details. Identified enhancement opportunities lead to the development of a QIP, which is implemented by relevant units.

The University submits an annual institutional quality assurance report (AQR) to QQI. Following submission of the report to QQI, the University publishes the report on its website. Publication of the AQR by the University is interpreted by QQI as publication of the University's QA procedures. Nationally, the University contributes to inter-institutional dialogue on quality-related issues through its participation on the Irish Universities Association Quality Committee. Internationally, the University engages with quality trends in higher education by participating in relevant international conferences, such as those organised by the European Association for Quality Assurance in Higher Education (ENQA).

13 Quality assurance and enhancement of research activity

Overall research strategy and policy is articulated by the University's: (a) strategic plan; (b) research strategy, which is informed by the overall strategic plan; and (c) quality policy. The management of institutional-level research is largely the responsibility of the Vice President Research & Enterprise, who is supported by the Research Office. Research-related policies and procedures are available here. The University Research Strategy Board, which reports to Executive Committee, advises and reports on research priorities for the University.

At an institutional level, the management of master's and PhDs by research falls under the auspices of Graduate & Professional Studies (GPS). Information on postgraduate research is given on the Postgraduate Research page of the GPS website. Academic regulations affecting postgraduate research students are included in the Handbook of Academic Regulations and Procedures (in particular in chapters 2 and 5). In addition to providing access to that handbook, the Codes of Practice and Regulations page of the GPS website provides access to the policies, procedures, forms and guidelines that underpin the research postgraduate processes. GPS reviews and, where necessary, updates on an ongoing basis these forms, documents and relevant academic regulations.

QA measures are in place to collectively ensure the effective oversight of the quality of institutional research throughout the full lifecycle of research projects. The Research Portal provides information and relevant forms relating to research projects, including procedures relating to research proposal development, authorisation, submission and management. The Research Projects section of the Finance Department oversees and reports on financial aspects of research activity. The Human Resources Division publishes HR policies and procedures relating to research staff on its Research Staff web page.

Issues relating to research integrity are managed as they arise under the procedures outlined in the Research Integrity Policy. Research ethics and associated procedures are overseen by the Research Ethics Governance Committee and managed/implemented by faculty-level committees. The Intellectual Property Policy is managed by the Research Office.

The quality of research is reviewed through the quality reviews of academic units, research institutes and support units. The latter include the Research Office, Graduate & Professional Studies, Finance, HR, Library

and Information Services Division, ITD and Buildings and Estates, all of which contribute to a greater or lesser extent to achieving the University's research goals. Several of the above support units regularly develop, deliver or coordinate various research-related professional development courses, which are widely advertised throughout the institution by email. Executive Committee assesses the quality of research through its review of the Research Office's annual research report.

Revision history

Revision 1 of this quality manual is itself an updated version of an internal QSU quality manual, initially developed in 2017 after the QQI core statutory quality assurance guidelines were published in 2016. Rev. 1 is described below as 'initial release' as it was the first version of the quality manual to be published on the University website.

The QSU will review and amend this quality manual annually to ensure the content therein remains up to date.

The process owner is the Director of Quality.

Rev. no.	Date	Details of change
1	21/08/2019	Initial release
2	October 2020	Hyperlinks to policies updated after launch of UL Policy Management Framework
3	April 2021	1. Section 1.4 to include details of UL Policy Framework. 2. Section 2.1.2 to reflect changes in senior management team. 3. Section 2.1.4 to outline ownership of UL QA/QE following institutional review recommendation. 4. Section 2.2.1 to provide an overview of UL Quality Assurance Framework following institutional review recommendations. 5. Hyperlinks updated following website updates by Corporate Secretary's Office and Academic Registry. 6. Changed reference to strategic plan from Broadening Horizons to UL@50

Appendix 1: Core statutory QA guidelines cross-referenced to the ESG

The table below cross-references the QQI's core statutory QA guidelines to the European Standards and Guidelines (ESG) Part 1.

Core Guidelines	**Relevant ESG**
1. Governance and management of quality	ESG 1.1
2. Documented approach to quality assurance	ESG 1.1
3. Programmes of education and training	ESG 1.2, 1.3, 1.4, 1.7, 1.9
4. Staff recruitment, management and development	ESG 1.5, 1.6
5. Teaching and learning	ESG 1.3, 1.4, 1.5, 1.6, 1.9
6. Assessment of learners	ESG 1.3, 1.4, 1.9
7. Supports for learners	ESG 1.6, 1.7
8. Information and data management	ESG 1.6, 1.7
9. Public information and communication	ESG 1.8, 1.9, 1.10
10. Other parties involved in education and training	ESG 1.10
11. Self-evaluation, monitoring and review	ESG 1.9, 1.10

Acronyms

APRC	Academic Programme Review Committee
AQR	Annual Quality Report
ARC	Academic Regulations Committee
CAO	Central Statistics Office
CECD	Cooperative Education & Careers Division
COOR	Chief Operating Officer and Registrar
CPD	Continuing professional development
CTL	Centre for Teaching and Learning
DARE	Disability *Access* Route to Education
ESG	European Standards and Guidelines
EU	European Union
FETAC	Further Education and Training Awards Council
FOI	Freedom of Information
GDPR	General Data Protection Regulation
GPS	Graduate & Professional Studies
HEA	Higher Education Authority
HEAR	Higher Education *Access* Route
HEI	Higher education institution
HR	Human Resources
IM	Incentivisation Model
ISSE	Irish Survey of Student Engagement
ITD	Information Technology Division
MIC	Mary Immaculate College
MoA	Memorandum of Agreement
MoU	Memorandum of Understanding
MSS	Module Satisfaction Survey
NFQ	National Framework of Qualifications
PASS	Personal Academic Support System
PDRS	Performance and Development Review System
QA	Quality assurance
QE	Quality enhancement
QIP	Quality improvement plan
QMS	Quality management system
QQI	Quality and Qualifications Ireland
QSU	Quality Support Unit
SAR	Self-assessment report
SESU	Student Engagement & Success Unit
SET	Student Evaluation of Teaching
SI	Student records system
TELU	Technology Enhanced Learning Unit
UL	University of Limerick
VPASSE	Vice President Academic Affairs and Student Engagement