



**Trinity College Dublin**  
Coláiste na Tríonóide, Baile Átha Cliath  
The University of Dublin

# FACULTY OF HEALTH SCIENCES QUALITY REPORT 2016



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## 1. EXECUTIVE SUMMARY

The Faculty of Health Sciences is comprised of four Schools, with 15 undergraduate and 41 postgraduate taught programmes and a number of PhD and professional doctorate offerings.

The Faculty achieved 100% module evaluations in 2015-16, across both undergraduate and postgraduate programmes. There are clear processes in place at School level for the dissemination of information from student evaluations and external examiner reports, including through the School Executive Committees, Directors of Undergraduate & Postgraduate Teaching & Learning, Module Coordinators, Year Coordinators and Curriculum Development Committees. An emphasis is placed on 'closing the feedback loop' by conveying outcomes to the student body and to the external examiners.

The Faculty of Health Sciences differs significantly from the other faculties through its requirements for clinical placements, at both undergraduate and postgraduate level. In 2016 the Faculty conducted a review of the quality mechanisms in place to support quality education and training at our clinical sites for the undergraduate Nursing programme (BSc Cur). The outcome of this review was very positive (section 2.5), with the School demonstrating robust quality mechanisms and excellent communication channels between the school and the Health Service Providers (HSPs). The Faculty aims to extend this review to the other programmes within Nursing & Midwifery, and to the other schools within the Faculty in 2017.

Many of the programmes in Health Sciences are subject to evaluations by accrediting bodies; this is in addition to the Quality Review cycle and the annual Quality Report and places a considerable additional workload on Schools. A number of schools in the Faculty participated in a recent QQI-sponsored survey on streamlining accreditation and quality review processes, the outcomes of which are pending. In order to streamline or reduce efforts QQI and Professional Statutory Accreditation Bodies would need to mutually recognise each other's standards and associated review processes, the Quality Office is working to progress this.

# FACULTY OF HEALTH SCIENCES AT A GLANCE

## 656 STAFF

281 academics  
217 researchers  
158 admin/tech

## SITES

D'Olier Street,  
TBSI, IPH Tallaght,  
Hamilton, DDUH,  
St James' &  
Tallaght Hospitals.

## MODULES EVALUATED

402 UG (100%)  
46 PG (100%)

## 4424 STUDENTS

3786 EU (86%)  
638 NEU (14%)

## Linked Service Providers

- St James's
- Tallaght
- St Patrick's
- Naas General
- St Anne's Moore Abbey
- HSE East Coast
- HSE South West
- Rotunda
- Coombe
- Our Lady's Children's Hsp
- Naas General
- Stewarts
- Dublin Dental University Hsp



In May 2015, Trinity College Dublin Student's Union published a report titled 'Report into issues affecting the student experience in TCD BSc Midwifery' (Trinity SU Report). The report included findings from an online survey of 99 midwifery students across the four years of the BSc Midwifery course and identified a number of issues relating to the BSc Midwifery students' experiences while on clinical placements. In May 2016 the Dean of Health Sciences held a meeting with the relevant stakeholders, the outcome of which was to establish a working group who would be charged with developing and implementing a robust response to the concerns raised in the report and, in particular, to implement the recommendations of the report. The final report of the working group was submitted to the Dean in November 2016, the outcomes from which are detailed in section 3.1.

The Faculty of Health Sciences embraces the development of the annual quality report, and continually seeks to make improvements to the process. The schools use the process of data gathering to inform the strategic direction of quality processes at school level. The schools have requested that the annual quality report be more reflective of prospective quality developments and enhancements to reflect this. The Faculty Executive suggested that the report template be amended to include high-level quality processes and strategic developments which are taking place within the schools. The Quality Office agreed to develop the report template for 2017 to reflect this.

## 2. QUALITY REPORT

### 2.1 Quality of Undergraduate Programme Provision

The Faculty of Health Sciences offers 15 undergraduate programmes across its four schools. Improving the quality of our educational programs and the student experience is central to the overall mission of the Faculty of Health Sciences. Continuous quality improvement efforts have need embedded within the strategic plans of all schools. Initiatives implemented based on last year's quality process include, but are not limited to, an improved use of course committee meetings and Blackboard in the School of Nursing & Midwifery, the use of orientation sessions in the School of Pharmacy and Pharmaceutical Sciences, the use of focus groups in the School of Dental Science, and the introduction of a graduate (year 5) focus group in Medicine.

Health Sciences continues to score particularly well in the Work Integrated Learning index of the ISSE Report, which is a good reflection of the integrated nature of the health sciences programmes. Health Sciences were particularly strong in the area of acquiring job or work related knowledge and skills (AHSS 38%, FEMS 48%, HS 72%) and also gained a higher rate of respondents exploring how to apply their learning in the workplace during their study compared to other faculties (AHSS 28%, FEMS 24%, HS 63%). In 2017 the Faculty launches the Dean's Awards for Outstanding Teaching in Professional Practice to recognise the significant contribution of professionals external to the College in the delivery of teaching to its undergraduate and postgraduate students.



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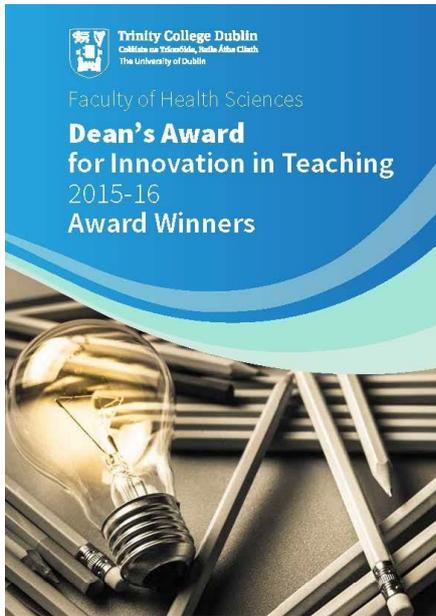
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The Faculty strives to provide interprofessional learning (IPL) opportunities for students, whereby students of medicine, physiotherapy, nursing, midwifery, pharmacy and dental science can work together on complex cases which emulate the real working environment of healthcare professionals. The Faculty has provided a resource in the form of a two-year Assistant Professorship post to drive IPL across the schools within the Faculty. IPL workshops currently involve students from seven areas: medicine, nursing, pharmacy, physiotherapy occupational therapy, speech and language therapy and human nutrition and dietetics. New developments in IPL in 2016-17 include an IPL preparation course for first year Human Nutrition and Dietetics students with contributions from fourth year physiotherapy and occupational therapy students and the development of topic-focused seminars for roll-out in 2017/2018. These seminars will involve 2-3 professions and align with learning on existing undergraduate modules. The increase in IPL activity will be evident in 2017-18 when the topic-focused seminars roll out and additional groups engage in the preparation activity.

*We are health sciences precisely because health and health care are interdisciplinary and collaborative concerns. This interdisciplinary approach offers the potential to educate and train the full range of health care personnel in an integrated Faculty, facilitating our graduates' transition to an interdisciplinary workforce, which is critical for optimal patient care.*

**Faculty of Health Sciences Mission Statement**



In 2015 the Dean launched the Dean's Awards for Innovation in Teaching, which is now in its second year. To date the Faculty has funded 14 innovations in teaching across the Faculty, including the development of online interactive tools to teach subjects ranging from medication error to hearing voices, and plagiarism to embryology. Video technology has been employed within the School of Medicine (Clinical Microbiology) and the School of Dental Science (periodontal disease) to provide online tools for laboratory and clinical based subjects, and one project within the School of Medicine seeks to introduce a remote tele-presence device utilising a five-foot tall tablet computer on wheels which links up via Wi-Fi; this remote tele-presence device will be used as the second examiner in clinical examinations whereby the validity of two independent examiners is maintained without adding the extra stress of double assessor's presence in the room.

### **Module Evaluation**

There are 402 undergraduate modules across the Faculty, all of which were evaluated in 2015-16. While the Faculty has achieved 100% evaluation rates, there is ongoing concern regarding the response rates. The Faculty's response rate in the ISSE dropped by 10% in 2015-16 compared to 2014-15. Health Sciences had the lowest level of participation in the Postgraduate Research Survey Report (HS 20%, FEMS 38%, AHSS 41%).



Schools have implemented a number of initiatives to increase module response rates, such as:

1. Surveys were incentivised by the introduction of a draw for an ipad
2. For one module in Medicine, students were presented with the annual survey at the ‘presentation poster day’ and completed them in a lecture theatre
3. The timing of the survey dissemination was scheduled to coincide with down times or periods when students were connected to but not overburdened by exams, classes etc.
4. The School of Nursing & Midwifery moved to in-class student surveys which led to a significant increase in response rates (see Table 1).

Table 1: BSc Nursing response rates for the Hilary Term surveys, 2014-15 and 2015-16

Discipline	Academic Year	Junior Freshman	Senior Freshman	Junior Sophister	Senior Sophister
General	2014-15	16 of 147 = 11%	16 of 138 = 12%	24 of 125 = 19%	10 of 127 = 8%
	2015-16	80 of 145 = 55%	68 of 127 = 54%	39 of 123 = 32%	41 of 121 = 34%
Intellectual Disability	2014-15	7 of 28 = 25%	6 of 31 = 19%	3 of 28 = 11%	1 of 28 = 4%
	2015-16	12 of 27 = 44%	13 of 29 = 45%	10 of 27 = 37%	7 of 28 = 25%
Mental Health	2014-15	6 of 42 = 14%	8 of 45 = 18%	11 of 35 = 31%	2 of 43 = 5%
	2015-16	22 of 42 = 52%	19 of 45 = 42%	10 of 37 = 27%	6 of 39 = 15%
Integrated Children’s & General	2014-15	5 of 19 = 26%	2 of 19 = 11%	7 of 14 = 50%	1 of 16 = 6%
	2015-16	12 of 20 = 60%	8 of 20 = 40%	5 of 14 = 36%	4 of 16 = 25%

## 2.2 Quality of Postgraduate Programme Provision

The Faculty of Health Sciences has 46 postgraduate programmes, including professional doctorate programmes, across the schools of Dental Science (8), Nursing & Midwifery (15), Pharmacy & Pharmaceutical Sciences (5) and Medicine (18). The Faculty also has a wide range of PhD offerings.

