Procedure for Review of Administrative/Service Areas

1. Context

This document outlines the specific elements of the quality review process for administrative and service areas at Trinity College Dublin (TCD), and should be read in conjunction with the General Procedures for Quality Reviews which outline the generic elements of the process common to reviews of Schools, Programmes, Administrative/Service areas and Research Institutes.

2. Purpose

2.1 These procedures set out broad guidelines for the review of administrative and service areas, which aims to facilitate a critical self-assessment of the Area or Service under review by the Head of the Area or Service, staff, student users, and the relevant College Officer.

2.2 The purpose of the review is:

- to provide a structured opportunity for the Area or Service to critically reflect on its activities and plans for development;

- to ensure that service provision and administrative activities are in line with the overall mission and strategic objectives of the College;

- to obtain constructive commentary and advice on the strategic direction of the Area or Service from external reviewers to College that are experts in their field at a senior level;

- to ensure that quality and standards in service provision are being maintained and enhanced, and that any areas of concern are identified and addressed;

- to promote the enhancement of the Area or Service’s provision as part of a strategy for continuous quality improvement, to identify best practice through benchmarking services against institutional comparators and assess client/stakeholder satisfaction.
3. Scope

3.1 This procedure applies to quality reviews of Administrative and Service areas at Trinity College Dublin.

4. Benefits

Reviews of Administrative and Service Areas:

4.1 Afford Administrative and Service Areas the opportunity to evaluate their own operation and performance in a structured way;

4.2 Allow the University to evaluate how well the Area or Service’s activities are aligned with the College’s Strategic Plan;

4.3 Fulfil the University’s commitment to the quality assurance of its provision of education, research and related areas;


5. Procedure

5.1 The Administrative Area or Service under review will establish a co-ordinating group to plan and manage the activities leading up to the Review. The co-ordinating group should be chaired by the Head of the Area or Service, and may include senior managers, and senior administrative and support staff.

5.2 The Self-Assessment Report (SAR) forms the principal source of information for the External Review team prior to their arrival on-site. Its development is based on the outcome of a self-review and critical evaluation. It should have a strategic focus, be forward looking, and provide an appraisal of the Area or Service’s activities and strategy, and the quality assurance processes that support these activities.

5.3 A SWOT analysis should be conducted with various internal audiences including student and staff groupings, and other relevant administrative and service areas. The purpose of the SWOT is to facilitate a critical assessment and self-review of the Area or Service’s strategy, governance, structure, activities, internal and external relationships, and resources.

5.4 A critical evaluation of the Area or Service’s current activities and strategic direction should be carried out, drawing on the outcomes of the SWOT analysis and analysis of data on the various activities of the Area or Service. The optimal period for data analysis is five years. The data requirements to inform the self-assessment are outlined in Appendix 3.
5.5 The relevant College Officer and Finance Partner must sign off on financial data included in the SAR.

5.6 The Area or Service should prepare a self-assessment report based on the outcome of the above activities. The SAR should not be overly descriptive in terms of current activities but rather a reflective document that encourages an Area or Service to pose the following questions:

- How do our clients and stakeholders perceive the services offered—include outcomes from client/stakeholder surveys —and how the Area or Service has responded to client feedback and what has changed as a result?

- Is there benchmarking data available nationally or internationally that the Area or Service can compare its service provision against? If so, how does it perform?

5.6 The main body of the SAR should be between 20-50 pages (excluding the appendices). The format of the SAR is outlined in Appendix 2 and includes the following suggested headings:

1. Introduction;
2. Strategic Direction and Planning;
3. Organization and Management;
4. Assessment of Service Performance;
5. Systems and processes;
6. Resources;
7. Relationships and external engagement;
8. Communication;

5.7 The on-site visit by the external reviewers occurs over 2-3 days and a draft schedule of meetings for the visit is agreed with the Quality Office prior to the review date. A template for the schedule of meetings and the principles to be followed in its development can be found in the General Procedures for Quality Reviews.

