Quality Review Procedure for Higher Education Institutions (Linked Providers) delivering programmes of education and research leading to Trinity College Dublin, University of Dublin Awards.

1. Context
Trinity College Dublin, the University of Dublin, as a Designated Awarding Body (DAB) has prescribed responsibilities under the Quality & Qualifications Act 2012 and QQI Sector Specific Guidelines for Designated Awarding Bodies with respect to arrangements with higher education institutions (HEIs) delivering programmes of education and/or research leading to Trinity College Dublin, University of Dublin Awards. Under the Act these providers are referred to as Linked Providers’.

Specifically, §32 (1b) of the Act requires Trinity to include in its procedures, a procedure to review ‘the effectiveness of the implementation by linked providers’ of procedures established under Section 28 relating to Quality Assurance and §37(1a) requires that such reviews be conducted ‘at least once every seven years’.

Prior to the application of this Quality Review Procedure, Linked Providers’ must have completed the pre-requisite steps outlined in the Approval of Linked Provider Quality Assurance Procedures (June 2019).

2. Purpose
The purpose of this procedure is to:

2.1. Demonstrate compliance with the statutory responsibilities by Trinity and the Linked Providers under the QQI Act 2012 (§37(2) and relevant QQI Quality Assurance Guidelines, Policies and Codes.

2.2. Demonstrate compliance with existing Memoranda of Understanding (MOU) arrangements between Trinity and the Linked Providers’, including adherence to pertinent Trinity College Policies or other relevant instruments.

2.3. To inform Linked Provider institutions of the process and elements to be considered in the conduct of a review.

2.4. To assure Trinity, stakeholders and the broader public that the quality and sustainability of education provision provided by the HEI and the governance that guides that provision is in good standing with legal and governance frameworks in Ireland and in other jurisdictions in which the Linked Provider operates (if applicable).
3. **Scope**

3.1. This procedure applies to Linked Provider institutions with whom Trinity has entered into arrangements with respect to validated programmes of education and research.

3.2. The scope of the review in both cases is (i) at the institutional level and (ii) at the academic programme level and is informed by the scale and complexity of the academic provision (Taught and/or Research).

3.3. It will include at a minimum the Core Statutory Quality Assurance Guidelines (April 2016) that applies to all higher education providers and incorporates the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG 2015) in addition to any:

- QQI topic specific guidelines and codes, as appropriate (Blended; Research);
- QQI Policies (Access Transfer and Progression Policy Restatement 2018; Code of Practice for providers of programmes of education and training to international learners (2015));
- Legal, financial and other governance/regulatory instruments with which the Linked Provider is required to be compliant in Ireland and in other jurisdictions in which they operate;
- Trinity policies and instruments of governance e.g. signed Memoranda of Understanding, contracts, approved programme proposals.

A draft generic Terms of Reference is outlined in Appendix A

4. **Principles** (QQI Core Guidelines §1.6, p.2)

4.1. Quality and its assurance are the primary responsibility of the provider. It involves planning, defining, encouraging, assessing and improving practice.

4.2. Successful quality assurance systems are efficient, well communicated and integrated into the normal activities of the provider and are fit for context and purpose.

5. **Procedure**

5.1. **Notification**

5.1.1. Following initial approval by Trinity of an existing Linked Provider’s quality assurances procedures under §33(1) of the Act, Trinity will negotiate a timeframe for a quality review with each Linked Provider considering existing commitments under agreed Memoranda of Understanding, the timing of any other external review events e.g. statutory and professional body accreditation, the provider’s strategy with respect to an application for the proposed International Education Mark and the Trinity schedule for quality reviews.

5.1.2. The timing for each subsequent review will be guided by the seven-year cycle as prescribed by the Act; the maturation of agreed Memoranda of Understanding with each Linked Provider; and any other external or internal strategic intent that may arise e.g. application for the International Education Mark. For subsequent reviews the provider will be notified in writing approximately 18-24 months in advance of review.
5.2. **Payment**

5.2.1. The direct and indirect costs of the External Quality Review will be met in full by the Linked Provider. The estimated costs associated with a quality review will be agreed in a Schedule to the existing Agreement between the Trinity and the Linked Provider, with the actual costs billed as part of the annual invoice by Trinity to the Linked Provider in the year in which the actual costs are/are expected to be incurred.

