



CINNTE 

QFI REVIEW



TERMS OF REFERENCE
Universities and other
Designated Awarding Bodies

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Terms of Reference for the Review of Universities and other Designated Awarding Bodies

Section 1 Background and Context for the Review

1.1 Context and Legislative Underpinning

These are the Terms of Reference for the Review of a Designated Awarding Body (DAB). The concept of a Designated Awarding Body is derived from the Qualifications and Quality Assurance (Education and Training) Act, 2012 (The 2012 Act) and is defined as ‘a previously established university, the National University of Ireland, an educational institution established as a university under Section 9 of the Act of 1997, the Dublin Institute of Technology and the Royal College of Surgeons in Ireland’. The following institutions are Designated Awarding Bodies:

Dublin City University	Dublin Institute of Technology
University College Cork	University College Dublin
University of Limerick	National University of Ireland, Galway
Maynooth University	The National University of Ireland
The Royal College of Surgeons in Ireland	Trinity College Dublin

In 2016, QQI adopted a policy on cyclical review in higher education which sets out in greater detail the scope, purposes, criteria, model and procedures for review. These are represented in the Terms of Reference and the Handbook for the Review of Designated Awarding Bodies. QQI has introduced an annual reporting process for institutions whereby institutions are required to submit an Annual Institutional Quality Report (AIQR). The aim of the AIQR is to provide a contemporary account of quality assurance (QA) within an institution. Information is provided through an online template and it is published. Collated annual reports are provided to periodical review teams. Annual reporting allows institutions and QQI to engage on a regular basis. Published annual reports assist with documentation management for institutions in reviews and lessen the burden on institutions in the lead-up to a review.

This review cycle is being conducted in a very changed context for higher education. The landscape for higher education has been significantly reshaped since the last cycle of reviews commenced. Smaller colleges have been merged with universities and many institutes of technology are reorganising and preparing mergers as part of the Technological University process. New alliances and clusters, envisaged by ‘Towards a Future Higher Education Landscape’ (HEA 2012) have commenced. A new approach to public funding has been introduced and operated by the Higher Education Authority (HEA). Initiatives for enhancement such as the Irish Survey of Student Engagement (ISSE) and the National Forum for the Enhancement of Teaching and Learning (NFETL) have been formalised at a national level. These developments mean that there are new sources of information and external benchmarks available to institutions that can be used to inform self-evaluation in this review cycle. Key measurements such as entry profiles, student retention, graduate profiles and staff and student satisfaction rates can provide some quantitative evidence of the quality of an institution’s offer.

The 2012 Act states that QQI shall consult with the HEA in carrying out the review. QQI has agreed with HEA that this will take the form of engagement with QQI on the Terms of Reference and confirmation of the status of the institution within the higher education system, sharing individual institutional profiles and data with the Team.

This is the third review round of Designated Awarding Bodies. Previous rounds took place in 2004-2005 and 2009-2012.

The 2017-2023 Review Cycle Schedule is:

Institution	Completion Dates			
	ISER	Planning Visit	Main Review Visit	Report
Dublin City University	Q2 2018	Q3 2018	Q4 2018	Q1 2019
Maynooth University	Q2 2018	Q3 2018	Q4 2018	Q1 2019
National University of Ireland, Galway	Q4 2018	Q1 2019	Q2 2019	Q3 2019
University College Dublin	Q2 2019	Q3 2019	Q4 2019	Q1 2020
University of Limerick	Q4 2019	Q1 2020	Q2 2020	Q3 2020
Dublin Institute of Technology	Q2 2020	Q3 2020	Q4 2020	Q1 2021
Trinity College Dublin	Q4 2020	Q1 2021	Q2 2021	Q3 2021
University College Cork	Q2 2021	Q3 2021	Q4 2021	Q1 2022
National University of Ireland	Q4 2021	Q1 2022	Q2 2022	Q3 2022
Royal College of Surgeons in Ireland	Q2 2022	Q3 2022	Q4 2022	Q1 2023

1.2 Purposes

The Policy for the Cyclical Review of Higher Education Institutions highlights 4 purposes for individual institutional reviews. These are set out in the table below.

