# Gender Analysis of Junior Promotions 2009 – Part II Qualitative Report

Equality Officer

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### **About**

This report was compiled by the Equality Officer in January-February 2010 as a complement to the Junior Promotions Report 2009 (Part I). Part I of the Report analysed quantitative data with the key finding that women were not applying for review proportionately to their male eligible colleagues. The Report found that eligible staff who deferred review were concentrated in the Faculty of Health Sciences and School of Nursing and Midwifery in particular. Further qualitative data has been sought regarding this group of eligible staff to explore the factors contributing to this group not applying for review at the Merit Bar.

### Methodology

Staff who are eligible for review and have previously deferred were contacted by the Secretary of the Junior Promotions Committee (total 37 staff) on behalf of the Equality Officer and sent a link to an online anonymous survey (this survey was password protected). There were 15 complete responses to this survey. Participants could volunteer to take part in a follow-up phone interview, 11 staff volunteered and 6 interviews were completed by the Equality Officer.

# Key findings

- The main reason for staff in this group not applying for review at the Merit Bar was not being research active enough and not being registered for a PhD.
- Research publications were seen as the main criteria for passing the Merit Bar by all participants. Teaching was felt to be less valued. There were mixed views on the transparency of procedures and requirements.
- The Merit Bar review (and College in general) were perceived not to recognize sufficiently clinical work and the particular nature of professional activity in vocational disciplines in the Health Sciences.
- The point of returning from maternity leave was particularly problematic for respondents in terms of becoming research active (often returning to part-time posts and high teaching loads).
   Particularly relevant to Nursing and Midwifery - note age and gender profile of School (82% female).
- There was a notable lack of career plan or Merit Bar discussion with their Head of Discipline amongst the majority of respondents and across disciplines.
- PMDS was unevenly implemented and to mixed response. Development Officer role was seen positively in Nursing and Midwifery.
- Research supports (leave and reduced teaching) in place in majority of disciplines

- Several respondents suggested need for greater equity in accessing research supports - particularly for staff not registered for PhD
- High teaching and administrative loads were a barrier to respondents becoming more research active (particularly in Nursing and Midwifery with large student cohort).
- Some respondents appeared to be undertaking teaching and course coordination at a level above the Merit Bar.
- Respondents from smaller Schools (OT) noted the absence of senior academic role models within their discipline.
- Need for career advice and mentoring also highlighted.
- School context: both Nursing and Midwifery and Occupational Therapy seen to be isolated and outsiders both in academic tradition and physical location.
- School focus on research and PhD completion seen ambivalently in Nursing and Midwifery it was seen to impact negatively on other staff in some cases.
- OT the challenge for this discipline was perceived to be how to make their professional activity more academic.

# Discussion of findings

The majority of respondents had deferred review for two to three years; only two respondents stated they would be applying for review this year and half of respondents were unsure if they would apply - denoting this is a persistent situation for this group unlikely to change in the short term.

The main impediments to applying to the Merit Bar identified by participants in the survey was the need to have a PhD (or be registered for PhD) and not being research active enough. The interviews provided an opportunity to explore the barriers to a greater research output or PhD completion.

### 'Getting your foot on the research ladder'

Some respondents and interviewees highlighted high teaching and administrative loads as being a determining barrier to being more research active. The Merit Bar documentation provides an indication of the duties expected of staff on the Lecturer grade below the Merit Bar and above the Merit Bar in terms of teaching, research, service to College and service to discipline or the community. It is worth noting that several respondents indicated they were undertaking significant administrative work, as Course coordinator for example, which is not usually expected of Lecturers below the Merit Bar (see 'Review Procedures for Academic Staff'' available from the Staff Office website) 'Basically course-coordinating from day one...I lead 5 modules of which 3 are research, which I enjoy immensely'. Several respondents were employed part-time, which made it very difficult to complete PhD. A couple of respondents did recognize their own preference in prioritising teaching over research.

The effect of maternity and prolonged leave on research output was also crucial for several participants (4) and discussed in the interviews as a key factor for not applying for review. This issue is particularly relevant given

the staff profile in certain Schools - School of Nursing and Midwifery is 82% female- as was highlighted by one interviewee, who also drew attention to the age profile which indicated that staff would be much more likely to go on maternity leave than staff in other Schools with a more diverse age and gender profile. In some cases maternity leave was a factor in conjunction with returning to a part-time position or taking up more administrative work upon return- so several factors were compounded by maternity leave and impacted on research output. While Schools were generally perceived to be supportive, it was accepted that maternity leave could have a negative effect on research activity.

