

# Trinity College Dublin, The University of Dublin

### **Quality Committee**

Minutes of the Quality Committee meeting of the 12 November 2020, 2.00 – 4.00pm via ZOOM

### **Quality Committee**

### **Present**

Professor Jürgen Barkhoff, Vice-Provost/Chief Academic Officer, Chair

Professor Sylvia Draper, Dean of Faculty of Engineering, Mathematics & Science

Professor Orla Sheils, Dean of Faculty of Health Sciences

Professor Gail McElroy, Dean of Faculty of Arts, Humanities & Social Sciences

Professor Martine Smith, Dean of Graduate Studies

Ms. Breda Walls, Director of Student Services

Ms. Patricia Callaghan, Academic Secretary

Ms. Roisin Smith, Quality Officer

Professor Breiffni Fitzgerald, Faculty of Engineering, Mathematics and Science

Professor Jan de Vries, Faculty of Health Sciences

Mrs. Jessie Kurtz, Deputy Librarian

Mr. Henry Wallace, Interim Chief Risk Officer

Ms. Vickey Butler, Secretary's Office

Professor Gizem Arikan, Faculty of Arts, Humanities and Social Sciences

### In attendance

Dr Liz Donnellan, Quality Office, Secretary

### **Apologies**

Ms. Marie Gore, Interim Director, Project Management Officer

Professor Kevin Mitchell, Senior Lecturer/Dean of Undergraduate Studies

Ms. Linda Darbey, Assistant Academic Secretary

Ms. Megan O' Connor, Education Officer Students' Union

Ms. Abhisweta Bhattacharjee, Vice-President Graduate Students' Union

### In attendance:

Professor Michael Gill, Head of the School of Medicine, and Ms. Shannon Keegan, Quality and Accreditation Manager, School of Medicine, for *item A.4 The Irish Medical Council (IMC) review of the School of Medicine*.

### QC/20-21/018 Draft minutes of the meeting of the 22 October 2020

The draft minutes of the meeting of the 22 October 2020 were approved.

### QC/20-21/019 Matters arising

- (i) QC/20-21/013 Procedures for Virtual Reviews.
  Revised Procedures are included on the agenda.
- (ii) QC/20-21/016 Themes arising from Quality Reviews 2018 2020 A revised Themes report is included on the agenda

### QC/20-21/020 Update on the Institutional Review

The Quality Officer reported that an all-staff email launching the Institutional Quality Review from the Vice-Provost/Chief Academic Officer (VP/CAO) would be issued from the Secretary's Office on Monday 16 November 2020. The email will invite staff to complete the survey 'We value your opinion of Quality in Trinity'. The Survey will be promoted to Faculty and School Executive Committees via the Faculty and School Administrative Managers. In addition, the Head of Communications, Ms. Sally-Anne Fisher, will run a social media campaign on the College's Twitter and Facebook accounts, via the Trinity Communications Events email and on digital screens across the campus.

The VP/CAO thanked the Quality Officer and reinforced the importance of promoting the completion of the survey to the various constituencies and to Schools, as the data arising from the survey will contribute to the Institutional Review. The Dean of Arts, Humanities and Social Sciences suggested that, at 15 minutes, the survey was too long. She also highlighted that in questions six and seven, two questions were being asked in one i.e. Question 6 'How confident are you that you can maintain/improve effectiveness in your role or work area?' is asking two questions, as 'maintain' and 'improve' are different things. Professor Arikan, a member of the Communications Subcommittee, reported that considerable work had been done to shorten the survey and Professor de Vries, also a member, concurred noting that the most recent focus groups testing the survey had not reported its length as an issue. The Deputy Librarian requested that questions 5.1 and 5.2 include more examples of Committees, and that the Library Management System be included as a systems example in question 30. The Quality Officer thanked the Committee members for their suggestions and undertook to address them in the final version of the survey.

## QC/20-21/021 Implementation Plan for the Irish Medical Council (IMC) accreditation of the School of Medicine

The Vice-Provost/Chief Academic Officer welcomed the Head of the School of Medicine, Professor Michael Gill, and the School of Medicine Accreditation Manager, Ms. Shannon Keagan, to the meeting. Professor Gill spoke to a slide presentation outlining the way in which the School has addressed the recommendations arising from the Irish Medical Council (IMC) accreditation report.

The VP/CAO thanked Professor Gill and queried whether the School would have sufficient time to address the IMC recommendations before the next anticipated accreditation visit in Spring 2022. With regard to the recommendations concerning clinical placements, he asked how the School would negotiate required improvements with the Hospital partners. Professor Gill reported that there were issues with only a small number of placements and that they primarily concerned the provision of support to 3<sup>rd</sup> year students, who often find the transition from a purely academic to a clinical environment difficult. Unlike the situation in the UK where hospitals receive training funds which can be withdrawn if placements are not satisfactory, Irish hospitals provide placement opportunities for students on a 'good-will' basis, facilitated by staff who are interested in teaching. As a result, the student experience can vary considerably between and within hospitals depending on the resources and workloads of the teams to which students are assigned. He advised the Committee that Trinity's relationship with the teaching hospitals is two-way, and clinical staff are offered a small stipend for hosting placements and have access to academic activities and training in Trinity. Professor Gill reported that the School is working in partnership with the hospitals to address the issues raised and that planned improvements include placing 3<sup>rd</sup> year students in more nurturing and less stressful environments, where possible, would allow a more gradual introduced to the medical system.