Purpose

Achieved and measured through:

1. To encourage a QA culture and the enhancement of the student learning environment and experience within institutions.

- Emphasising the student and the student learning experience in reviews;
- Providing a source of evidence of areas for improvement and areas for revision of policy and change and basing follow-up upon them;
- Exploring innovative and effective practices and procedures; and
- Exploring quality as well as quality assurance within the institution.

Purpose

Achieved and measured through:

2. To provide feedback to institutions about institution-wide quality and the impact of mission, strategy, governance and management on quality and the overall effectiveness of their quality assurance.

- Emphasising the ownership of quality and quality assurance at the level of the institution;
- Pitching the review at a comprehensive institution-wide level;
- Evaluating compliance with legislation, policy and standards;
- Evaluating how the institution has identified and measured itself against its own benchmarks and metrics to support quality assurance governance and procedures; and
- Emphasising the improvement of quality assurance procedures.

3. To contribute to public confidence in the quality of institutions by promoting transparency and public awareness.

- Adhering to purposes, criteria and outcomes that are clear and transparent;
- Publishing the reports and outcomes of reviews in accessible locations and formats for different audiences; and
- Evaluating, as part of the review, institutional reporting on quality and quality assurance, to ensure that it is transparent and accessible.

4. To encourage quality by using evidence-based, objective methods and advice.

- Using the expertise of international, national and student peer reviewers who are independent of the institution;
- Ensuring that findings are based on stated evidence;
- Facilitating institutions to identify measurement, comparison and analytic techniques, based on quantitative data relevant to their own mission and context, to support quality assurance; and
- Promoting the identification and dissemination of examples of good practice and innovation.

Section 2 Objectives and Criteria

2.1 Review Objectives

Objective 1

To review the effectiveness and implementation of the QA procedures of the institution through consideration of the procedures set out, primarily, in the AIQR. Where necessary, the information provided by the AIQR is supplemented by additional information provided through documentation requests and interviews. The scope of this includes the procedures for reporting, governance and publication. This also incorporates an analysis of the ways in which the institution applies evidence based approaches to support quality assurance processes, including quantitative analysis, evidence gathering and comparison. Progress on the development of quality assurance since the last review of the institution will be evaluated. Consideration will also be given to the effectiveness of the AIQR and ISER procedures within the institution.

The scope of this objective also extends to the overarching procedures of the institution for assuring itself of the quality of its research degree programmes and research activities.

This objective also encompasses the effectiveness of the procedures established by the institution for the assurance of the quality of collaborations, partnerships and overseas provision, including the procedures for the approval and review of linked providers, joint awarding arrangements, joint provision and other collaborative arrangements such as clusters and mergers.

Objective 2

To review the enhancement of quality by the institution through governance, policy, and procedures.

To review the congruence between quality assurance procedures and enhancements and the institution's own mission and goals or targets for quality.

To identify innovative and effective practices for quality enhancement.

Objective 3

To review the effectiveness and implementation of procedures for access, transfer and progression.

Objective 4

Following the introduction of a statutory international education quality assurance scheme, to determine compliance with the Code of Practice for the Provision of Programmes to International Learners.

2.2 Review Criteria

Criteria for Objective 1

The Review Report will include a specific qualitative statement on the effectiveness of the quality assurance procedures of the institution and the extent of their implementation. The report will also include a specific statement about the extent to which the quality assurance procedures can be considered compliant with the ESG and as having regard to QQI's statutory Quality Assurance Guidelines (QAG). These statements will be highlighted in the report of the review.

The statements may be accompanied by a range of ancillary statements, recommendations and possibly recommendations for conditions in reference to this objective.

The criteria to be used by the team in reaching conclusions for this objective is the:

- ESG;
- QQI Core QAG;
- QQI Sector Specific Quality Assurance Guidelines for Universities and Other Designated Awarding Bodies;
- Section 28 of the 2012 Act; and
- The institution's own objectives and goals for quality assurance.