The interviews brought some discussion to the difficulties in 'getting your foot on the research ladder' - while most respondents agreed that there were supports for research activity in place, it was seen to be difficult to access these supports, particularly if you had not been research active in the past, did not have a stipend or if you had been on maternity or other prolonged leave. 87% of respondents cited there being study/research leave supports and 74% cited reduced teaching load supports, however, a couple of respondents did highlight the negative impact these supports could have on other staff who would have to bear a greater teaching or admin burden as a consequence. Several respondents brought attention to a need for greater equity for staff accessing research time and supports - particularly staff not registered for PhD. In the interviews these issues were greatly differentiated by School- while participants from the School of Nursing and Midwifery felt there was a strong focus on research, some participants from Occupational Therapy did not feel there was much support in place for research.

### Career in College

Respondents' attitude to their career and the College environment was somewhat paradoxical - while 75% felt that College was a good environment for them to develop their careers and were happy to be here, the general response regarding their personal career prospects was very negative - ranging from 'DISMAL' to 'poor' to 'not great' and 'unknown'. Insecurity regarding their contract (temporary or indefinite) in the current climate was also cited by several respondents, and was seen as a deterrent to applying for the Merit Bar.

It is notable that 75% of respondents reported not having discussed the steps to take in order to apply for the Merit Bar with their Head of Discipline. Interviewees discussed their Head of Discipline not engaging in long-term career discussions or not providing sufficient senior guidance. One interviewee had never discussed career plans with any of four rotating Heads. In another case neither the respondent, nor their Head of Discipline, were aware that they were approaching the Bar. The implementation of PMDS was irregular amongst Schools (69% respondents stated it was in place in their School) and the feedback was quite negative in general - 'I do not find PMDS useful as the allocation of reviewers seems quite random'. The absence of career guidance was particularly highlighted by interviewees from Occupational Therapy. Interviewees from the School of Medicine and School of Nursing and Midwifery seemed to feel that there were more career and

training supports in place - in particular the role of the Development Officer in Nursing and Midwifery was mentioned as being particularly useful for the Merit Bar.

### School/discipline

The specific context of each School was discussed in more depth in the interviews. All interviewees from Health Sciences highlighted the vocational nature of their academic activity and the specific nature of their work involving a great extent of clinical, practical and consultative work, including community projects, that was not felt to be fully recognized by the Merit Bar procedures.

Interviewees from Nursing and Midwifery and Occupational Therapy highlighted the differences with traditional academic disciplines, their relative 'newcomer' status and isolation - due in partly to off-campus location. Participants from Nursing and Midwifery drew attention to the large cohort of students attending the School and the clinical and professional element of their activity 'College not aware of the volume of teaching and clinical and admin work - imagine other Schools have different demands'. Participants from Occupational Therapy highlighted the small size of their department and their newcomer status being borne out in the absence of role models or senior academics within their discipline - with the consequent absence of career guidance or mentoring. Mentoring and senior role models were seeing to be very important by many respondents, and particularly beneficial to small disciplines or disciplines outside the traditional academic fields.

One participant felt that in their discipline 'the focus is not on research' and that part of the challenge for Occupational Therapy was to make their activity (clinical, consultative, and student project supervision) more academic. In this sense a greater focus on research was not seen necessarily as negative - but as a challenge the health disciplines needed to meet. On the other hand, some respondents in Nursing and Midwifery felt that PhD completion and research was being prioritised over all other activities in their School.

### Merit Bar

What emerged in the survey and interviews is a disconnect between what are the main activities of respondents in their work - teaching, clinical practice, course-coordination and administrative tasks, external consultative and professional activity- and what is perceived to be of value in the Merit Bar review.

All respondents identified research publications as the key criteria, if not the only criteria, for passing the Bar. It is worth noting that 41% of respondents did not feel confident they understood the requirements for review, and 53% did not find the procedures for review transparent or fair.

Having or being registered for a PhD, was seen as essential for passing the Bar amongst respondents, and was the main reason for participants not

having applied for review last year. This was corroborated by the experience of successful/unsuccessful colleagues. Interview discussion brought attention to the link between current difficulties in meeting the Merit Bar criteria and the entry level requirements academic staff in these Schools would have had in the past and at present - a reason why the PhD requirement is particularly problematic for certain Schools in Health Sciences. One interviewee discussed a dramatic change in entry expectations in Medicine and Occupational Therapy - from a Master's Degree five years ago, to PhD - which reflected changes in the profession.