The Dean of Health Sciences, with reference to the availability of the Student Counselling Service to students off-campus, clarified that the Faculty had initiated this project. She queried the role of the Chief Clinical Education Officer of the Dublin Midlands Hospital Group in the implementation of the IMC recommendations, and Professor Gill clarified that the appointment would help to foster improved relationships with clinical partners.

The Dean of Engineering, Mathematics and Science noted that while the accreditation visit had taken place two years ago, the report had only been issued in March 2020 and she queried whether the School had been aware of the main recommendations before the report was published. Professor Gill clarified that they had been aware of some of the key recommendations and had started to work on addressing them whilst awaiting the publication of the report.

The Quality Officer reminded the Committee that assurance of off-campus learning was one of the requirements outlined in the QQI Core Statutory QA Guidelines and that Schools undergoing a quality review are now required to consider the quality of student placements. She reported that the Education Officer of the Students Union School had made the case at a recent meeting for having an agreed way of reviewing the quality of placements that is consistent across Faculties. Ms. Smith suggested that this would be appropriate for Medicine and Nursing & Midwifery (who share placement site providers), where the systems in place for the management of placements in Pharmacy and Pharmaceutical Science fall under the APPEL (Affiliation for Pharmacy Practice Experiential Learning) consortium agreement between UCC, RCSI and Trinity College Dublin. The VP/CAO supported taking an all-Faculty approach to assuring the quality of student placements.

The Dean of AHSS queried when the College's Dignity and Respect Policy, dated 2016, would next be updated and the VP/CAO reported that it would be updated as part of the implementation of the Framework for Consent in Irish Higher Education Institutions, currently underway. The Director of Student Services highlighted comments from students in the IMC report that the School was dismissive of student mental health issues. The Head of School responded that this perception was based on the views of a small number of self-selecting students and was not evidence-based. The VP/CAO noted that the School had undertaken to address this issue in its implementation plan by working with the Student Counselling Service. The Deputy Librarian asked whether the School had orientation sessions in place for students in the hospitals and Professor Gill confirmed that they had.

The VP/CAO thanked Professor Gill and suggested that the quality of student placements was an issue beyond the School. In this regard, he stressed the importance of the appointment of academic clinical leads in strengthening the relationships with the teaching hospitals and safe-guarding placement quality. The Academic Secretary emphasized the importance of managing the delicate relationship with the hospitals, which are autonomous institutions, and she suggested that the issue of placements should be addressed at sectoral level. A Committee member reported that similar issues exist in the School of Nursing and Midwifery. The VP/CAO thanked the Head of School and the Accreditations Manager, and they left the meeting.

The Committee agreed that the School should be asked to bring an update to the Committee in Michaelmas Term 2021, in advance of the next accreditation visit in Spring 2022.

### **Action/Decision:**

**021.1:** The Quality Committee approved the Plan as an interim report on the IMC accreditation and agreed that the School should be asked to bring an updated Implementation Plan to the Committee in Michaelmas Term 2021. The Committee recommended the interim Implementation Plan to Council for approval.

**021.2:** The Faculty Dean together with the Schools of Medicine and Nursing and Midwifery to instigate shared approaches to assure the quality of student placements and identify pathways for escalation and resolution of concerns where quality issues are reported that impact on the student experience.

### QC/20-21/022 Implementation Plan for the Financial Services Division (FSD)

The Vice-Provost/Chief Academic Officer welcomed Mr. Peter Reynolds, Chief Financial Officer (CFO), to the meeting to present the Implementation Plan for the Financial Services Division (FSD) which was circulated with the papers. Mr. Reynolds spoke to a slide presentation outlining the high-level points in the Implementation Plan. The VP/CAO thanked Mr. Reynolds for the detailed work presented in the Implementation Plan and invited comments from the Committee.