Where appropriate and actioned by the institution, additional QQI Guidelines such as those for research degree programmes will be incorporated.

The QQI Sector Specific Private and Independent Provider QAG may be an appropriate reference document if they have been adopted by the DAB for their linked providers.

Criteria for Objective 2

The Review Report will include a specific qualitative statement on the enhancement of quality by the institution through governance, policy, and procedures.

This statement may be accompanied by a range of ancillary statements and recommendations in reference to this objective. If identified, innovative and effective practices for quality enhancement will be highlighted in the report.

The criteria to be used by the team in reaching conclusions for this objective are:

- The institution's own mission and vision;
- The goals or targets for quality identified by the institution; and
- Additional sources of reference identified by the institution.

Criteria for Objective 3

The report will include a qualitative statement on the extent to which the procedures are in keeping with QQI policy for Access, Transfer and Progression.

This statement may be accompanied by a range of ancillary statements and recommendations and possibly recommendations for conditions in reference to this objective.

The criterion to be used by the team in reaching conclusions for this objective is the QQI Policy and Criteria for Access, Transfer and Progression.

Criteria for Objective 4

When the statutory international education quality assurance scheme is in place, the report will include a qualitative statement on the extent to which the procedures are compliant with the Code of Practice for the Provision of Programmes to International Learners.

This statement may be accompanied by a range of ancillary statements and recommendations and possibly recommendations for conditions in reference to this objective.

The criterion to be used by the team in reaching conclusions for this objective is the Code of Practice for the Provision of Programmes to International Learners.

Key questions to be addressed by the review for each objective

- How have quality assurance procedures and reviews been implemented within the institution?
- How effective are the internal quality assurance procedures and reviews of the institution?
- Are the quality assurance procedures in keeping with European Standards and Guidelines?
- Are the quality assurance procedures in keeping with QQI policy and guidelines, or their equivalent?
- Who takes responsibility for quality and quality assurance across the institution?
- How transparent, accessible and comprehensive is reporting on quality assurance and quality?
- How is quality promoted and enhanced?
- Are there effective innovations in quality enhancement and assurance?
- Is the student experience in keeping with the institution's own stated mission and strategy?
- Are achievements in quality and quality assurance in keeping with the institution's own stated mission and strategy?
- How do achievements in quality and quality assurance measure up against the institution's own goals or targets for quality?

Section 3 The Review Process

3.1 Process

The primary basis for the review process is the Cyclical Review Handbook for Universities and other Designated Awarding Bodies

3.2 Review Team Profile

QQI will appoint the Review Team to conduct the institutional review. Review Teams are composed of peer reviewers who are students and senior institutional leaders and staff from comparable institutions as well as external representatives. The size of the Team and the duration of their visit will depend on the size and complexity of the institution but in general the Review Team for a Designated Awarding Body will consist of 6 persons. Each Review Team includes a Chairperson and Coordinating Reviewer, and may be supported by a rapporteur, who is not a member of the Team, to take and collate notes of meetings. A single team may undertake the review of two different institutions.

Reviewers are not QQI employees, but rather peers of the institution. The institution will have an opportunity to comment on the proposed composition of their Review Team to ensure there are no conflicts of interest, and QQI will ensure an appropriate and entirely independent team of reviewers is selected for the institution. QQI has final approval over the composition of each Review Team.

There will be appropriate gender representation on the Review Team. The Team will consist of carefully selected and trained and briefed reviewers who have appropriate skills and are competent to perform their tasks. The Team will operate under the leadership of the Review Chairperson.

The review team will be appointed in keeping with the following profile:

1. A Review Chairperson

The role of the Chairperson is to act as leader of the Review Team. This is an international reviewer who is a (serving or recently former) senior third-level institution leader – usually a head of institution or deputy head of institution or a senior policy advisor who:

- Possesses a wide range of higher education experience;
- Demonstrates a deep understanding of the complexities of the higher education system;
- Understands often unique QA governance arrangements; and
- Has proven experience in the management of innovation and change.