Although the Merit Bar documentation outlines criteria as including teaching, research, service to College and service to the community or discipline, a recurrent issue in survey responses and interviews was that of teaching not being recognized as much as research, and in the case of the health sciences, it was also argued there was little recognition of clinical work. In the words of one respondent what is needed is 'Clarification of range of activities. There appears to be very traditional view measured by traditional metrics which are not necessarily in line with College plans'. Another respondent summarized it thus 'You are not being judged on what you do, but on what is perceived you should do by someone outside the School of XXXX who does not understand the dynamics and politics. If you are doing so much teaching and admin work that you can't do research, then that is what you should be judged on'.

### Recommendations

The findings would suggest a two-pronged approach to addressing the low application rate to the Merit Bar amongst female staff in Health Sciences.

**Merit Bar review criteria:** On the one hand the Merit Bar criteria and their application should be considered by the Junior Promotions Committee to

- a. Ensure that criteria are adhered to and communicated clearly to eligible candidates: The documentation provided to applicants indicates that four categories of contribution are valued but this is in contradiction with the widespread view amongst respondents that research is the only important element. Weightings for each category should be communicated clearly and the Committee ensure all elements are valued as per these weightings, particularly with a view to recognizing teaching activity. Take into account the specific nature of vocational schools when evaluating applications.
- b. Consider modifying Merit Bar review criteria to explicitly recognize clinical, consultative and other contributions to College and the community in the context of Health Sciences.

Addressing Barriers to research: On the other hand College, and the Schools where greater numbers of staff deferring are concentrated, should address the principal barriers to eligible staff becoming more research active:

- Schools consider the means of aligning their professional and clinical activity with academic research and publication to a greater extent.
- Review teaching/administrative loads
- Ensure equal opportunity in access to research supports and time to research
- Facilitate research upon return from maternity leave access to research supports encouraged at this point
- Provide mentoring particularly for staff in smaller/newer departments.
- Increase the role of career guidance provided by HoD, and ensure effectiveness of PMDS.
- Provide workshop on Merit Bar process to eligible candidates.

# Survey responses

### **Pool**

Eligible pool who have previously deferred (1 or more years): 37.

Gender breakdown: 8 Male, 29 female (total 37).

Faculty: 23 Faculty of Health Sciences, 7 FAHSS, 7 FEMS (total 37).

### **Profile of respondents:**

19 respondents, 15 completed full survey (22 January and 5 February 2010).

**Gender breakdown or respondents:** 14 female, 1 male.

### School breakdown:

- 6 School of Nursing and Midwifery
- 4 School of Medicine (3 Occupational Therapy)
- 3 Computer Science
- 1 Engineering
- 1 Other

### **Summary Online survey**

Q4 How many times have you deferred review (years)?

Most respondents had deferred review 2 or 3 years (12 out of 15). Breakdown:

3 years – 5 respondents

2 years- 7 respondents

1 year- 3 respondents.

Q5 Do you feel confident you understand the requirements for review at the Merit Bar?

### 59 % Yes

41 % No

Q6 Do you find the procedures for review at the Merit Bar transparent and fair?

47% Yes

### 53% No

Q9 Has Head of Discipline discussed with you what steps to take in order to apply for review at the Merit Bar?

Yes 25%

## No 75%

Q 15 Is PMDS implemented in your School?

### Yes 69%

No 31%

Q13 Do you feel College is a good environment for your career development?

Yes 75%

No 25%

Q16 - Career supports in place in your School Study/research leave - 87% Reduced teaching load - 74% Training- 47% Other - 20%

Q 18 Will you be applying for review in 2010? Yes 12.5% (2)

No 50% (8) Not sure 37.5% (6)

Other open-ended questions – see comments.

# **Survey Comments Summary**

## Main barrier for promotion (Q 8 & 10):

Main reasons for not applying previously:

Note – most respondents identified several reasons, the number given reflects number of respondents who cited this reason.

- not registered for PhD (9), 'Aware of a lot of colleagues who were rejected twice on the basis of not being registered for a PhD'
- not research active enough/not published enough (5),
- maternity leave (4) (affecting research activity). 'My research output has been disrupted by two extended maternity leaves in last 3 years'
- teaching/admin loads (3) (affecting research activity)
- working part time/temporary (2) (affecting research activity)
- Other: family commitments (1), unaware eligible (1), minimal support (1), Advice of HoD to the effect they weren't ready (1) and example of people not passing the Merit Bar (1).