5.8 The Quality Office will provide a review of various drafts of the SAR and draft schedule. The final draft of the SAR with appendices and the schedule is to be submitted to the Quality Office eight weeks prior to the review date. The quality office will arrange for proofreading of the final draft prior to its dissemination to the Review team.

5.9 Follow-up processes are detailed in the accompanying document ‘General Procedures for Quality Reviews’.

5.10 A template for the Reviewers’ Report can be found in Appendix 4.

5.11 A timeline detailing the key phases/deliverables for a review of Administrative or Service Areas can be found in Appendix 5.
Appendix 1: Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG)

Part 1: Standards for internal quality assurance

1.1 Policy for quality assurance
Institutions should have a policy for quality assurance that is made public and forms part of their strategic management. Internal stakeholders should develop and implement this policy through appropriate structures and processes, while involving external stakeholders.

1.2 Design and approval of programmes
Institutions should have processes for the design and approval of their programmes. The programmes should be designed so that they meet the objectives set for them, including the intended learning outcomes. The qualification resulting from a programme should be clearly specified and communicated, and refer to the correct level of the national qualifications framework for higher education and, consequently, to the Framework for Qualifications of the European Higher Education Area.

1.3 Student-centred learning, teaching and assessment
Institutions should ensure that the programmes are delivered in a way that encourages students to take an active role in creating the learning process, and that the assessment of students reflects this approach.

1.4 Student admission, progression, recognition and certification
Institutions should consistently apply pre-defined and published regulations covering all phases of the student “life cycle”, e.g. student admission, progression, recognition and certification.

1.5 Teaching staff
Institutions should assure themselves of the competence of their teachers. They should apply fair and transparent processes for the recruitment and development of the staff.

1.6 Learning resources and student support
Institutions should have appropriate funding for learning and teaching activities and ensure that adequate and readily accessible learning resources and student support are provided.

1.7 Information management
Institutions should ensure that they collect, analyse and use relevant information for the effective management of their programmes and other activities.
1.8 Public information
Institutions should publish information about their activities, including programmes, which is clear, accurate, objective, up-to date and readily accessible.

1.9 On-going monitoring and periodic review of programmes
Institutions should monitor and periodically review their programmes to ensure that they achieve the objectives set for them and respond to the needs of students and society.

These reviews should lead to continuous improvement of the programme. Any action planned or taken as a result should be communicated to all those concerned.

1.10 Cyclical external quality assurance
Institutions should undergo external quality assurance in line with the ESG on a cyclical basis.
Appendix 2: Format of the Self-Assessment Report (SAR)

Chapter 1: Introduction

1.1 Setting the context of the Area or Service at the time of the review-history and development;
1.2 Implementation of recommendations from the previous review-closing the loop;
1.3 Process undertaken to complete the SAR document;
1.4 Key areas the Area or Service would like the External Review Team to focus on in this review.
1.5 Area or Service recommendations for consideration of Review Team.

Chapter 2: Strategic Direction and Planning

2.1 Outline the mission and strategy of the Area or Service as articulated in its Strategic Plan;
2.2 Evaluate whether the Area or Service is achieving the objectives outlined in its Strategic Plan;
2.3 How does the Area or Service assess itself against the College’s strategic plan? (Evidence of available performance indicators or key deliverables).
2.4 Evaluate whether the activities and strategy of the Area or Service meet the mission and objectives of College?
2.5 Evaluate to what extent the Area or Service has clear leadership and direction?
2.6 To what extent can clients and stakeholders influence the design and development of the services provided?