2. A Coordinating Reviewer

The role of the Coordinating Reviewer is to act as secretary to the Team as well as to be a full Review Team member. This is usually a person with expertise in the Higher Education system and prior experience in participating in external reviews. As the coordinating reviewer is responsible for drafting the report, he or she will possess proven excellent writing abilities.

3. A Student Reviewer

The role of the Student Reviewer is to represent the student voice in the Review Team. The Student Reviewer will be typically a PhD student with significant experience of higher education or an undergraduate student who has completed a specific programme preparing them for the role or who has previously had a key role in other institutional reviews.

4. An External Representative

The role of the External Representative is to bring a 'third mission' perspective to the Review Team. In addition to the specific roles above, the full Team complement will include a range of experts with the following knowledge and experience:

- International reviewer experience;
- EQF and Bologna expertise;
- Experience of higher education quality assurance processes;
- Experience of managing research within or across institutions;
- Experience in governance; and
- Experience and proven ability in the advancement of teaching and learning.

3.3 Procedure and Timelines

The outline set out in the policy (below) will be elaborated further and timelines will be set out to accompany it, through discussion and consultation.

Step	Action	Dates	Outcome
Terms of Reference (ToR)	Collation of an institutional information profile by QQI Confirmation of ToR with institution and HEA	9 months before the Main Review Visit (MRV)	Published Terms of Reference
Preparation	Appointment of an expert Review Team Consultation with the institution on any possible conflicts of interest	6-9 months before the MRV	Review Team appointed
Self-Evaluation	Forwarding to QQI of the Institutional Self-Evaluation Report (ISER)	12 weeks before the MRV	Published ISER (optional)
Desk Review	Desk review of the ISER by the Team	Before the Initial Meeting	ISER initial response provided
Initial Meeting	An initial meeting of the Review Team, including reviewer training and briefing	5 weeks after the ISER, 7 weeks before the MRV	Team training and briefing is complete. Team identify key themes and additional documents required
Planning Visit	A visit to the institution by the Chair and Coordinating Reviewer to receive information about the ISER process, discuss the schedule for the Main Review Visit and discuss additional documentation requests	5 weeks after the ISER, 7 weeks before the MRV	An agreed note of the Planning Visit
Main Review Visit	To receive and consider evidence on the ways in which the institution has performed in respect of the objectives and criteria set out in the Terms of Reference	12 weeks after the receipt of ISER	A short preliminary oral report to the institution
Report	Preparation of a draft report by the Team Draft report sent to the institution for a check of factual accuracy Institution responds with any factual accuracy corrections Preparation of a final report	6-8 weeks after the MRV 12 weeks after the MRV 2 weeks after receipt of draft report 2 weeks after factual accuracy response	QQI Review Report

Step	Action	Dates	Outcome
Report	Preparation of an institutional response	2 weeks after final report	Institutional response
Outcomes	Consideration of the Review Report and findings by QCI together with the institutional response and the plan for implementation	Next available meeting of QCI committee	Formal decision about the effectiveness of QA procedures In some cases, directions to the institution and a schedule for their implementation
	Preparation of QCI quality profile	2 weeks after decision	Quality profile published

The form of follow-up will be determined by whether 'directions' are issued to the institution. In general, where directions are issued the follow-up period will be sooner and more specific actions may be required as part of the direction

Follow-up	Preparation of an institutional implementation plan	1 month after decision	Publication of the implementation plan by the institution
	One-year follow-up report to QCI for noting. This and subsequent follow-up may be integrated into annual reports to QCI	1 year after the MRV	Publication of the follow-up report by QCI and the institution
	Continuous reporting and dialogue on follow-up through the annual institutional reporting and dialogue process	Continuous	Annual Institutional Quality Report Dialogue Meeting notes

Note: The total period from start to finish is approximately 15 months but will depend on QCI committee meeting dates.

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