The Faculty achieved 100% evaluation rates for its postgraduate taught programmes in 2015-16. Postgraduate programmes are not evaluated by module as it is felt that a course-level approach is more meaningful. Students are invited to provide feedback on all aspects of their programme, including clinical placements where relevant. Small student numbers on postgraduate programmes continues to be a problem when reviewing student feedback and so Schools consider the feedback in this context.

The inaugural survey of Postgraduate Research (PGR) students was issued in February 2016. The School of Medicine accounted for 14% of respondents and that this was the largest contribution by any School. A total of 63 students from the School of Medicine responded, which accounts for 24.6% of the School’s PGR students. The low response rates in other schools makes it difficult to draw any conclusions on levels of satisfaction with postgraduate offerings. The report presents an aggregation of data at College-level which is valuable to the organisation as a whole, but schools’ decisions to implement significant changes based on the findings of this report are tempered by the



low school-level response rates. The Quality Office has requested that IT Services provide mailing lists for PGR students in order to target the required audience for this survey and Schools are providing time in-class and at postgraduate events in order to increase the response rates.

Table 2: Profile of respondents to PGR Survey (n = 439)

I am studying in the following School:		
Answer Options	Response Percent	Response Count
Business	2.3%	10
Drama, Film and Music	2.3%	10
Education	3.4%	15
English	3.6%	16
Histories and Humanities	6.4%	28
Languages, Literatures and Cultural Studies	1.6%	7
Law	3.6%	16
Linguistic, Speech and Communications Sciences	2.1%	9
Psychology	6.6%	29
Social Sciences and Philosophy	4.6%	20
Social Work and Social Policy	1.8%	8
Confederal School of Religions, Peace Studies and Theology	1.4%	6
Biochemistry and Immunology	3.4%	15
Chemistry	6.4%	28
Computer Science and Statistics	8.2%	36
Engineering	5.2%	23
Genetics and Microbiology	3.0%	13
Mathematics	1.4%	6
Natural Sciences	5.2%	23
Physics	4.8%	21
Dental Science	1.4%	6
Medicine	14.4%	63
Nursing and Midwifery	4.6%	20
Pharmacy and Pharmaceutical Sciences	2.5%	11



### 2.3 Summary of best practice across the Faculty

The SU survey into issues affecting the student experience in BSc Midwifery yielded a number of negative student responses and the subsequent report highlighted a list of significant recommendations for the Faculty, School and relevant HSPs. While the survey and report highlighted negative outcomes, the Faculty considers its engagement with the Students' Union after receipt of the report as an example of best practice on how to address significant student issues. In this case, the Dean established a working group who would be charged with developing and implementing a robust response to the concerns raised in the report and, in particular, to develop and implement an action plan to address the recommendations outlined in the report. The working group made significant progress in addressing the issues within the SU report and the Faculty looks forward to future survey results in order to evaluate the impact of these actions on the student experience. The Faculty is actively engaged with the Students' Union in its current review of clinical education across the Faculty.

The schools' have introduced a variety of innovative approaches to encourage and support students to engage in the quality process and to combat questionnaire fatigue. It is clear that utilising a variety of evaluation and feedback methods is proving successful across the Faculty, and so a continued emphasis on this model will be encouraged. Schools have identified the methods of data collection and feedback that are most successful for their individual programmes and have modified their methods in order to increase participation in the quality process, evidenced by the School of Medicine's and Nursing and Midwifery increased response rates in 2015-16. It is also recognized that gaining student feedback is likely to be an ongoing challenge for the schools, and it will require ongoing flexibility, responsiveness and innovation.

### 2.4 Summary of issues to be escalated to College level

The following issues were highlighted as having an impact on quality at school-level, but require intervention at College level to be resolved:

#### **School of Dental Science**

None

#### **School of Medicine - Medicine Programme:**

- **General** – Issues with student registration means that students do not have access to Blackboard for many weeks at the start of the academic year, which unfairly impacts on the students' experience. Also impacts on continuous assessments done via Blackboard. Raised with Head of School and Faculty Dean.
- **Anatomy:** Student:staff ratio higher than other similar institutes, which manifests every year in student feedback. Extra demonstrator required to maintain and develop teaching practice (dissection), skills supervision, integration of clinical imaging and further development of interim assessments using multimedia. Under discussion with HR.



- **Obstetrics/Gynaecology:** Establishment of a physical presence in the Trinity Centre, Tallaght Hospital, to address lack of teaching and research activity there - space now allocated by the School. Internet and library facilities for Trinity students and staff in the Coombe Hospital – under discussion with IT Services
- **Paediatrics:** Requirement for extra staff to ensure child protection, high quality SGT and to allow current staff fulfil their duties to the national paediatric curriculum and development of the new children’s hospital. Internet access for students in the Coombe and Crumlin hospitals - under discussion.

#### **School of Medicine - Human Health and Disease Programme:**

- Issues with assessment of the clinical medicine module were raised by students with the Course Director, Head of School, and Senior Lecturer. Meeting held between School and Senior Lecturer following which correspondence was sent to all students concerned. School followed up on changes to module structure and assessment for 16/17

#### **School of Medicine - Human Nutrition and Dietetics Programme:**

- Issues relating to staff, resources and external factors which might impact on the course were raised through the programme governance structures, which include senior management from both Trinity and DIT. They were also addressed during the Programme Review which took place during 15/16.

#### **School of Nursing & Midwifery:**

- Lack of private space for breastfeeding/expressing mothers.

An interim measure was provided where students were provided with private space in unused seminar rooms on request. A space was identified in the School for this activity and will be renovated as part of the Student Space Enhancement Project. This issue was also escalated to the Senior Lecturer to clarify College policy.

- Students requested that all staff should put their class notes on Blackboard preferably in advance of the relevant class.

It was explained to students via Blackboard that in the absence of a College policy requiring staff to put notes on Blackboard, School staff are regularly encouraged to do this and reminded of their obligations in relation to the ‘Trinity Inclusive Curriculum’. Students with accommodations from the Disability Office were advised to contact their lecturers to request copies of notes in advance of class. Students were also informed about the College Working Group reviewing Blackboard which it is hoped will recommend that College develop a policy on making notes available before class.

#### **School of Pharmacy & Pharmaceutical Sciences**

None



## 2.5 Faculty Projects / Initiatives

### **Review of Clinical Placements**

In 2016 a pilot review of clinical placements was undertaken, using the undergraduate Nursing programme (BSc (Cur)) in the School of Nursing & Midwifery as the pilot.

All clinical placement sites used are approved by the Nursing & Midwifery Board of Ireland (NMBI) and are subject to a three-year audit process. The audit process is agreed by the health service providers (HSPs) and by Trinity College and is managed by the LEAP Group (Linking Education and Practice).

Each site conducts a self-audit, which is submitted to the School of Nursing & Midwifery. The audit tool used is directly linked to the NMBI standards document. A Partnership meeting takes place each year to review the audit outcomes.

Upon completion of each clinical placement, a student evaluation session takes place in the clinical area and a student survey is completed. Evaluations are reviewed by the HSP on a regular basis and with College on a yearly basis. However, any significant items are addressed immediately using the relevant process, see below. A summary of the escalations, repeat issues and positive enhancements highlighted through these student evaluation sessions is included in section 3.1.1 below.

Issues arising which relate to dignity and respect are reported by the student(s) to the HSP. Each linked site has a dignity & respect policy through which all such issues are managed. Students either report the issues directly to the HSP, or to the Director of Undergraduate Teaching & Learning in the School in order for the Director to initiate contact with the HSP on behalf of the student. While the Director acts on behalf of the student in these cases, it is in a pastoral capacity to ensure that any issues of disclosure are received by the relevant HSP. Records in relation to disclosure are maintained at the HSP, with a summary of the number of issues raised and the resolution of each issue being noted at the annual Partnership meeting. The Partnership meeting includes the Clinical Allocations Officer, Director UGLT, Discipline Head and the relevant clinical staff.

The Clinical Allocations Office in partnership with the Allocations Liaison Group in the HSP manages, projects and plans all clinical placements for the School in consultation with the BSc Management Group / Midwifery Management Group, Joint Curriculum Development Group, LEAP Group and Partnership meetings. The Clinical Allocations Officer has responsibility to ensure this process flows effectively and that the clinical allocations process is represented in all of the relevant fora across the School and HSPs.

Trinity College provides Preceptorship training to all nurses and midwives with responsibility for training / supervising undergraduate and postgraduate students. The Preceptorship training is delivered by the College and Clinical staff. Training is delivered monthly in the St James's and Tallaght sites and on an ad-hoc basis, as required, for new and smaller sites.