The Dean of Engineering, Mathematics and Science welcomed the report and the plans outlined in it to use the Faculty Finance Partners (FFPs) in a more strategic way. She queried how this could be done, however, without providing additional resources to complete the elements of the transactional tasks currently undertaken by FFPs. With regard to the plan to produce automated monthly and quarterly reports, she queried whether it would be better to retain quarterly reports and to improve the timeliness of their delivery and their accuracy rather than introducing monthly reports, which would require a significant amount of work. The CFO reported that the planned move to automated reports would be undertaken in stages, with the initial phase focussing on a more automated monthly reporting pack. The Dean of Health Sciences gueried whether the move to automated reports would free up the FFPs from operational activity and Mr. Reynolds confirmed that the overlay on Oracle should facilitate less input from the FFPs. He stated that the aim was to bring transactional activity into FSD where it could be done more efficiently. The Dean of Health Sciences reported that some Schools have no finance partner and requested that FSD refrain from moving to monthly reporting until automated systems are in place. The Dean of EMS noted that the quarterly reports allow benchmarking with regard to relative spend which you would not get with monthly reports. The CFO clarified that the aim was to retain quarterly reports but that reliance on these alone results in delays in providing crucial financial information e.g. the first quarterly report of the academic year is not available until February which presents a significant information delay.

The Academic Secretary queried whether the proposed Strategic Planning Unit would go to Board for approval. She suggested that the scope of the proposed Unit was quite narrow, as it included monitoring against the Strategic Plan but not the preparation of large-scale funding proposals in its remit. The VP/CAO reported that a broader review was being undertaken of the management of large-scale funding applications for projects such as the Human Capital Initiative (HCI) and National Forum for the Enhancement of Teaching and Learning, as responsibility for this work currently lies with two staff members in the Academic Services Division (ASD). He advised that a more detailed proposal would go to Board in due course.

The Deputy Librarian queried whether the proposed appointment of a new Head of Financial Planning & Analysis would go ahead given the current constraints on recruitment and the CFO reported that existing staff had the skill-set to fill the role on a temporary basis, if required. With regard to the proposed job-sizing, the Deputy Librarian reported that this would impact the reporting line in the Library and she suggested that all relevant units should be included in this exercise.

The VP/CAO thanked the CFO and closed the discussion.

### Action/Decision:

**022.1:** The Quality Committee recommended the FSD Implementation Plan to Board for approval.

### QC/20-21/023 Revised Procedure for Virtual Reviews

The Quality Officer presented the Procedures for Virtual Reviews which had been revised to incorporate feedback from the Quality Committee. She spoke to the changes that had been made to the report and advised that if approved by the Committee, the procedures would go to Council for noting with the minutes of the meeting and would then be published.

The Dean of EMS suggested a further change to the top of page three, section 6.1 – that Reviewers should be 'must be located in countries within a two-hour radius...' rather than 'must be from countries within a two-hour radius...'. On the top of page four, it was highlighted that the second sentence should read 'The External Review Team will decide what facilities they wish to view...'.

The Quality Officer thanked the Committee for its comments and the VP/CAO closed the discussion.

### **Action/Decision:**

**023.1** The Quality Committee approved the Procedures for Virtual Reviews.

### QC/20-21/024 Themes arising from Quality Reviews 2018 – 2020

The Quality Officer spoke to the revised report on quality review themes and highlighted the changes that had been made to incorporate the Committee's feedback. She drew the Committee's attention to a pie chart displaying the frequency of the recommendations, by theme, that had been included to highlight that the majority of the recommendations (67%) related to strategy, organization, systems, staffing and space. She also advised that new sections had been included in the report analyzing the recommendations concerning curriculum and research.

The Dean of EMS pointed out that the report contained two sections numbered '1.7' and the Dean of Graduate Studies suggested that it would be useful to include the % of recommendations for each theme in the legend of the pie chart for ease of reference. She also requested clarification as to the proportion of recommendations, by theme, that related to individual Schools or Units as she felt that the current format did not clarify this. A Committee member requested that the table numbering and font style be standardized throughout the report.

The Academic Secretary commented that the report contained very rich data and suggested that the high-level recommendations should be discussed at senior management level. She also stressed the importance of ensuring that, where appropriate, recommendations arising from reviews are included on the Risk Register. The VP/CAO agreed that the recommendations should feed into the monitoring of the College Strategic Plan and queried how this could be made operational. The interim Chief Risk Officer reported that issues arising from quality reviews are captured in the Quality Risk Register, which is updated regularly and feeds into the College Risk Register. The Quality Officer advised that recommendations concerning space would be addressed under the Estates Strategy and by the Trinity Futures Group, and that future space planning would need to accommodate design requirements arising from the Covid-19 pandemic.

The Director of Student Services stated that recommendations can only be addressed within the University's current resources and stressed the need to ensure that a Review Team's recommendations were not disproportionately influenced by the comments of an individual stakeholder. The VP/CAO reported that Reviewers are made aware of the financial constraints within which the University is operating during their briefing meetings. He suggested that Implementation Plans should reflect a process of judicial triage that distinguishes recommendations that can be implemented in the short-term from those that cannot.

The VP/CAO thanked the Quality Officer and closed the discussion.

### **Action/Decision:**

**024.1** The Quality Committee approved the report on Themes arising from Quality Reviews 2018 – 2020 pending incorporation of the Committee's feedback.

### QC/20-21/025 Any other business

There was no other business and the meeting closed.