Chapter 3: Organisational Structure and Management

3.1 Describe the organisational and operational structure of the Area or Service, outlining:
   • the organisational structure and reporting lines, including key committees into which the Area or Service reports – include an organisational chart/map if appropriate;
   • the management and decision-making structures.
3.2 Evaluate whether the current organisational and management structures facilitate the optimum operation of the Area or Service and enable it to fulfil its mission;
3.3 Outline any plans or recommendations for change in order to improve organisational structures and management in the future.
Chapter 4: Assessment of Service Performance

4.1 Evaluate performance against appropriate professional, industry and sectoral quality standards and benchmarks;

4.2 Demonstrate that the Area or Service has clearly defined service outcomes and that it uses them as a measure of success for the Area/Service. How are these informed by industry standards and best practice?

4.3 How does the Area or Service meet client and stakeholder expectations (as evidenced through client/stakeholder survey results, or service indicators)? How has the Area or Service responded to client/stakeholder feedback and what has changed as a result?

4.4 To what extent has the Area or Service established effective links with partners and professional networks to enhance the services on offer?

4.5 Does the Area or Service evaluate the effectiveness of its partnerships and networks to improve what is offered?

4.6 Is staff performance, linked to their role within the aims and objectives of the Area or Service (through PMDS), reviewed and evaluated to improve the Area or Service?

4.7 Provide a description of service level agreements that support the delivery of services and maintenance of functions;

4.8 In terms of value for money and efficient use of resources, are all resources (physical, financial etc.) used cost effectively to deliver the service? How is this monitored?

4.9 Outline any plans or recommendations for change in order to improve performance or address any barriers to performance.

Chapter 5: Resources

5.1 Staff

- Provide an outline of the staff composition of the Area or Service;

- Evaluate whether the skills, knowledge, competencies and qualifications of individual staff roles at the Service are defined in line with current nationally recognised professional qualifications and frameworks? Are these linked to the aims of the Area or Service?
• Indicate how staff are supported by the Area/College in undertaking continuous professional development and training so that they fulfil the requirements for professional and/or statutory registrations (where appropriate)? Are they provided with opportunities for career progression (not limited to grade progression but also including opportunities to broaden skills and experience through additional roles/responsibilities)?

• Are effective induction processes, which are regularly reviewed, in place for all staff?

• Are staff required to be vetted by the Garda Síochána as part of the recruitment process and if so, are these records maintained?

5.2 Physical facilities/infrastructure/equipment:

• Evaluate whether the physical facilities, infrastructure and equipment are fit for purpose for the Area or Service?

• Outline the constraints that are impacting on the Area or Service and evaluate how are they impacting on service delivery to clients?

5.3 Financial resources:

• Provide a summary financial statement outlining the sources of income (including self-financing activities), funding streams and expenditure – use the FSD financial information package as a reference document.

Outline any plans or recommendations for change in order to improve resources in the future.

Chapter 6: Systems and Processes

6.1 Provide a description and evaluation of existing business/operational processes;

6.2 Outline what systems and processes are in place to ensure the delivery of the service? How are these systems and processes evaluated for efficiency and effectiveness? How are new systems and processes implemented?

6.3 Provide a description and evaluation of IT support and information systems;

6.4 Outline what procedures and policies the Area or Service has in place;

6.5 Outline any plans or recommendations for change in order to improve systems and processes and address any barriers to their performance in support of service delivery.
Chapter 7: Relationships and external engagement

7.1 Evaluate how relationships with other College areas, academic and administrative, are managed;

7.2 Provide an outline of staff who have been appointed to senior College positions, College committees and professional bodies;

7.3 Detail the contributions of staff and students to public debate and formulation of public policy;

7.4 Provide an outline of the ways in which external relations with the wider community, including other educational institutions in Ireland and abroad, industry, public agencies, and professional bodies have been developed and maintained;

7.5 Outline any plans or recommendations for change in order to improve relationships and external engagement in the future.

Chapter 8: Communication

8.1 Communication with users/clients, and others:

• Evaluate whether the Area or Service is promoted in ways which are accessible to all those eligible to use it.