The National Allocations Officer Group influences the development of the clinical component of the new NMBI requirements and standards. This provides the School of Nursing & Midwifery with an opportunity to be involved with and instrumental in shaping the national requirements and standards. This also provides a forum for issues to be escalated to a national level. An example of an issue raised through the National Allocations Officer Group is the lack of primary care community



placements available. The outcome of this was that NMBI reduced the minimum requirement for community clinical placements.

### Dean's Awards

The Faculty continues to offer Dean's Awards for Innovation in Teaching, and the Dean's Research Initiatives Fund. In 2017 the Faculty will launch its Dean's Awards for Outstanding Teaching in Professional Practice.

**Table 3: Winners of the Dean's Award for Innovation in Teaching 2016**

<b>School of Pharmacy and Pharmaceutical Sciences</b>	<p>This innovation comprises patient simulations designed for students to practise and evaluate their performance in prescribing / counter-prescribing medication outside the classroom/workplace. They will be unique in the available interactivity with realistic 3-dimensional artefacts and characters, building upon completely novel 3D dispensed products I have already developed, and focusing on Prescribing/counter-prescribing, Product selection for supply/administration and Prescription/product review (dispensing/supply).</p> <p>With minor adjustments this innovative tool will be valuable for medical, nursing and dentistry students engaged in medicine prescribing, supply and administration, adjusting the content to meet the needs of individual professions and levels (e.g. undergraduate medical students versus postgraduate nurses undertaking the Nursing/Midwife Prescribing Certificate).</p>
<b>School of Nursing &amp; Midwifery</b>	<p>Collaboration is at the heart of the project which aims to capture the self-experience of voice hearing and frame it in the recovery context. The multimedia package will consist of two eLearning units, each will include service-users and their personal experience of hearing voices. Animation will be added to the videos to illustrate and bring to life the heard voices. Through animating the heard voices, the students/viewers are provided with a more immediate experience of the intensity of hearing voices, the disconcerting nature of that experience, and the lack of control over when and how the heard voices are experienced.</p>
<b>School of Medicine, Department of Physiology</b>	<p>Embryology is a core subject undertaken by Health Science students, with the aim to bring together core knowledge in Cell Biology, Anatomy and Physiology to describe the developmental process from fertilization to birth. For the 2015-16 academic year student feedback indicated difficulty visualising key embryological concepts in 2D, particularly embryonic folding/flexion and cell layer migration during gastrulation. This project will develop an interactive audio-visual animation that will be implemented into the Junior Freshman curriculum for teaching embryology and will be assessed via pre- and post- animation surveys to determine if the audio-visual aid improves student learning in embryology. Furthermore, the collation of questionnaire data associated with the animation will be conducted by a Senior Sophister student as part of their final year undergraduate research project.</p>
<b>School of Medicine, Clinical Skills Tutor</b>	<p>The Clinical Skills Programme for students in the 2nd medical year incorporates a Communications module focused on clinical interview skills.</p>



	<p>This innovation is designed to enhance undergraduate medical students' ability to identify poor and good communication skills and their ability to reflect on patient encounter scenarios. This encourages critical thinking about day to day experiences and observations in the clinical area before they commence their clinical attachments which will hopefully be transferred into their experiences there promoting a critical thinking and reflective practitioner in the future. This innovation may lend itself to a new mode of assessment of reflection.</p>
<b>School of Medicine, Education Division</b>	<p>This research project will further the objectives of the Trinity Education Project through the promotion of non-traditional modes of assessment and will embed 21st Century assessment modalities into the curriculum. A pioneering and innovative technology enhanced approach to assessment using a remote tele-presence device is proposed. Remote assessment via a remote tele-presence device utilises a five-foot tall tablet computer on wheels which links up via Wi-Fi. The assessor appears on the screen and is able to conduct a face-to-face interaction with the student. The student and patient can be seen up close, and the examiner can check for levels of competence in the students' performance. The remote assessor can quickly travel around the exam room and is controlled by the absent examiner, often via their mobile phone. They can be in another part of the hospital, city or country.</p>
<b>School of Medicine, Department of Public Health &amp; Primary Care</b>	<p>The proposed <b>Healthy Trinity Online Tool (H-TOT)</b> is a new concept that is a part of a broader initiative to incorporate Healthy Ireland (our Government's blueprint to improve the Population's health and wellbeing) into all aspects of Trinity life, striving to achieve and maintain the 'Healthy Campus' status for Trinity College. Health Sciences professionals struggle to achieve and maintain a healthy work-life balance throughout their careers. Students of Health Sciences also struggle with this balance, which is compounded by the course requirement to meet the curriculum demands of the respective accrediting bodies, which leaves little flexibility in the student timetable. The development of the H-TOT will provide this interactive health related educational piece, with the functionality to enhance students' ability to self-manage a challenge and signpost students to existing College supports, services and infrastructure.</p>
<b>School of Medicine, Clinical Microbiology</b>	<p>By its nature Microbiology is a practical subject, and thus laboratory classes underpin and further expand the student learning experience. The demonstration of experiments to students (particularly in large classes) can be somewhat challenging. My idea is to record short videos of a variety of techniques that can then be shown in class or that the student can view in their own time. VIMM will be a suite of videos that are no longer than 90 seconds in duration. Complex procedures, will be broken down into smaller chunks to make for easier learning. The use of VIMM and the impact on learning will be assessed by student evaluation in Summer 2017.</p>



## 2.6 College response to issues outlined in previous years Annual Faculty Quality Report

### The following issues were escalated to College level through the Quality Report 2015:

Issue	Outcome / Progress to Date
1. Feedback from academic module co-ordinators that roll over on Blackboard was too late in the year, especially to accommodate the clinical years beginning from the end of August	A VLE policy will go to Council this academic year. On multiple occasions, the Quality Office have raised with AR, HR and IT Services the issue of registration difficulties.
2. Blackboard training required over the summer for new Lecturer/Registrars who take up post each July	The Quality Office have requested that CAPSL facilitate this request. Additional training sessions have been put in place.
3. Issues with staffing levels in Anatomy with a high student:staff ratio for practical classes due to increasing student numbers and no related increase in staffing levels.	This issue is ongoing.
4. Human Nutrition and Dietetics – issues relating to staff and external factors which might impact on the course were raised at the Oversight Group, which includes senior management from both Trinity and DIT	This issue is ongoing.
5. The School of Nursing & Midwifery is located off the main campus and so students feel unable to engage fully in the Trinity undergraduate experience. Since the inception of the undergraduate programmes students have requested that at least some of their classes be scheduled on the main campus as a way of integrating them more fully into the life of the College. Repeated requests to the College timetabling office have been unsuccessful.	This issue has been highlighted to the Bursar and the School has completed an audit of space requirements as part of the College space planning exercise.
6. The negative effect on students of the deteriorating physical environment in D'Olier St. The classrooms fail to meet the minimum standards required to support modern teaching and learning practices in a 21 <sup>st</sup> century university. The informal spaces are inadequate for the numbers of students in the building at one time. Informal staff/student engagement is prohibited by the limited seating areas.	This issue has been highlighted to the Bursar and the School has completed an audit of space requirements as part of the College space planning exercise.



### 3. APPENDICES - FACULTY AT A GLANCE

This section includes tables that support the discussion in the body of the report. This section covers data that responds to compliance and enhancement aspects of quality assurance. Data in this area will be collated to produce a report to Council and will also inform the Annual Institutional Quality Report to QQI.

#### 3.1 Course and Module Evaluation

Table 3.1

Number of UG Modules provided	402	100%	Number of UG Modules evaluated	402	100%
Number of PGT Courses provided	46	100%	Number of PGT Courses evaluated	46	100%
Number of PGR students in Faculty*	435	100%	Number of PGR students participating in PGR Survey	100	

\*The absence of a PGR Survey was a key improvement identified in 2014, survey developed in 2015 and piloted in 2015/16 academic year.

#### 3.1.1 Escalations – Undergraduate (from course & module surveys)

The following issues were highlighted as having an impact on quality at school-level, but require intervention at College level to be resolved:

##### School of Dental Science

None

##### School of Medicine - Medicine Programme:

- **General** – Issues with student registration means that students do not have access to Blackboard for many weeks at the start of the academic year, which unfairly impacts on the students’ experience. Also impacts on continuous assessments done via Blackboard. Raised with Head of School and Faculty Dean.



- **Anatomy:** Student:staff ratio higher than other similar institutes, which manifests every year in student feedback. Extra demonstrator required to maintain and develop teaching practice (dissection), skills supervision, integration of clinical imaging and further development of interim assessments using multimedia. Under discussion with HR.
- **Obstetrics/Gynaecology:** Establishment of a physical presence in the Trinity Centre, Tallaght Hospital, to address lack of teaching and research activity there - space now allocated by the School. Internet and library facilities for Trinity students and staff in the Coombe Hospital – under discussion with IT Services
- **Paediatrics:** Requirement for extra staff to ensure child protection, high quality SGT and to allow current staff fulfil their duties to the national paediatric curriculum and development of the new children’s hospital. Internet access for students in the Coombe and Crumlin hospitals - under discussion.

#### **School of Medicine - Human Health and Disease Programme:**

- Issues with assessment of the clinical medicine module were raised by students with the Course Director, Head of School, and Senior Lecturer. Meeting held between School and Senior Lecturer following which correspondence was sent to all students concerned. School followed up on changes to module structure and assessment for 16/17

#### **School of Medicine - Human Nutrition and Dietetics Programme:**

- Issues relating to staff, resources and external factors which might impact on the course were raised through the programme governance structures, which include senior management from both Trinity and DIT. They were also addressed during the Programme Review which took place during 15/16.

#### **School of Nursing & Midwifery**

- Lack of private space for breastfeeding/expressing mothers.