The main barrier identified was lack of research output/not registering for PhD. This was associated with maternity leave and extended leave by several respondents.

One survey respondent highlighted that there is 'a lot of work which does not fit into areas on the form, such as clinical and consultative work on non-research based projects. This is often the case with Health Sciences and an acknowledgement of this would be useful.'

The issue of administrative and teaching loads distribution and course coordination was also raised by several respondents 'I have had to course

coordinate for most of my years here and this has mitigated against my engaging in research. Accordingly my research outputs are not what they might be if I did not have to do so much administrative work, which is beyond merit bar level'. The issue of stipends was also raised by one respondent, indicating that staff who could not take stipend for variety of reasons were negatively affected in being able to take academic leave etc. Another respondent stated that 'Basically course coordinating from the first day...I take some responsibility as my main priority is teaching students – I lead 5 modules of which 3 are research which I enjoy immensely and find the challenge of finding innovative methods to teach motivating'.

# Merit Bar procedures/criteria (Qs 5, 6, 7)

Nearly 60% of respondents said they felt confident they understood the criteria – which still leaves 40% who did not feel confident. Slightly more respondents felt that the Merit Bar procedures were NOT transparent and fair (9 out of 17).

One respondent noted 'inconsistencies amongst staff who progress and don't'. Another respondent stated 'You are not being judged on what you do, but on what it is perceived you should do by someone outside the School of Nursing and Midwifery who does not understand the dynamics and politics. If you are doing so much teaching and admin work that you can't do research, then that is what you should be judged on.'

When asked about the most important criteria respondents were unanimous (except 1 of 15) in stating it to be: Research/publications or PhD: 'Research, research outputs and research funding'; 'PhD registration, research and publications'. 'It appeared from the documentation that I received that research and publications are the only criteria which are important'. 'It seems RESEARCH'.

# Career development/ supports (College environment, supports, PMDS, Hof discipline) (Q9, 12, 13, 15, 16)

#### Career planning:

Only 25% of respondents reported their Head of Discipline discussing with them the steps necessary for applying for review at the MB. The majority of respondents stated that PMDS was implemented in their School, however the comments were generally not very positive: 'but only had one meeting and nothing since, at least 18 months ago'. 'I do not find PMDS useful as the allocation of reviewers seems quite random and I have no interaction with my reviewer outside the PMDS process'. A single respondent stated 'good system, most helpful'.

### Career prospects and College environment:

The majority of respondents thought that College was a good environment for their career development (75%): all facilities are available and staff in TCD have been supportive 'College is where I want to be. I am very happy here and it has my full loyalty...however I think something should be done to assist contract staff like myself'.

Some respondents stated that 'perhaps it could be a little more supportive of clinical work and the research challenges in health sciences'. Another respondent stated that 'there is a lack of equality in roles distributed to academic staff'. Another felt that 'Yes if one prioritises the work College esteem (I tend to devote much too much to student welfare and teaching)'.

Interestingly, although the majority of respondents felt that College was a good environment for their career development, the general response regarding their own career prospects was very negative, ranging from 'DISMAL' to 'poor' (x2) to 'poor to fair', 'not great' and 'unknown'. A couple of respondents stated having prospects 'suitable to my needs' or 'good'. Another respondent stated that 'At the moment I feel like I have reached a barrier and I am not being encouraged or facilitated to overcome it'. Many respondents referred to insecurity due to their type of contract (indefinite, temporary etc) and limited prospects in the current economic climate. Another respondent felt that 'it is really a case of making my own opportunities'.

### **Supports**

Nearly 90% of respondents reported that study/research leave was in place. The majority also stated that 'reduced teaching load' support was in place. Just under half of respondents reported training supports.

Their comments provide a positive feedback regarding training 'College offers good training facilities, particularly Springboard run by WiSER and ISS courses. I have not done any courses offered by Staff Office but they look good too.'

Another respondent qualified the research leave supports in place 'On paper there are a lot of supports. However academic leave and reduced teaching is being curtailed to support those on stipends. Therefore if you cannot afford to take a stipend there are almost no supports available to you, and you also have increased administrative load.' Others felt 'but really only to a few members' or 'I have not been able to access leave since 2006 due to lack of personnel available to take teaching'.

# Enable to apply/ Suggestions how College/School could further support the career development of its members (Q 11, 17)

Several respondents focussed on the distribution of teaching and admin loads and access to research leave: one respondent requested 'more equality in how course coordination roles are distributed...those above PhD level do not administrate undergraduate programmes'. The need for greater equality in who could access research leave and supports was stressed throughout the survey by different respondents.