• Outline how the services offered/available are defined so that clients are clear about what they might expect. Is there a service commitment? Is the service provided impartial and objective? Are clients given appropriate options to explore and, where appropriate, understand that they are responsible for making their own decisions?

• When exploring options, are clients provided with and supported to use appropriate resources including access to technology? Is signposting and referral to other College Areas/Services as well as other appropriate agencies or organisations facilitated?

8.2 Publications:

• To what extent are clients provided with current, accurate and quality assured information which is inclusive? e.g. Handbooks, Websites, Social Media presence?

• Does the Area or Service conduct Google analytics on its webpage or Social Media to inform itself of the most visited pages/topics? Is information available in languages other than English?

8.3 Outline any plans or recommendations for change in order to improve communication with users/clients/stakeholders in the future.
Chapter 9: Governance compliance

The Quality Review Process will identify the extent to which Areas or Services are compliant with relevant governance requirements, as applied in College generally, and any that are a specific requirement of the Administration or Service area under review.

- Does the Area or Service have, and implement, policies to promote equality and diversity, impartiality, confidentiality and professional integrity in all aspects of service delivery?
- Does the Area or Service comply with existing and new legislation/codes of practice which might impact on service delivery?
- Does the Area or Service comply with Industry or Accreditation standards?
Appendix 3: Suggested data for inclusion in the body of the SAR or Appendices, or to be made available to the External Review team during the on-site visit.

<table>
<thead>
<tr>
<th>Data Requirements</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Organisation/management/strategy</strong></td>
<td></td>
</tr>
<tr>
<td>• Organisational chart including reporting lines</td>
<td>• Head of Area or Service</td>
</tr>
<tr>
<td>• Relevant Committee structure and links to principal committees of College</td>
<td>• Administrator</td>
</tr>
<tr>
<td>• Area or Service’s Strategic Plan</td>
<td></td>
</tr>
<tr>
<td><strong>Performance</strong></td>
<td></td>
</tr>
<tr>
<td>• Appropriate benchmarking data</td>
<td>• Head of Area or Service</td>
</tr>
<tr>
<td>• Client/stakeholder survey results</td>
<td>• Administrator</td>
</tr>
<tr>
<td>• Service level agreements</td>
<td></td>
</tr>
<tr>
<td><strong>Finance:</strong></td>
<td></td>
</tr>
<tr>
<td>• Summary financial statement outlining the Area/Service source of income, funding streams and expenditure;</td>
<td>• Head of Area or Service</td>
</tr>
<tr>
<td>• Financial projections for the next 3 years;</td>
<td>• Administrator</td>
</tr>
<tr>
<td>• ABC Package;</td>
<td>• Finance Partner</td>
</tr>
<tr>
<td>• FTEs</td>
<td></td>
</tr>
<tr>
<td><strong>Staffing:</strong></td>
<td></td>
</tr>
<tr>
<td>• Staff role/job-title and contract type</td>
<td>• Head of Area or Service</td>
</tr>
<tr>
<td>• Staff biographies</td>
<td>• Administrator</td>
</tr>
<tr>
<td>• Details of staff training and development</td>
<td>• Human Resources (Staff Office)</td>
</tr>
<tr>
<td>• Garda vetting records (to be available upon request)</td>
<td>• HR partner</td>
</tr>
<tr>
<td><strong>Infrastructure:</strong></td>
<td></td>
</tr>
<tr>
<td>• Maps showing facilities and space</td>
<td>• Head of Area or Service</td>
</tr>
<tr>
<td>• Space management plan;</td>
<td>• Administrator</td>
</tr>
<tr>
<td>• Available resources/equipment/facilities</td>
<td>• Building and Estates Office</td>
</tr>
<tr>
<td><strong>Systems and Processes</strong></td>
<td></td>
</tr>
<tr>
<td>• Copies of standard operating procedures (SOPs) and evidence of compliance with those of suppliers;</td>
<td>• Head of Area or Service</td>
</tr>
<tr>
<td>• Copies of service level agreements</td>
<td>• Administrator</td>
</tr>
<tr>
<td>• Copies of policies and procedures</td>
<td></td>
</tr>
<tr>
<td>Data Requirements</td>
<td>Source</td>
</tr>
<tr>
<td>----------------------------------------------------------------------------------</td>
<td>----------------------------------</td>
</tr>
<tr>
<td><strong>Relationships and external engagement:</strong></td>
<td>• Head of Area or Service</td>
</tr>
<tr>
<td>• Professional activities undertaken by staff such as:</td>
<td>• Administrator</td>
</tr>
<tr>
<td>- Acting in an advisory capacity on public commissions, boards and task forces;</td>
<td></td>
</tr>
<tr>
<td>- Preparing special reports and working papers;</td>
<td></td>
</tr>
<tr>
<td>- Consultancy;</td>
<td></td>
</tr>
<tr>
<td>- External secondment.</td>
<td></td>
</tr>
<tr>
<td>• Links with:</td>
<td></td>
</tr>
<tr>
<td>- other units within the University;</td>
<td></td>
</tr>
<tr>
<td>- companies;</td>
<td></td>
</tr>
<tr>
<td>- professional bodies</td>
<td></td>
</tr>
<tr>
<td>- industry</td>
<td></td>
</tr>
<tr>
<td><strong>Communication and marketing:</strong></td>
<td>• Head of Area or Service</td>
</tr>
<tr>
<td>• Communication or marketing strategy</td>
<td>• Administrator</td>
</tr>
<tr>
<td>• Sample emails, newsletters, webpages etc.</td>
<td></td>
</tr>
<tr>
<td><strong>Governance compliance:</strong></td>
<td>• Head of Area or Service</td>
</tr>
<tr>
<td>• Copies of legislation/codes of practice which might impact on service delivery</td>
<td>• Administrator</td>
</tr>
<tr>
<td>• Industry or Accreditation standards.</td>
<td></td>
</tr>
</tbody>
</table>
Appendix 4: Template for Reviewers’ Report