An interim measure was provided where students were provided with private space in unused seminar rooms on request. A space was identified in the School for this activity and will be renovated as part of the Student Space Enhancement Project. It was also escalated to the Senior Lecturer to clarify College policy.



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- Students requested that all staff should put their class notes on Blackboard preferably in advance of the relevant class.

It was explained to students via Blackboard that in the absence of a College policy requiring staff to put notes on Blackboard, School staff are regularly encouraged to do this and reminded of their obligations in relation to the 'Trinity Inclusive Curriculum'. Students with accommodations from the Disability Office were advised to contact their lecturers to request copies of notes in advance of class. Students were also informed about the College Working Group reviewing Blackboard which it is hoped will recommend that College develop a policy on making notes available before class.

### **School of Nursing & Midwifery – Clinical Placements**

An issue arose whereby there were not enough primary care community placements available to facilitate all students. This issue was escalated through the National Allocations Officer Group, the outcome of which was that NMBI reduced the minimum requirement for community clinical placements to address the national shortfall.

### **School of Pharmacy & Pharmaceutical Sciences**

None

### **3.1.2 Repeat Issues – Undergraduate (from course & module surveys)**

### **School of Dental Science**

None

### **School of Medicine**



- **Anatomy:** Student:staff ratio higher than other similar institutes, which manifests every year in student feedback. Extra demonstrator required to maintain and develop teaching practice (dissection), skills supervision, integration of clinical imaging and further development of interim assessments using multimedia. Under discussion with HR.
- **Principles of Medical and Surgical Practice (Year 3)**

Student feedback was divided in many cases over their experience. This is expected in a year where students transition to the clinical environment and mechanisms to support this transition are being investigated with student counselling to develop a selfcare and wellbeing component to the curriculum.

Some students reported difficulties with communication and organisation and a lack of clarity regarding curricular goals and assessment. They reported a diverse range of experience with teams and this requires further investigation.

Finally, students rate the level of patient interaction and bedside tutorials very highly and request more of this form of education.

**Action:** the Associate Director of Undergraduate Teaching and Learning will focus on year 3 exclusively and in particular the module on PMSP in 2016/17. There has been an introduction of integrated systems teaching between medicine and surgery with an Ortho/MSK week and plans to develop this further with a dedicated curriculum in GI are in train. Additional bedside tutorials requires recruitment of tutors on a 4 monthly basis due to the rotating nature of NCHD posts. The current system is adjusting to the increase in student numbers and does not have the capacity to increase without additional administrative and clinical faculty support. The ADUTL has developed an intern-supported tutorial system that is well received by students and may be suitable to develop across disciplines and sites.

- **ISSP and IMSP** Students raised an issue with the duplication of content of lectures across sites and that the organisation of bedside tutorials can be difficult. There is a 5<sup>th</sup> year co-ordinator employed to work with the faculty in Medicine and Surgery on both sites to map the curriculum and to engage with the clinical lecturers.
- **Physiotherapy (incl SIT)** – the issue of timetabling was raised again. Discipline has made a concerted effort to ensure timetable changes were kept to a minimum
- **Human Nutrition and Dietetics** – Issues with staffing, resources and external threats to the programme addressed through the Course governance structures. Meetings held with HSE and Dept of Health to advocate for Clinical Placement Tutors posts.



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### **School of Nursing & Midwifery**

1. Some students have highlighted ongoing difficulties in the clinical areas.

The School advised students to refer to the formal disclosure procedure. The procedure was recirculated to all students and students were encouraged to follow the procedures to resolve local issues.

2. The negative effect on students of the deteriorating physical environment in D'Olier St. The classrooms fail to meet the minimum standards required to support modern teaching and learning practices in a 21<sup>st</sup> century university. The informal spaces are inadequate for the numbers of students in the building at one time. Informal staff/student engagement is prohibited by the limited seating areas.

The School has engaged with the Estates and Facilities department and has commenced a Student Space Enhancement Project in the Foyer area in the D'Olier St Building.

Students were invited to submit suggestions for the enhancement process many were incorporated into the plans. Students were kept updated about this project via the student noticeboard and via the SU.

The School is located off the main campus and so students feel unable to engage fully in the Trinity undergraduate experience. Since the inception of the undergraduate programmes students have requested that at least some of their classes be scheduled on the main campus as a way of integrating them more fully into the life of the College. Repeated requests to the College timetabling office have been unsuccessful.

### **School of Nursing & Midwifery – Clinical Placements**

None

### **School of Pharmacy & Pharmaceutical Sciences**

None



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### 3.1.3 Positive aspects and enhancements – Undergraduate (from course & module surveys)

#### **School of Dental Science**

DE1001: Clinical Observation. Students requested guidance on written report. **Action:** Session to be delivered in Hilary term on report writing.

#### **School of Medicine**

Student feedback led to a wide range of enhancements across all programmes:

##### **Medicine course – Year 1:**

###### Human Form and Function

- Rotational station based learning and SGT further developed
- Integrated radiology/clinical imaging developed

###### Evolution and Life

- Lecture programme changes to aid better understanding

###### Human Development, Behavioural Sciences and Ethics

- Clarity on assessment criteria and essay writing to be given at first and last lectures

###### Medicine Health and Humanities

- Additional options included for 16/17

##### **Medicine course - Year 2:**

###### Clinical Biochemistry



- Modifications to length of lecture course and exams

#### Molecular Medicine

- Repositioned to semester 2 to give students more prep time. Pathology to be included (*see am disease below*)
- Lecture sequence optimised and regrouped. Learning outcomes and objectives now on Blackboard to provide clarity on module structure
- Changes to exams and informal assessments on specific topics to facilitate student feedback

#### Pharmacology

- Clarity on project application
- More comprehensive lecture content on Blackboard
- Lecture content reviewed and revamped for relevance

#### Fundamentals of Clinical and Professional Practice

- Site co-ordinators in place
- All timetables/notes on Blackboard
- Standardised notes for lecturers/tutors for consistency across sites
- Equipment training on both sites

#### Head and Neck Anatomy

- Reconfiguration of exams
- Practical class material is now being sent via mail to students the weekend before each week commences, and placed on Blackboard at the same time.



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- Lecture notes are being placed on Blackboard at the same time they are sent out via email, i.e. two day before the lecture is given.

#### Neuroscience

- More information on workshops
- Lectures being reviewed to avoid overlaps and more reminders to be issued about exams

#### AM Disease

- Module change – now includes microbiology, immunology and parasitology. Pathology moved to molecular medicine
- Timetable modified – delivered earlier in the year and of double duration
- Pace and volume of lectures lessened. Available online 36 hours prior

#### **Medicine course – Year 3**

##### LabMed

- Christmas exam format has been changed/simplified as a result of student feedback
- Student forum proposed

##### Pharmacology and Therapeutics

- More neuropharmacology teaching included
- Smaller kardex groups and another session added

##### Advanced Clinical and Professional Practice

- Clinical Skills: designated site coordinator, standardised training of equipment across sites, lecture dedicated to explain exam/assessment criteria



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- ME: students can meet with lecturers after exam
- IPL: workshop times moved away from exam period
- PPAM: number of lectures reduced, introducing mini-projects, results issued earlier, more external speakers, attendance sign in will count as part of exam grade

#### Principles of Medical and Surgical Practice

- Associate Director of T&L to oversee Year 3 supported by Year 3 Co-ordinator in 16/17
- Additional support required to develop curriculum material, training events and communication strategy with consultants
- Bedside tutorials are labour intensive and dependent on the availability of non-Trinity staff
- Pilot Ortho/MSK systems approach

#### **Medicine course – Year 4**

##### Obstetrics/Gynaecology

- New shift system to optimise student teaching on labour ward
- New gynaecology week timetable introduced

##### Psychiatry

- Plan to introduce interactive practical sessions and piloting an assessment tool to enhance learning experience in TV review sessions

##### Public Health and Primary Care

- Timetable streamlined with more targeted sessions

##### Paediatrics



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- Programme restructured – logbook introduced, adolescent health module included, core paediatrics now in Tallaght Hospital
- Students now allocated to teams
- Research project reformatted and more structured

#### Medical Jurisprudence, Ethics and Law/Professional Development

- Subject areas now more coalesced to improve lecture flow

#### **Medicine course – Year 5**

##### Integrated Surgical Science and Practice/Integrated Medical Science and Practice

The consistent positive comments from 13/14 to 15/16 include comments about the consultant-led teaching, individual faculty and an appreciation of the time and effort the departments dedicate to students.

##### **Radiation Therapy (incl SIT) - Small changes made:**

- Timing of content
- Assessment deadlines
- Approach to teaching methodologies discussed and changes made for 16/17, which will be evaluated at year end
- Changes were identified verbally at the start of the year within each module by module co-ordinator when conducting the first class “introduction to module”

##### **Occupational Therapy**

- Based on feedback from JS students in 2015/2016 regarding timing of assignments for JS modules, all JS Module Co-ordinators have been reminded to hand out the module assignment as early as possible in 2016/2017 to allow students time to plan their work and ensure assignments are submitted prior to commencement of practice education placement in Semester 2



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- All JS assignments need to be completed prior to Practice Education placement to allow students engage fully with practice education in Semester 2. Hand in dates for JS assignments has been staggered with some assignments are due prior to Christmas break and some in early January to assist students balance their workload.

### **Occupational Therapy – Singapore**

- A class based component was introduced in the assessment of Module OT4038 (based more on staff evaluation and external examiner discussion rather than student feedback). The introduction of class-based assessment weighted at 20% has worked in the students favour and reflected with improved marks for this module in 2015/2016.