5.3 **Nomination and Selection of Reviewers**

5.3.1. The Principal/Director of the Linked Provider institution will be asked to bring forward Nominations for External Reviewers. A minimum of twelve nominees should be considered. Depending on the scope and complexity of the Linked Provider, nominees should come from top-ranked Universities (QS world and subject ranking) and be balanced in terms of geography, gender and experience (See Reviewer Nomination Form attached as Appendix C). Academic nominees should be at professorial level and should not have any conflict of interest with the institution to be reviewed i.e. close association with the institution or its staff in a personal or professional capacity e.g. acted as an external examiner or jointly published in the last five years or have participated in a recruitment process for a position within or linked to the institution under review. Specific features of provision unique to a Linked Provider may require additional consideration.

5.3.2. The Standards and Guidelines for Quality Assurance in Higher Education (ESG 2015) Part 2, Standard 2.4 requires (a) student member(s) to be included in the review panel. Trinity will request nominees from students who have completed training under the National Student Engagement Programme (NStEP).

5.3.2. The completed and signed nomination forms should be returned to the Quality Office, Trinity College with sufficient background information about the proposed Reviewers to allow an informed decision to be made by the Selection Panel. The Linked Provider institution should not contact potential nominees with a view to canvassing their interest in participating in the review. All contact with the nominees is to be made via the Quality Office e.g. to request a detailed CV or résumés.

5.3.3. The Selection Panel will be chaired by the Vice-Provost/Chief Academic Officer, Trinity College Dublin and comprise the Dean of the relevant Trinity Faculty, the Academic Secretary and the Quality Officer.

5.3.4. The Selection Panel will select three to four external reviewers along with appropriate reserve candidates informed by the scope of the review, as outlined above. The Selection Panel may also request that a broader search be conducted by the Quality Office to identify additional nominees. In this instance, a second meeting of the Selection Panel may be required to ascertain the final composition of the Review Team.

5.3.5. The outcome of the selection process will be communicated to the Linked Provider institution.

5.3.6. The Quality Office will contact first preference candidates to formally invite them to participate in the review. If they are not available to participate, the reserve candidates will be approached.
5.3.7. Once the composition of the review team has been confirmed, the Quality Office will liaise with the Linked Provider institution to identify suitable dates for the review and align these with the Reviewers’ preferences.

5.3.8. The Quality Office will provide a draft timeline to the Linked Provider institution based on the confirmed date of the review, detailing milestones to be achieved in the lead up to the quality review.

5.4 Self-Assessment Exercise

5.4.1 Scope

(i) The self-review exercise is designed to take a critical look at the performance and direction of the higher education institution in terms of its mission, strategy and education provision.

(ii) It specially reviews the effectiveness of implementation of Linked Provider quality assurance policies and procedures as approved by Trinity under the Approval of Linked Provider Quality Assurance Procedures.

(iii) It should include a critical assessment of the governance; management structures; education, research and other provision; internal and external communications and relationships; and human, financial and infrastructure resources.

(iv) It culminates in the development of a Self-Assessment Report (SAR) which forms the principal source of information for the External Review team prior to their arrival on-site.

(v) In order to ensure the SAR is fit for purpose it is important to respond to the agreed scope in terms of the following lenses:
   - Compliance – mandatory legislative, regulatory, statutory requirements and reporting, nationally and internationally;
   - Quality assurance - governance frameworks i.e. institutional responsibility as evidence through committees, policies/procedures/processes, standards, data collection, monitoring and reporting;
   - Quality enhancement – demonstration of effectiveness, improvement themes/projects/initiatives.

5.4.2 Development of the Self-Assessment Report (Refer Appendix B)

(i) The SAR should have a strategic focus, be forward looking, and provide an appraisal of the quality assurance processes that support the key areas outlined in the QQI Core Statutory Quality Assurance Guidelines (April 2016), agreed sector and topic specific quality assurance guidelines, policies and codes that apply to the Linked Provider context and provision.

(ii) Responsibility for the development of the SAR and engagement of internal and external stakeholder participation in the development of the SAR and in the site visit for the review rests with the Linked Provider.

(iii) It is important that students are included amongst the key internal stakeholders and that their feedback and input is elicited through surveys, focus groups, and class representatives. External stakeholders may include alumni, employers, professional practitioners, strategic partners etc.
(iv) The main body of the SAR should be between 50 - 70 pages (excluding the appendices). It should include a description of the process used to develop the report and optimise the use of summary and graphical data (tables, graphs and process maps) and web-links where possible to communicate inputs, outputs and outcomes of quality assurance processes. The optimal period for data arrays is five years.