1. Executive Summary

1.1 Key findings of the review including overall assessment of the Area or Service;

1.2 Summary of key recommendations for improvement.

Reviewers are asked to consider the following questions/issues in their report:

2. Strategic Development & Planning

Reviewer opinion is sought on:
- the Area or Service achievement of objectives outlined in its strategic plan;
- whether the activities of the Area or Service meet the mission and objectives of College?
- how well the Area or Service is assessing itself against the College’s strategic plan? (Evidence of available performance indicators or key deliverables);
- consideration of College-wide initiatives such as the Global Relations Strategy, the On-line Education Strategy etc. in its strategic plan.

3. Organisational structure and management

Reviewer opinion is sought on:
- whether the organisational/operational and management structure of the Area or Service facilitates the optimum operation of the Area or Service and enables it to fulfil its mission;
- whether the Area or Service’s decision-making structures are functioning optimally;
- whether the reporting lines and relationships are effective.

4. Assessment of Performance

Reviewer opinion is sought on:
- performance against industry quality standards and benchmarks;
- whether the Area or Service has met stakeholder expectations (as evidenced through user/client survey results, or service indicators);
- whether service level agreements are fit for purpose;
- the effectiveness of relationships with other college areas, academic and administrative;
- whether value for money and efficient use of resources is being achieved.

5. Resources

Reviewer opinion is sought on:
- whether the staff composition is appropriate to deliver the optimum service;
- whether staff training & development needs are being met;
- the suitability of the physical facilities/infrastructure;
- whether the current funding model adequately supports the Area or Service.
6. Systems and Processes

Reviewers' opinion is sought on:
- whether the existing business processes are fit for purpose;
- whether the IT support and information systems are appropriate;
- whether the procedures and policies in place are up to date and regularly reviewed.