### **Physiotherapy**

- Changes to workload allocation in Year 4, which clearly defines self-directed learning
- Better alignment of submission times for assignments
- Information passed to students in a meeting on final year assignment and assessment

### **Diagnostic Radiography**

- During the Overseas Immersion Programme in Dublin in 2016, lectures were delivered in a block before students commenced the practical placements. This provided students with more preparation time for the module assignments.

### **Human Health and Disease**

- JF students now undertake core content within BY1101
- Under the recommendation of the External Examiner, the MAP structure of CM3207 has been updated to reflect the content of the material delivered in the module

### **Human Nutrition and Dietetics**

Revised curriculum implemented across all years from 16/17. Key changes include:

- Scheduling of placements within normal academic term time
- Improved sequencing of content



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- Removal of subjects that no longer had relevancy from the curriculum
- Introduction of new modules on Professional Practice and Development and Evidence-based Practice
- Implementation of interprofessional learning modules across the programme
- Improved Trinity induction sessions held with Year 1 students to include an understanding of their identity within Trinity
- Student vaccinations now done through Trinity College Health
- Inclusion of more specialist visiting lecturers in teaching, e.g. paediatrics
- Focus on further support for Practice Educators

### School of Nursing & Midwifery

- Extended notification of clinical placement dates from 2 to 4 weeks to increase amount of time for students to make arrangements.
- Moved mandatory course admin sessions on Monday mornings from 9.00 to 9.30 to facilitate students traveling from outside Dublin.
- Choice of hospital and pre-registration engagement was moved online and streamlined with positive feedback from students.
- The assessment for Module NU4S03: Leadership and Health Policy was changed from an assignment to an examination resulting in an improved pass rate.

### School of Nursing & Midwifery – Clinical Placements

- Roster changes – there is a drive towards allowing flexibility whereby parents can work weekends.
- Document changes – clinical placement documentation has been streamlined for ease of use. The documents have been simplified, making them quicker to complete and reducing the amount of training required.
- Individual needs – there are mechanisms in place whereby individual cases can be looked at, such as maternity leave, compassionate leave and start time flexibility.



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### **School of Pharmacy & Pharmaceutical Science**

Based on JF student feedback for the new five-year integrated programme PH1106 was changed from a 5 to 10 ECTS module in 2016/17 academic year. BYPH01 was changed from 10 to 5 ECTS module.

#### **3.1.4 Students' Union Report into Issues Affecting the Student Experience in TCD BSc. Midwifery**

##### **Background**

In May 2015, Trinity College Dublin Student's Union published a report titled 'Report into issues affecting the student experience in TCD BSc. Midwifery' 'hereafter referred to as 'Trinity SU Report'. The report included findings from an online survey of 99 midwifery students across the four years of the BSc. Midwifery course. The survey included items to group responses, if necessary, by year or programme and primary maternity hospital affiliation i.e., the Coombe Women and Infant's Hospital or the Rotunda Hospital.

##### **The report identified a number of themes as follows:**

- (i) There is a hierarchical structure currently in operation in the discipline of Midwifery which places students at the bottom.
- (ii) The financial and time demands currently placed on Midwifery students are exorbitant, discriminatory against students from non-traditional backgrounds and deviate from Trinity College's strategic commitment to broadening access to education.
- (iii) There is inadequate integration of the organisational structures of the Coombe and Rotunda Hospitals and Trinity College's School of Nursing and Midwifery which manifests at present as adverse effects on the quality of Midwifery education being provided.
- (iv) The Labour Relations Commission prescription that midwifery students are of supernumerary status and should not work weekend or night placements is categorically not being reflected in current practice.
- (v) Midwifery students of Trinity College are not receiving a well-rounded education, and the critically low levels of co-curricular involvement are serving to impact students' mental health and actively to exacerbate other problems.
- (vi) On numerous levels, the mechanism by which issues are relayed and resolved is locally and systematically dysfunctional.



**The report included three recommendations as follows:**

- a. Establishment of adequate communication lines producing a triangulation of university, hospital and student, involving Trinity's SU and prioritising the feedback of the student as fundamental;
- b. Meaningful facilitation of opportunities for Midwifery students to develop socially, personally and intellectually through greater co-curricular involvement, such as through the establishment and financial support of a Midwifery Student Society;
- c. A comprehensive anti-bullying strategy to be formulated and implemented, with accompanying training of staff where necessary.

In May 2016, Prof. Mary McCarron, Dean of the Faculty of Health Sciences, Trinity College Dublin held a meeting in Trinity with representatives from Trinity's SU, the School of Nursing and Midwifery and other stakeholders at which it was agreed to establish a working group who would be charged with developing and implementing a robust response to the concerns raised in the report and, in particular, to implement the recommendations of the report. Prof. Declan Devane was invited to serve as the external chair to the group, which was to become known as the 'Midwifery Student-Positive Safety and Culture Group'.

**Midwifery Student-Positive Safety and Culture Group**

The Midwifery Student-Positive Safety and Culture Group (MS-PSCG) held its first meeting in June 2016. Terms of reference of the group were, over the course of a number of initial meetings, agreed and refined as follows:

**Aim**

The aim of the Midwifery Student-Positive Safety and Culture Group (MS-PSG) is to respond effectively to concerns identified in Trinity's Student Union's 'Report into issues affecting the student experience in TCD BSc. Midwifery' hereafter referred to as 'Trinity SU Report'.

**Objectives**

1. Review the themes and recommendations TCDSU Report;
2. Develop a Quality Improvement Plan to include specific actions, timelines and whom responsible for implementation;
3. Agree and implement process for monitoring and evaluation of the QIP;



4. Develop a Communication Plan to advise stakeholders of action plan and progress;
5. Identify evaluation plan to ensure QIP is embedded in the organisational structures;
6. Advise on any further support and training required for students and/or staff.

Importantly, the membership of the group reflected all stakeholders with an interest in optimising the clinical learning environment for students and included midwifery students, newly qualified midwives, practice development midwives, Directors of Midwifery from both affiliated maternity hospitals, Lecturers in Midwifery from Trinity, Director of Midwifery Programmes in Trinity, student union representatives and the Senior Tutor of Trinity. Senior administrative support to the group was provided by the School of Nursing and Midwifery.

The MS-PCG met on nine occasions between June 2015 and June 2016. In addition, a number of meetings between the Chair and the Directors of Midwifery were held.

#### **Modus operandi**

The MS-PCG agreed to organise its work based on a Quality Improvement Plan (QIP), which addressed, explicitly, both the themes and recommendations arising from the report and included specific actions, timelines and identified person(s) responsible for implementation. The QIP was an 'organic' document, which was reviewed and updated at each meeting based on actions already delivered and on new actions identified as the work progressed. It must also be acknowledged that significant work was undertaken by many members of the outside of formal meetings.

All actions identified for inclusion in the QIP were agreed at the MS-PCG and remained under review until completed or until handover of the Chairmanship of the group to Dr. Denise Lawler of the School of Nursing and Midwifery at Trinity.

#### **Outcomes achieved**

The following are key actions achieved by the group in the timeframe under review for this report i.e., June 2015 to June 2016.

- i. Enhancement of processes to help ensure students are aware of structures and mechanisms to support students raising concerns (completion Jan 2016)
- ii. Student union presence in School of Nursing and Midwifery, Trinity on a fortnightly basis (implemented Nov 2016)
- iii. Development of a tripartite agreed toolkit to support students, and staff, consisting of:
  - a. A Charter of Trainer and Trainee Professional Responsibilities



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- b. Support structure and mechanism for midwifery students to discuss an issue of concern
- c. The respective dignity at work policy for each of the Coombe Women's and Infants Hospital, the Rotunda Hospital and Trinity College Dublin
- d. Plan for implementation of toolkit to include staff training on toolkit
- iv. Development and implementation of a Train the Trainers programme on positive safety culture developed (UK trainer provided training to trainers) (completion March 2016)
- v. Review of processes for student's evaluation of the Clinical Learning Environment to include preceptorship, taking cognisance of current processes. This will include development of evaluation tool or other modalities as required (plan in place and ongoing as of June 2016)
- vi. Review of preceptorship training, preparation and ongoing support. This will include all stakeholders inc. students, preceptors, ward managers (plan in place and ongoing as of June 2016).

### **Conclusion**

As Chair of the group, I observed a well-functioning, committed group with a shared vision to build on, and acknowledge, strengths already supporting a high quality clinical learning environment and to identify and implement actions to support areas requiring development.

I do believe, and have articulated this at a number of the meetings, that the learning and work of this group may have value to other HEI/healthcare partnerships responsible for education of student midwives (and other student groups).

The group have always been willing to share their work and I have shared the groups work with colleagues in NUI Galway and the Saolta University Health Care Group and our allied health partners.

While the group have work left to do, I am confident that, if used to its full potential by all stakeholders, the group will remain a powerful forum for trainees and all concerned in their education to ensure the clinical learning environment is optimised toward a positive safety and culture environment

I thank each member of the group for their significant contributions to the group. The substantial time they gave within and outside of the meetings was palpable and I hope is evidenced in the strong outcomes from the groups work. I would like to pay particular thanks to Prof. Mary McCarron for inviting me to Chair this group and to Mr. Frank O'Rourke and Ms. Lisa Battersby for their tremendous, and invaluable, support throughout the process. I leave the group under the capable Chairmanship of Dr. Lawler and I wish her and the group the best for the future.