(v) It is highly recommended that the SAR should be proof-read by an independent person prior to submission of the final SAR to the Trinity Quality Office, in accordance with the agreed timelines.

5.4.3 Development of the Review Schedule

(i) A schedule of meetings is developed in consultation with the Quality Office. The design of the Review Schedule will be informed by whether the review is to be conducted as a physical or virtual review.

(ii) The agreed final schedule is to be provided in accordance with agreed timelines and takes account of the following principles:

- Check that key persons/representatives referred to in the SAR have been included in the review schedule.
- Larger meetings (max 45 minutes in duration) with groups of representatives such as Governance, Management, Senior/Junior Teaching Staff, Students (UG/PG), Alumni, Stakeholders/Partners etc. are preferred over shorter meetings with 1-2 attendees. Forum style meetings which allow for themed discussions with groups should be included where possible.
- External stakeholders should be provided with sufficient notice of their meeting, and the date, time and venue should be confirmed again closer to the review date.
- Sufficient private reflection time must be allocated in the schedule to allow the External Review team to process information between meetings and allow for changes to the schedule.
- Time allocated to report writing should be protected to allow the External Review team to prepare for presentation of findings, prior to completion of the review.
- Ensure that a tour of relevant facilities is included in the schedule.
- Allow transfer time between venues and, if relevant, are multiple campus sites.

(ii) In circumstances where a ‘virtual’ review is required under public health regulations, guidance in Trinity’s Virtual Review Procedure will inform the development of the review schedule and the conduct of the review visit.

5.4.4 Pre-review visit preparation

(i) Trinity Quality Office will disseminate the final SAR and appendices and the review schedule to the Review Team in accordance with the agreed timelines.

(ii) A pre-review visit by the Chair of the Review Team and Trinity Quality Office will be scheduled and include a teleconference/video-conference call with the remaining review team members to review the documentation received, respond to any points of
clarification, request additional information and agree any changes to the review schedule prior to the arrival of the review team for the on-site visit.

5.5 On-site visit

5.5.1 Trinity College is responsibility for pre-review arrival arrangements (flights, accommodation, airport transfers and evening meals).

5.5.2 The Linked Provider is responsible for on-site catering, reserving an appropriate base room for the review team's use during the on-site visit and additional break-out rooms for meetings on the review schedule.

5.5.3 In the case of a ‘virtual’ review, Trinity’s platforms (MS Teams and/or Zoom) will be used for the conduct of review meetings. The Trinity Quality Office staff will facilitate access to meetings by approved attendees and manage any connectivity issue that may arise.

5.5.4 Trinity will arrange an independent note-taker to record meeting outputs. These notes are for the use of the review team, as an aide-memoir in writing the review report and are not shared with the Linked Provider.

5.5.5 The Linked Provider is responsible for ensuring full attendance at meetings as per the agreed schedule, facilitating any request for a change to the schedule and responding to information requests from the review team during the onsite review.

5.5.6 The onsite review culminates in a presentation/feedback session to the Linked Provider on the review outcomes and main themes to be pursued in the review report. The presentation can be in any format preferred by the review team i.e. verbal or PowerPoint presentation. It is not an interactive session but is intended to continue/maintain the momentum generated by the review until such time as the final report is available for dissemination following approval by Trinity College Quality Committee and University Council.

5.6 Review Report

5.6.1 The External Review Team will be asked to submit a draft report to the Quality Office within three weeks of the site visit.

5.6.2 The Quality Office will forward a copy of the draft report to the Principal/Director of the Linked Provider institution who will be asked to communicate any factual accuracy corrections to the Quality Office within one month, as per §37(7) of the Act.

5.6.3 The Quality Office will communicate any factual accuracy comments to the reviewers and will request that a final report be submitted within two weeks.

5.6.4 The Quality Office will forward a copy of the final report to the Principal/Director of the Linked Provider institution who will be asked to provide a response to the review report, which should ideally be no longer than 2-4 A4 pages. The response should not address the recommendations individually, as this is the purpose of the Implementation Plan.

5.6.5 The Reviewers’ report will be considered in the first instance by the Trinity Quality Committee, the Principal/Director of the HEI will be invited to attend the Quality Committee to speak to the review report.