A couple of respondents suggested more support for those who were research active but not registered for PhD, or who wished to become research active: 'reducing the number of teaching hours to facilitate someone who is genuinely committed to becoming research active (and can demonstrate this) rather than increasing them because they have not been research active in the past. They could also take into account maternity leave when looking at these issues'.

Several respondents suggested mentoring as a useful resource 'mentorship is key!', one respondent felt that 'support and mentoring from the discipline would be very useful as this is limited at present'. Another respondent supported this 'particularly for the smaller disciplines'.

Other suggestions from respondents included greater security in tenure for temporary staff. The issue of College recognition was raised by a couple of respondents: 'Clarification of range of activities. There appears to be a very traditional view measured by traditional metrics which are not necessarily in line with College plan'.

Regarding what would enable them individually to apply for the Merit Bar in the future respondents were practically unanimous: PhD registration, more publications and greater research output.

Several respondents did suggest 'Greater recognition on the part of College of the effort that I put in to my other activities (teaching and other contributions)' or 'the only way I can see is to value the role that I am playing –teaching and administrative- and assess me on this'. Time for research and academic leave were seen as necessary enablers by several respondents.

### School/Discipline specific (Q 14, interviews)

Some confusion on the question regarding the role of academic discipline in career progression. The interviews were more informative regarding the differences between Schools and school-specific issues.

### Interviews

### **About:**

6 follow-on interviews were completed with staff who volunteered in the online survey. Duration of interviews was approx 20-30 minutes. The breakdown of interviewees by School was as follows: two from the School of Nursing and Midwifery, three from the School of Medicine, Occupational Therapy Division, and one from Engineering (all female). Interviewee names have been replaced by letters A, B, C, D, E and F for anonymity purposes. All interviewees reported that the online survey had been clear, easy to complete and touched on the key issues.

In the interviews the key questions from the survey were discussed in greater detail: the principal barriers to applying for review at the Merit Bar, the research and teaching supports in place, career development guidance (HoD, PMDS etc), merit bar procedures and criteria etc. The interviews provided an opportunity to explore in greater depth the barriers to promotion and review at the Bar, in particular regarding the specific circumstances of each School/discipline. There was also an opportunity to discuss role models, mentors and peer examples. The questions were always addressed to the particular circumstances and goals of the individuals, however the interview format allowed for scoping out the perceptions of the context and culture in each School.

Individual circumstances and views varied amongst all respondents, however, there were common elements, particularly in the issues highlighted by staff from the same disciplines. The responses also facilitate a more nuanced interpretation of survey results.

### What interviewees said about:

### 1 Merit Bar criteria: Teaching vs. research vs. admin &clinical

- Teaching not valued as much as research [ALL]
- Publications all that are valued [ALL]
- No recognition of admin or teaching work [ALL]
- PhD essential [A, B, C, D, F]
- No recognition of clinical aspect of work. This issue more important in OT where respondents emphasized the extent of external consultative, clinical and professional work carried out. Issue 'how to measure practical work?' [C, D].
- Need for recognition of difference of vocational professional courses
- One participant not aware they were eligible or on Lecturer scale the letter was a surprise. They work part time and said research was not part of their job description (E).

### 2 maternity leave/contract type

- Three interviewees stated they had been on maternity leave and cited this as a factor for not applying for review.
- Staff profile in the School a factor: young women of childbearing age, more likely to be on maternity leave and have breaks in research activity (A). School is 80% female (C) [Nursing]
- Effect of maternity leave on research output: School seen as supportive 'but realities of life' will affect research activity(A).
- Being part-time following maternity leave- double disadvantage (F)
- Research pressure and maternity leave 'feel almost pressure to be researching while on leave...emails etc...even thought it is statutory leave' (F)

### 3 Work load distribution/research leave

- There are different study leaves/supports (note PhD stipends) available – but means others pick up the extra work (F)
- Hard to get started on research if you don't have PhD. Negative impact of leave arrangements (of others), particularly if you have been on maternity leave(F)
- Work load distribution fair (A)

### 4. Role of Head of Discipline/School

- Rotating Head, never discussed career development (D)
- HoD doesn't engage in long-term career discussion (F)
- HoD not aware person eligible for MB (E)
- HoD never discussed career plan, missing direction. HoD not very senior – no senior guidance (C)
- HoD good, understands person only wants to go if sure they will get MB (B)