Signed: Professor Declan Devane, 11th Nov 2016



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### 3.1.5 Escalations – Postgraduate (from course & module surveys)

#### **School of Dental Science**

None

#### **School of Medicine**

- Issues with library borrowing rights for PG Certificate students – Director of PG T&L raised with the Library and reverted to the Course Director. Unfortunately, there has been no resolution as currently PG Certificate students do not have library borrowing rights
- Student misidentified as non-EU and charged non-EU fee – Course Director raised with AR and it was then escalated to Director of PG T&L. Student received communication from AR rectifying the situation but this took three months to resolve

#### **School of Nursing & Midwifery**

None

#### **School of Pharmacy & Pharmaceutical Sciences**

None

### 3.1.6 Repeat Issues – Postgraduate (from course & module surveys)

#### **School of Dental Science**

None

#### **School of Medicine**

Library borrowing rights for PG Certificate students



### **School of Nursing & Midwifery**

None

### **School of Pharmacy & Pharmaceutical Sciences**

None

#### 3.1.7 Positive aspects and enhancements – Postgraduate (from course & module surveys)

##### **School of Dental Science**

- Prosthodontic students suggested they have case presentations jointly presented with the Periodontology students.

Agreed and completed. All postgraduate students can attend the case presentations of all other programmes with particular emphasis on the close working relationship between Prosthodontics and Periodontology.

- Paediatric students to attend Joint Clinics and have more frequent research meetings

Agreed and completed. Joint clinics timetabled.

##### **School of Medicine**

On foot of previous feedback, the following positive enhancements were made in a number of courses:

- Improved timetabling
- Better use of Blackboard
- Improved teaching methods and more tutorials
- Introduction of student mentors



**School of Nursing & Midwifery**

None

**School of Pharmacy & Pharmaceutical Sciences**

PG OSCEs have been replaced by objective review with feedback of ward-based assessments. This entails the course coordinator visiting the participating hospitals and attending a tutor-led ward-based assessment, and providing feedback on same. The external examiner had noted that similar M.Sc. courses to ours in the UK had moved away from OSCEs, as they are felt to be more suitable for assessing undergraduates. Tutors also noted that the students are heavily assessed in their practice environments and it did not make much sense to remove them from these ‘real-life’ scenarios and place them in simulated environments. The students themselves found the OSCEs to be very stressful as noted in feedback and many underperformed in the OSCEs compared to other course assessments. The new system is operating well.

Workload has been reduced in response to both external examiner and student feedback. The MSc in Hospital Pharmacy was felt to be very ‘assessment-heavy’ and there was a concern noted by the external examiner that this could potentially detract from student learning. Furthermore, students noted that the workload of this M.Sc. programme is a strong deterrent to many potential M.Sc. candidates. The workload has been reviewed and several actions have been taken to address this.

3.2 External Examiner Reports

Table 3.2

Number of UG Programmes externally examined 2015-16	Pharmacy 1 N&M 3 Dental 5 Medicine 10	Number of UG EE Reports returned	Pharmacy 3 N&M 3 Dental 21 Medicine 31
Number of PG Programmes externally examined 2015-16	Pharmacy 4 N&M - Dental 6 Medicine 17	Number of PG EE Reports returned	Pharmacy 4 N&M - Dental 6 Medicine 2



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### 3.2.1 Escalations – Undergraduate (from External Examiner reports / COE meetings)

#### **School of Dental Science**

None

#### **School of Medicine**

##### **Medicine Programme 2014/15**

- **Anatomy** – Supplemental exam period takes place during term time, which is disruptive and is a heavy workload on staff

##### **Medicine Programme 2015/16**

- **Physiology** – Examiner recommended a reduction in the number of obligatory extern visits
- **Anatomy** – increase in staffing required
- **Molecular Medicine** – additional academic and administration support required

##### **Radiation Therapy (incl SIT)**

- Identified lack of clinical tutors for the programme - School in ongoing discussion with the Department of Health and the National Cancer Control Programme (NCCP)
- Highlighted the need for formal agreements with the relevant clinical departments for placements. Raised at School Executive and being actioned

#### **Human Health and Disease**

External Examiner commented previously and in the 2015-2016 report that the programme is relatively under-resourced for what it delivers. The external examiner states in his report “ it must be stated that this programme needs its own dedicated administrative support. I don’t see this as an optional extra. The nature of the programme creates an administrative burden which is considerably greater than that of a more “conventional” programme.” This



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was brought to the attention of the School in November 2015 and May 2016 following meetings between the Course Director and Head of School. Additional administrative support being put in place.

### **Human Nutrition and Dietetics**

Both External Examiners highlighted the need for extra resourcing for the programme, particularly on the Trinity side. This is being addressed as part of the Implementation Plan to address the recommendations arising from the Programme Review in 15/16.

### **School of Nursing & Midwifery**

Over assessment across all disciplines and courses has been a problem since the inception of the BSc Nursing programme. College's policy that each module be assessed independently has exacerbated this problem.

We hope to address this issue in the new curriculum and through inputs to the Trinity Education Project

### **School of Pharmacy & Pharmaceutical Sciences**

In the area of Pharmaceutical Chemistry the External Examiner had raised some concerns around the predictability of examinations papers and understanding of basic concepts. In the next academic year, the examination paper will be structured so that questions may be less predictable. Basic Pharmaceutical Chemistry concepts and material are separately assessed in the MCQ/short answer test component in the Junior Sophister and Senior Sophister modules PH3002 and PH4002, accounting for 10% of the annual module mark in each module. Higher weightings for these MCQ/short answer module components will be considered as appropriate in the next academic year.

The Practice of Pharmacy External Examiner suggested to not include Type 4 MCQ based questions in future. The School is in agreement with this suggestion.



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### 3.2.2 Repeat Issues – Undergraduate (from External Examiner reports / COE meetings)

#### **School of Dental Science**

One external examiner queried the use of written stations in OSCE exams. The relevant internal examiners have clearly stated their rationale for the continued use of these stations. This was discussed with the examiner at the relevant CoE and will be discussed further at the relevant curriculum committee.

#### **School of Medicine**

**Anatomy** – Supplemental exam period takes place during term time, which is disruptive and is a heavy workload on staff; Increase in staffing required.

#### **Radiation Therapy (incl SIT)**

- Identified lack of clinical tutors for the programme - School in ongoing discussion with the Department of Health and the National Cancer Control Programme (NCCP)
- Highlighted the need for formal agreements with the relevant clinical departments for placements. Raised at School Executive and being actioned

#### **Human Health and Disease**

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#### **Human Nutrition and Dietetics**

Both External Examiners highlighted the need for extra resourcing for the programme, particularly on the Trinity side. This is being addressed as part of the Implementation Plan to address the recommendations arising from the Programme Review in 15/16.



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### **School of Nursing & Midwifery**

Over assessment of students in UG nursing programme. This has been acknowledged by the School and it will be addressed in the new curriculum by reducing the number of modules per year from 10 to 6 and limiting formal assessments to 1 per module.

### **School of Pharmacy & Pharmaceutical Sciences**

None

### **3.2.3 Positive aspects and enhancements – Undergraduate (from External Examiner reports / COE meetings)**

#### **School of Dental Science**

- We have now substantially reduced the number of assessments in each academic year - no longer an integrated paper at the end of Hilary term for Years 2-4. Integrated and scenario papers merged in Year 1.
- We have now included specific guidelines for the annotation of scripts.

#### **School of Medicine**

- Appointment of Professorial staff in key areas has led to improvements and new developments
- **Medicine:** External Examiner had an issue in 14/15 with standardising in Final Year vis-a-vis the other subjects. This was resolved in 15/16 to his satisfaction
- **Paediatrics:** External Examiner suggested the introduction of Adolescent/Transition Medicine. This is now included in the 16/17 curriculum
- **Anatomy:** External Examiner has an issue with the essay paper. This has now been replaced with SAQs
- **Radiation Therapy (incl SIT)** – Extract from report: “The program achieves the highest standards for the field, with a strong academic focus and is recognised internationally as a role model for the academic and professional education of RTTs at the international level. The training and academic level is exceptional high thanks to a fully committed staff, sustainable institutional support and consistent further development over time. The



atmosphere in the programme is open minded and respectful which as an experience for the students clearly has important impact for their future interprofessional relationships in the field of radiation oncology.”

- **Occupational Therapy** – Following from internal discussion among staff and further discussion with the external examiners changes were made to Module OT4029 and operationalised in 2015/2016. A standard case study was supplied to the students to base their assignment upon, the change was perceived as successful by students, staff and external examiners.
- **Occupational Therapy Singapore** – Following internal discussion and discussion with the external examiner a decision was made to introduce a class-based continuous assessment component into module OT4038 alongside the written assignment component. This change was operationalised in 2015/2016 and resulted in improved grades across this module. The new weighting of class-based and assignment work better reflects the student effort in this module.
- **Physiotherapy (incl SIT)** – The marking schemes for Year 4 were made more explicit. External examiner was given more access to material in advance of their visit
- **Diagnostic Radiography** – The External Examiner provided excellent feedback on the course. He stated in his report that the course was unique and that it would be worthwhile reporting it into conferences and the literature. More emphasis to be placed on teaching students how to develop methods sections for project proposals using more evidence-based approaches
- **Human Health and Disease** – External Examiner remains impressed with the breadth and overall content of the curriculum delivered. The range and quality of the research project is extremely impressive.
- **Human Nutrition and Dietetics** - Weighting of the third and fourth year marks in determining the final mark no longer an issue – External Examiner commented that upward trajectory of marks in 4<sup>th</sup> year for some students was due to enhanced focus and commitment in 4<sup>th</sup> year and less due to the weighting
- Further elaboration to be provided on the project marking scheme given to overseas mentors to improve consistency

Feedback to External Examiners is done at Discipline level. This is done by email, informal contact and updates in advance of the examinations in the following year.