5.6.6 Following Quality Committee, the review report and the responses will be forwarded to University Council and College Board for consideration and approval.

5.6.7 Subject to approval by the relevant Principal Committee, the Reviewers’ report will be published in compliance with the QQI and ESG Guidelines on the Trinity website.

5.6.8 Under §37(9) Trinity is required to provide a copy of the report to QQI.

5.7 Post Review Follow-up

5.7.1 Following the approval of the Review Report, the Linked Provider will be asked to draw-up an Implementation Plan (IP) to address the recommendations in the review report within an agreed timeframe, giving priority to any identified areas of non-compliance or conditions contained within the report. The Implementation Plan will be submitted to the Quality Committee in the first instance and from there to University Council and College Board for approval.

5.7.2 Within twelve months of approval of the Implementation Plan a formal Progress Report will be submitted to Quality Committee, and then to Council and Board.

5.7.3 An informal report on progress against the Implementation Plan and Progress Report will form part of the scope of the annual monitoring conducted at the annual strategic dialogue meeting.

5.8 Appeal Procedure

5.8.1 Please refer to the Trinity College Linked Provider Appeal Procedure in the case of a quality review procedure for an existing Linked Provider where the outcome of a review under §38 and §39 of the Act may result in an Appeal as a result of a decision by Trinity to withdraw approval of a Linked Providers’ quality assurance procedures. The College Registrar is the contact point for Linked Provider Appeals.

5.9 Evaluation of Review Process

5.9.1 Following each review, the Quality Office will conduct an evaluation of the process from the Linked Provider and from the external review team to inform the continuous quality improvement of the procedure and the process.

6. Responsibility

The responsibility for this procedure lies with the Quality Officer, Trinity College Dublin.

7. Legislation and Regulation

7.1 Quality & Qualifications Act 2012
7.2 Core Statutory Quality Assurance Guidelines
7.3 Sector specific quality assurance guidelines for Designated Awarding bodies
7.4 Code of Practice for providers of HE programmes to international learners
7.5 Topic Specific quality assurance guidelines for Research Degree Programmes
7.6 Policy for Collaborative Programmes, Transnational Programmes and Joint Awards
7.7 Required Procedures for Access, Transfer and Progression
7.8 Principles and operational guidelines for Recognition of Prior Learning
8. **Related Documents**

8.1. [Approval of Higher Education Institutions Quality Assurance Procedures](#)
8.2. [Linked Provider Appeals Procedure](#)

9. **Document Control**

9.1 Date of initial approval: June 2022

9.2 Date policy revised: January 2023

9.3 Date policy effective from: February 2023

9.4 Date of next review: Academic Year 2026/2027
Appendix A: Terms of Reference for Quality Review of a Higher Education Institution seeking or receiving validation from Trinity College Dublin, the University of Dublin.

Purpose: The purpose of the quality review is to:

1. To provide a structured opportunity for the Linked Provider to critically reflect on its strategies in relation to its education, training, research provision in the national and international context and in terms of its relationship with Trinity College Dublin, the University of Dublin;
2. To benefit from a constructive commentary by external reviewers that are experts in their field at a senior academic level and to benchmark against peer HEIs with respect to their education, training, research provision;
3. To assure compliance with the QQI Act 2012, the European Standards Guidelines (2015), QQI Core Quality Assurance Guidelines and relevant QQI topic quality assurance guidelines, policies and codes and other legal instruments that govern the operation of its functions as a legal entity in Ireland and in other jurisdictions.

Terms of Reference

The Review Panel is asked to provide a report that includes an assessment of the following gained from documentary evidence received in advance of the review and through its observations and schedule of meetings during the on-site visit:

1. The level of compliance by the Linked Provider with the Core Statutory Quality Assurance Guidelines and relevant topic specific quality assurance guidelines, QQI policies and/or codes that apply to its programmes of education, training, research and related provision.
2. The governance of the Linked Provider assures compliance with other legal and regulatory frameworks that apply to its operations in Ireland and in other jurisdictions in which it operates i.e. legal, financial, contractual, professional and statutory body accreditation standards.
3. The standard of programmes of education and research provision meet the level of the relevant Award on the National Framework of Qualifications.
4. The effectiveness of implementation of Quality Assurance Procedures as approved by Trinity College Dublin.
5. The standard of the learning environment provided by the Linked Provider and its agents (including infrastructure and equipment, Library and IT learning resources, supports to students and staff in professional placement contexts) will normally be on par with Trinity’s and meet a minimum education standard to be verified by the external review panel through their tour of educational facilities and observations during the site visit;
6. Key areas of strength or innovation that meet or have the potential to meet national and international best practice.
7. Key areas for improvement, in particular any areas of compliance that pose a risk to the sustainability of education provision in Ireland or overseas; to the reputation of the Linked Provider or to Trinity as the Designated Awarding Body and which may need to inform directions under §38(1) of the Act and associated quality assurance guidelines.
Appendix B: Self-Assessment Report