### 5. PMDS

- No PMDS in School (B, C, D) [OT];
- 'only for full time permanent staff' [Engineering]
- Yes PMDS 'but on current role, rather than long term' (F); PMDS
  can be any of the directors in the School, not necessarily manager,
  but useful to set goals (A) [Nursing and Midwifery]
- Development Officer in Nursing and Midwifery- very useful. Has insider knowledge on how College functions. Staff who have consulted benefitted, staff who failed hadn't consulted. (A)

### 6. Role models

- OT no senior academics or role models relatively new discipline, off-campus.
- Peers all knew examples of colleagues going for MB successfully and also unsuccessfully (mostly without PhD) (ALL)

### 7 Role of Discipline

- All interviewees from vocational disciplines highlighted the particularities of their work involving a great extent of clinical, practical and consultative work that was not fully recognized in MB procedure.
- School specific factors highlighted included: large number of students/large teaching and admin loads; off-campus location.

- School history/culture: being relative newcomer to academic environment (Nursing and OT), lack of internal senior mentors or guidance; sense of being 'outside' mainstream College structures.
- School emphasis on research was viewed ambivalently- focus on PhD was seen as potentially detrimental to other staff by some/ lack of focus on research was felt to be unsupportive by others.

### 8 Others points

- Drivers ambition plays a part 'Happy where I am' (C)
- Change in profession: 'Change in entry requirements to teaching in Medicine have dramatically changed in the last 5 years – Masters is not sufficient anymore'. Evolution was seen as positive 'reflecting changes in the profession' (B).

### 9 By School

**Nursing and Midwifery:** the two interviewees from this School highlighted the importance of research and being registered for a PhD. One interviewee stated that 'This School is driven by a PhD requirement to the detriment of other staff'. Interviewees highlighted that this School had a large cohort of students and a clinical professional element 'College not aware of the volume of teaching and clinical and admin work- imagine other schools have different demands', in the case of one interviewee her role course-coordinating takes up 2/3 of her time which 'goes against getting foot on research ladder'. The other interviewee felt that the supports were in place in Nursing and Midwifery, including an excellent Development officer and PMDS, that workload distribution was fair and that not applying for review was largely down to each individual or to factors such as maternity leave. Both interviewees did however suggest that a greater recognition of their teaching role would be encouraging for applying for review.

**School of Medicine, Occupational Therapy**: the interviewees from the School of Medicine (all in OT) highlighted the small size of their department, the fact it is an off-campus, relatively new and growing academic discipline. Interviewees discussed the particularities of OT as a vocational professional discipline, highlighting the amount of time that was spent on liaising with professional bodies, providing external consultancy, advice and quality assurance and supervising student projects. All interviewees felt that teaching and admin roles were distributed fairly.

The views on research supports were more contradictory amongst respondents. One participant felt that OT 'did not have a good structure on research or support...focus is not on research'. While two respondents highlighted the absence of senior academic figures (there is no Professor) and mentioned a lack of guidance from the rotating Head of Department one had 'never discussed with any of them (4 heads of School) where I am going'- another respondent mentioned very positively the guidance provided by the Head of Department and stated she had a defined career path.

The challenge and responsibility for OT to make their activity (clinical, professional etc) more academic was highlighted by one interviewee—who noted the difficulty in measuring more practical-oriented work and contributions to the community. Another interviewee discussed how she felt the situation had 'changed dramatically in the last 5 years' in terms of the entry requirements for teaching in the School, whereas previously a Masters would have been sufficient, now a PhD was expected, but that this reflected larger changes in the profession.

**Engineering**: the interviewee from Engineering discussed her specific situation – where she was engaged on a part-time teaching contract and was not aware she had moved to the Lecturer scale and become eligible for review. Felt there was a lack of clarity in relation to her role, an absence of PMDS for part-time staff and little discussion of career plan with Head of Discipline.

### 10 Some further suggestions from interviewees:

- Recognition of difference between professional disciplines and traditional academic disciplines (A, C, D, F)
- More emphasis should be given to teaching in the MB procedures
- Two-track system: one track for staff focussing on teaching, one track for staff focussing on research in place in US universities.
- More senior guidance/ career guidance/ Mentoring
- Discipline should focus on making work more academic
- Workshop to attend in preparation of applying for Merit Bar to provide more information on process
- More support in terms of research
- 'Once you are in- more clarity around the MB process, plus support structures for getting there. Acknowledgement of discipline differences' (D)