### School of Nursing & Midwifery

None



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### **School of Pharmacy & Pharmaceutical Sciences**

None

### 3.2.4 Escalations – Postgraduate (from External Examiner reports / COE meetings)

#### **School of Dental Science**

None

#### **School of Medicine**

Inadequate staffing on MSc in Global Health – reported to School by Director of PG T&L. However, School cannot appoint additional staff within current budgets. This situation is ongoing

#### **School of Nursing & Midwifery**

None

#### **School of Pharmacy & Pharmaceutical Sciences**

None



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### 3.2.5 Repeat Issues – Postgraduate (from External Examiner reports / COE meetings)

#### **School of Dental Science**

None

#### **School of Medicine**

Use of a full scale when correcting exams – School supports this via the Director of PG T&L

Issues with English language proficiency of some students – School encourages careful selection of students on academic grounds. The possibility of a short written assignment as part of the application process for some courses is being considered.

External examiner was advised that students for which English is not their first language are encouraged to avail of an academic writing course arranged by Trinity.

#### **School of Nursing & Midwifery**

None

#### **School of Pharmacy & Pharmaceutical Sciences**

None



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### 3.2.6 Positive aspects and enhancements – Postgraduate (from External Examiner reports / COE meetings)

#### **School of Dental Science**

- The Special Care Dentistry external examiner recommended that the student have more frequent meetings with the Programme Director.  
Agreed and implemented. This change was recognised in the final report of the external examiner.
- The Diploma in Conscious Sedation external examiner recommended that the students complete a clinical audit as part of the programme in place of the “Critical Reading” section of the course.  
Agreed and clinical audit is now a part of the course.

#### **School of Medicine**

Improved quality and quantity of student feedback

Improvements to assessment procedures, e.g. timing of assignments, standardisation of exam papers and time allowed.

#### **School of Nursing & Midwifery**

None

#### **School of Pharmacy & Pharmaceutical Sciences**

None.



### 3.3 Accreditation Cycle

Table 3.3

<b>School of Dental Science</b>					
Accreditation body	Name of Programme accredited	UG/PG	Last Accreditation Visit	Outcome achieved*	Next Visit Due
Dental Council	Bachelor in Dental Science	UG	2012	Accredited	2017
Dental Council	Diploma in Dental Hygiene	UG	24/10/2016	Verbally informed that course is accredited, but awaiting formal written report.	2021
Dental Council	Diploma in Dental Nursing	UG	24/10/2016	Verbally informed that course is accredited, but awaiting formal written report.	2021
Dental Council	National Dental Nursing Training Program	UG	24/10/2016	Verbally informed that course is accredited, but awaiting formal written report.	2021
<b>School of Medicine</b>					
Accreditation body	Name of Programme accredited	UG/PG	Last Accreditation Visit	Outcome achieved*	Next Visit Due
CORU	BSc in Radiation Therapy [BSc Ther.Rad]	UG	15-17/06/2015	Successfully achieved accreditation	2020
Association of Occupational Therapists of Ireland (AOTI) (on behalf of the World federation of Occupational Therapists, WFOT)	Four Year Occupational Therapy Degree (BSc, Cur. Occ)	UG	4-5/05/2016	Pending	2021
Association of	One year Occupational Therapy	UG	February 2013	Full Approval	2018



Occupational Therapists of Ireland (AOTI) (on behalf of the World federation of Occupational Therapists, WFOT)	Degree programme (Singapore)				
CORU	Four Year Occupational Therapy Degree (BSc, Cur. Occ)	UG	20-22/10/2015	Recommend Approval of the 4 year programme for state registration	2020
Irish Society of Chartered Physiotherapists	BSc Physiotherapy	UG	30/09/2016	Received Accreditation	2020
Irish Society of Chartered Physiotherapists	One Year Physiotherapy Degree Programme (Singapore)	UG	June 2013	Received Accreditation	Unknown
CORU	BSc Physiotherapy	UG	N/A	N/A	First visit due 2017
Medical Council	MB, BCh, BAO (Medicine)		2011	Successfully achieved accreditation	2018
CORU	BSc (Hons) Nutrition and Dietetics (Trinity/DIT)	UG	May 2015	New programme introduces in 2016-17; process has commenced with CORU on accreditation.	2017



Nursing and Midwifery Board of Ireland (NMBI)	Diploma in Cognitive Psychotherapy		Category II approval granted in April 2015	Category II approval until 2020	2020
Nursing and Midwifery Board of Ireland (NMBI)	Master of Science in Cognitive Psychotherapy	PG	Category II approval granted in 2016	Category II approval until 2020	2021
Institute of Physics and Engineering in Medicine	Physical Sciences in Medicine		2009	Accredited (to and including 2015-16)	Course no longer running
Institute of Biomedical Science	MSc in Clinical Chemistry	PG	July 2013	Successfully achieved accreditation	2017
Academy of Clinical Science and Laboratory Medicine	MSc in Clinical Chemistry	PG	November 2016	Successfully achieved accreditation	2021
<b>School of Nursing &amp; Midwifery</b>					
Accreditation body	Name of Programme accredited	UG/PG	Last Accreditation Visit	Outcome achieved*	Next Visit Due
Nursing & Midwifery Board of Ireland	Nursing UG (General, Mental Health, Intellectual Disability)	UG	2016/2017	School is awaiting the written reports for the 2016 accreditation visits.	2021/2022
Nursing & Midwifery Board of Ireland	Childrens & General UG	UG	2016/2017	School is awaiting the written reports for the 2016 accreditation visits.	2021/2022



Nursing & Midwifery Board of Ireland	Midwifery UG	UG	2016/2017	School is awaiting the written reports for the 2016 accreditation visits.	2021/2022
Nursing & Midwifery Board of Ireland	Higher Diploma in Midwifery		2011/2012	Accredited	2016/2017
Nursing & Midwifery Board of Ireland	Higher Diploma in Children's Nursing		2011/2012	Accredited	2016/2017
Nursing & Midwifery Board of Ireland	The majority of PG courses in the School are accredited by the NMBI but do not involve an accreditation visit. Usually accreditation is given on a 5 year basis on submission of the curriculum document. There are various dates for submission of course curricula across the range of courses.				
<b>School of Pharmacy &amp; Pharmaceutical Sciences</b>					
Accreditation body	Name of Programme accredited	UG/PG	Last Accreditation Visit	Outcome achieved*	Next Visit Due
Pharmaceutical Society of Ireland (PSI)	Five Year Pharmacy (Integrated) Programme	Integrated	February 2016	Accredited years 1 and 2 of the new programme	March 2017

*\*Outcomes include Accredited, Accredited with Conditions, Not Accredited*

<b>Summary of Professional Accreditation Issues Raised in 2016 – School of Dental Science</b>	
<b>Escalations, Repeat Issues, Positive Enhancements</b>	School is awaiting the written reports for the 2016 accreditation visits.



<b>Summary of Professional Accreditation Issues Raised in 2016 – School of Medicine</b>	
<b>Escalations</b>	<p>Occupational Therapy – AOTI accreditation following the 2016 accreditation review is still pending. Approval was not granted following the accreditation visit based on the unacceptable staff:student ratio for the four-year undergraduate programme. The unacceptable staff student ratio was the only condition blocking accreditation.</p> <p>The Head of Discipline has been working with the School of Medicine in rectifying this issue and progress has been made:</p> <ul style="list-style-type: none"><li>• Approval was granted for a joint Assistant Professor post in Psychology (shared between Occupational Therapy and Radiation Therapy, 70:30 split). The post was successfully recruited to in September 2016 but the successful candidate has to serve out notice and will be in post in January 2017.</li><li>• Head of Discipline has liaised with Director of Undergraduate Teaching and Learning and the School Manager to ensure that intake to the undergraduate Occupational Therapy programme does not exceed 40 students. An exceptionally high student acceptance rate in 15/16 meant that 47 entered Year 1 of the programme. This has been discussed by the School and Academic Registry. Student intake to Year 1 in 2016/2017 was 40 students, which will help to balance the staff: student ratio across the programme.</li><li>• Head of Discipline is currently working on filling the Practice Educator Coordinator post within the Discipline (vacated in August 2016 following a two year career break).</li></ul> <p>Addressing the staffing shortages and preventing over supply of students should assist in addressing the staff:student ratio issues raised by the accreditation body.</p> <p>Head of Discipline has sent two written reports to the accreditation body (AOTI) to update them on progress to rectify the condition of accreditation, 27/06/2016 and 26/10/2016.</p> <p>Human Nutrition and Dietetics – As the new programme was introduced across all years from 16/17, CORU indicated that it would now focus its accreditation on the new programme. The documentation process has already begun with an accreditation visit from CORU expected to take place in 2017. In the interim, work is ongoing on implementing relevant recommendations from the previous CORU review and from the recent Programme Review.</p>
<b>Repeat Issues</b>	Occupational Therapy – Problems with the staff:student ratio was raised by the accreditation body on previous