7. Relationships and external engagement

Reviewers' opinion is sought on:
- the effectiveness of the Area or Service's relationships, both internal and external.

8. Communication

Reviewers' opinion is sought on:
- the effectiveness of communication with users/clients, and other stakeholders;
- the usefulness of publications;
- the quality of the information provided to users/clients, and other stakeholders.

9. Governance compliance

Reviewers' opinion is sought on:
- whether the Area or Service is compliant with industry, professional and regulatory standards.

10. Reviewers' recommendations

The Reviewers should limit their recommendations to 5-8 high-level, key recommendations. These recommendations should not be solely resource dependant and should be listed separately to the text of the report (i.e. not embedded in it).
## Appendix 5: Summary timetable and process for quality reviews

<table>
<thead>
<tr>
<th>TIMING</th>
<th>ACTIVITY</th>
<th>RESPONSIBILITY</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>TIMING</strong></td>
<td><strong>ACTIVITY</strong></td>
<td><strong>RESPONSIBILITY</strong></td>
</tr>
<tr>
<td>Trinity Term of academic year 2 years prior to review</td>
<td>Head of Area or Service contacted and sent procedural documents and review guidelines. External reviewer nominations requested from the Head of Area or Service for approval by working group of College Officers.</td>
<td>Quality Office</td>
</tr>
<tr>
<td>Michaelmas Term of academic year prior to review year</td>
<td>External reviewer nominations submitted by Head of Area or Service for approval by the working group of College Officers. Following consideration by the working group, nominated reviewers are contacted formally by the Quality Office and invited to participate in the review process. Upon confirmation of a reviewer’s acceptance of a role in the review process, dates for site visit will be agreed as soon as possible.</td>
<td>The Head of Area or Service /Quality Office</td>
</tr>
<tr>
<td>Hilary Term of academic year prior to review</td>
<td>An information session will be held to assist in the development of the Area or Service’s Self-assessment document.</td>
<td>Quality Office</td>
</tr>
<tr>
<td>Ongoing in year of review</td>
<td>Self-assessment and support documentation prepared by the Area or Service</td>
<td>Head of Area or Service</td>
</tr>
<tr>
<td>9 weeks before the site visit</td>
<td>Draft self-assessment and supporting documentation to be forwarded to the Quality Office for consideration prior to the planning meeting</td>
<td>Head of Area or Service</td>
</tr>
<tr>
<td>8 weeks before the site visit</td>
<td>Feedback given on draft documentation and review timetable</td>
<td>Head of Area or Service /Quality Office</td>
</tr>
<tr>
<td>7 weeks before the site visit</td>
<td>Review documentation, including a draft timetable, forwarded to the Quality Office for dispatching to the External Reviewers, College Officers and Internal Facilitator in electronic format.</td>
<td>Head of Area or Service /Quality Office</td>
</tr>
<tr>
<td>2 weeks before the site visit</td>
<td>Conference call with Reviewers takes place to discuss the self-assessment and the draft schedule</td>
<td>Quality Office /Reviewers</td>
</tr>
<tr>
<td>1 week before the site visit</td>
<td>Reviewers contacted to clarify final arrangements and confirm receipt of self-assessment pack.</td>
<td>Quality Office</td>
</tr>
<tr>
<td>2 days before site visit</td>
<td>Review timetable finalised.</td>
<td>Head of Area or Service /Quality Office</td>
</tr>
<tr>
<td>1 day before site visit</td>
<td>Unit to set up ‘base room’ for the duration of the review, where possible.</td>
<td>Head of Area or Service</td>
</tr>
<tr>
<td>DATES OF REVIEW</td>
<td>SITE VISIT CONDUCTED - Reviewers interview staff, students and stakeholders and consider contents of report and its recommendations</td>
<td></td>
</tr>
<tr>
<td>Post Review</td>
<td>Refer to General Review Procedures</td>
<td>Post Review</td>
</tr>
</tbody>
</table>