	accreditations and in yearly reviews.
<b>Positive aspects and enhancements</b>	<p>Occupational Therapy - The AOTI accreditation process placed a very large extra demand on staff within the Discipline. In Occupational Therapy this was particularly problematic as there were two external accreditations (AOTI and CORU) within the same academic year with both accreditation bodies requiring different paperwork etc. It is likely that the requirement for two separate accreditations for the occupational therapy programme is likely to continue in the future.</p> <p>A positive outcome of both accreditations is that the course content and structure was commended by both accreditation bodies.</p> <p>The AOTI accreditation highlighted the ongoing staff:student ratio deficit and assisted in getting approval for the joint Assistant Professor in Psychology post between the Disciplines of Occupational Therapy and Radiation Therapy, a development which will enhance both programmes in the future.</p> <p>Physiotherapy – Discipline fully met all conditions for full accreditation as specified by the ISCP following from their initial visit in 2015, and which was confirmed during a follow up visit on 30<sup>th</sup> September 2016 and in writing by ISCP on 14<sup>th</sup> December 2016. ISCP commented on the significant cultural change within the discipline and the move towards incorporating the recommendations from previous accreditation meetings. They also commented on the evidence of collaborative working and staff engagement, which they acknowledged that the Head of Discipline and Deputy Head of Discipline have been pivotal in progressing.</p>
<b>Summary of Professional Accreditation Issues Raised in 2016 – School of Nursing &amp; Midwifery</b>	
<b>Escalations, Repeat Issues, Positive Enhancements</b>	School is awaiting the written reports for the 2016 accreditation visits.
<b>Summary of Professional Accreditation Issues Raised in 2016 – School of Pharmacy &amp; Pharmaceutical Sciences</b>	
<b>Escalations</b>	The accreditation team had issues around the recruitment - in particular the filling of a Chair in Clinical Pharmacy and recruitment and training of pharmacy tutors. They also required revisions to our Teaching and Learning Strategy, Curriculum and Assessment strategy to reflect the efforts made by the School of



	<p>continuing to develop its approach to integration of the programme. They also required more information on how we determine that our students are ready for structured practice placements that take place throughout the programme.</p> <p>The complete summary report can be accessed from the following link. <a href="http://www.thepsi.ie/gns/education/accreditation/accreditationreports/FiveYearMastersDegreeProgramme.aspx">http://www.thepsi.ie/gns/education/accreditation/accreditationreports/FiveYearMastersDegreeProgramme.aspx</a></p> <p>The School addressed these issues in its follow-up response to the accreditation report in September 2016.</p>
<b>Repeat Issues</b>	Not applicable – this was the first review of the new integrated MPharm programme.
<b>Positive aspects and enhancements</b>	Greater emphasis will be placed on Integration of module material in each year of the programme.

### 3.4 Quality Review Cycle

Table 3.4

School or Programme	Date of Quality Reviews	Next due
School of Dental Science	2008-09	2016-17
School of Pharmacy & Pharmaceutical Sciences	2008-09	2016-17
School of Nursing & Midwifery	2009-10	2017-18
School of Medicine (Therapies only)	2011-12	2018-19
School of Medicine (Excluding therapies)	2012-13	2019-20



### **Recommendations of the Quality Review – School of Pharmacy & Pharmaceutical Sciences 2016**

The School of Pharmacy and Pharmaceutical Sciences Review team carried out the review over the months of November and December 2016. A site visit was preceded by the provision of documentation and a teleconference. The Review team were impressed with the leadership of the School, the School's new undergraduate programme and the taught post graduate programmes. Staff appeared to be collegiate and the taught students were very happy with the provision. The School has had to operate under significant financial pressure in recent years and this has impacted negatively on certain areas of activity.

#### Recommendations

1. Strategic Direction and Planning – The School needs the support of College offices in the area of student recruitment and online education, in order to deliver on its strategic plan. It is also important for the appointment of the current Instructional Designer, located within the School, to be renewed.
2. Organisation and Management – The School needs to undertake succession planning to ensure that there is an unbroken chain of excellent leadership and clarify certain reporting lines (e.g. among the administration staff).
3. Teaching and Learning – There is an urgent need for the School to reduce student contact hours to allow research to flourish and an equally urgent need for the College to address the revenue allocation formula such that it serves as an incentive to develop new and grow existing programmes.
4. Research Activity – The School needs to give this area attention by incentivising staff and supporting staff to apply for and win research grants. A research culture of seminars, research group meetings and a graduate school like environment for its PhD students are vital at this point.
5. Resources - The College should consider providing funds for the appointment of at least two new members of academic staff in addition to current vacancies. Funds are urgently needed to pump prime research activities and maintain the equipment base.
6. Communications and Marketing – A communication and marketing strategy is required.

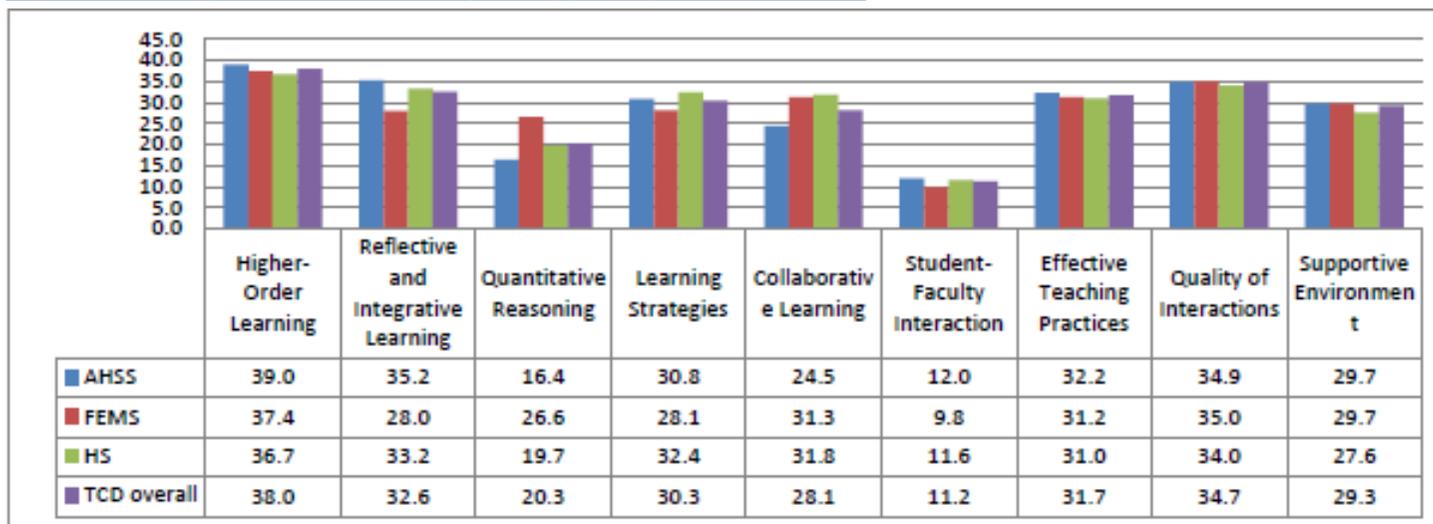




### 3.6 Irish Survey of Student Engagement

Table 3.6.1: Key stats from Faculty ISSE Report

		AHSS	FEMS	HS	TCD total
Status	Y1	406	312	204	922
	YF	266	163	132	561
	PGT	236	49	43	328
	<i>Total</i>	908	524	379	1811
Sex	Male	287	265	87	639
	Female	621	259	292	1172
Mode of Study	Full-Time	872	498	361	1731
	Part-time/Remote	36	26	18	80
Irish or non-Irish	Irish	722	483	313	1518
	Non-Irish	186	41	66	293
Programme Type	Undergraduate Cert/Dip	4	4	3	11
	Undergraduate Hon Deg	668	471	333	1472
	Graduate Cert/Dip	18	16	5	39
	Masters Taught	218	33	38	289





### 3.7 International Student Barometer

Table 3.7.1 Key stats from ISB Report – Trinity College Health Sciences

<b>LEARNING SATISFACTION</b>	<b>% Satisfied</b>		
<b>Learning elements</b>	<b>Global ISB</b>	<b>Europe</b>	<b>TCD</b>
Employability	<b>79%</b>	<b>72%</b>	73%
Course organisation	<b>85%</b>	<b>78%</b>	62%
Course content	<b>89%</b>	<b>87%</b>	83%
Quality lectures	<b>89%</b>	<b>87%</b>	81%
Topic selection**	<b>88%</b>	<b>81%</b>	84%
Good teachers	<b>88%</b>	<b>85%</b>	82%
Managing research**	<b>89%</b>	<b>83%</b>	83%
Careers advice	<b>73%</b>	<b>59%</b>	55%
Research	<b>88%</b>	<b>85%</b>	83%
Expert lecturers	<b>93%</b>	<b>92%</b>	93%
Work experience	<b>70%</b>	<b>60%</b>	51%
Assessment	<b>89%</b>	<b>85%</b>	81%
Performance feedback	<b>85%</b>	<b>80%</b>	70%
Learning support	<b>89%</b>	<b>84%</b>	82%
Laboratories	<b>90%</b>	<b>90%</b>	89%
Language support	<b>89%</b>	<b>86%</b>	91%
Marking criteria	<b>85%</b>	<b>79%</b>	68%
Technology	<b>90%</b>	<b>87%</b>	76%
Opportunities to teach**	<b>73%</b>	<b>72%</b>	61%
Learning spaces	<b>89%</b>	<b>89%</b>	77%
Virtual learning	<b>91%</b>	<b>87%</b>	79%
Physical library	<b>90%</b>	<b>84%</b>	88%
Multicultural	<b>90%</b>	<b>89%</b>	87%
Online library	<b>91%</b>	<b>86%</b>	85%
Class size	<b>88%</b>	<b>85%</b>	85%
Academics' English	<b>92%</b>	<b>89%</b>	93%