1. **Governance and Management:**
   1. **Mission and Strategy (Core §1.2)**

   Outline the Linked Provider strategy with respect to the provision of education, training, research and related activities (Attach copy of current/most recent strategic plan and other relevant strategies in appendices).

   Outline any shared area of strategic cooperation between Trinity as the Designated Awarding Body and the Linked Provider.

   Outline the process used to develop and evaluate whether the institution is achieving its stated objectives e.g. stakeholder input, targets/KPIs, monitoring and review cycle, committee evaluation and review processes e.g. revisions to Terms of Reference, Committee self-evaluation surveys, external reviews/audits.

2. **Governance and management structures (Sector Specific Quality Assurance Guidelines for DABS 2016, §5.2.2).**

   Describe the composition of the governance and management structures that oversees the provision of education, training, research and related activities. Include details of the relationships across the different level of committees and representation by external and internal stakeholders including students (Attach links to published organisational chart and terms of reference of governance and management structures and role descriptions for those responsible for management of quality assurance of education, training, research and related activities)

   How does the Linked Provider evaluate whether the current governance and management structures facilitate its optimum operation and remain fit-for-purpose? What data is generated and reported to inform decision-making? Does the Linked Provider have sufficient resources (human, financial, infrastructure and equipment) to ensure sustainable provision of validated academic programmes; an optimal student experience and a safe work and study environment for staff and students? (Core §5.4)

3. **Legal, reputational and compliance requirements (Sector Specific Quality Assurance Guidelines for DABS 2016, §5.2.1).**

   Describe/define the policies, procedures and processes by which the Linked Provider assures legal, reputational and compliance requirements including reporting, in Ireland and in other jurisdictions in which it operates (if applicable).

   Include a list of legal instruments with which the Linked Provider is required to comply these should include legal entity, financial, employment, professional and
statutory body standards, funding requirements, other third party contractual requirements (Attach copies of the past three years financial statements, annual budgetary planning cycle and allocation mechanism, demonstrated ability to safeguard student fees in the context of a protection of enrolled learners event, currency and adequacy of contribution to staff pension funds; risk register etc).

4. Documented quality assurance system (Core 2.1, p. 9)

Outline the process by which staff, students and other stakeholders are involved in the development and approval of relevant policies, procedures and processes; how new or amended policies are communicated to users; how training is delivered to support implementation, where applicable, and how the outcomes of implementation are monitored and evaluated for effectiveness and enhancement (Core §2 and 4.2) (attach a link to central repository of published policies and procedures, process for development of new policies and procedures, sample of communications to users, schedule of training and of review in appendices). Consideration should be given to alignment with the following:

- QQI policy directives including the National Qualifications Framework, Access Transfer and Progression, Recognition of Prior Learning etc;
- Department of Justice & Equality Immigration Visa requirements (if applicable);
- National and European Higher Education policy frameworks e.g. Doctoral Framework; Erasmus Programme; Bologna Process.
- Third party arrangements with providers of student exchange and professional placements, staff and student health and wellbeing services;
- Service Level Agreements for IT/VLE Platform, Infrastructure and Equipment including key corporate and student systems, Student Accommodation;
- Research funding body and/or Professional and Statutory Accreditation Body requirements, as applicable.

5. Evaluation of staffing management

How are the skills, capabilities and competencies of academic and administrative staff measured and enhanced (Core §4.1); how has the HEI targeted recruitment and succession planning and vacancy management strategies to protect the quality of its education, training and research programmes; how does it ensure the quality of tutors and demonstrators, adjunct or guest lecturers?

Outline the opportunities provided for professional development of teaching staff, performance management development scheme, professional development opportunities for junior and senior staff to further in teaching and research skills, new technologies, opportunities for peer mentoring (Core §4.3 and 5.2).
2. Assessment of Taught Provision

(i) Programme overview

Outline the profile of Taught programmes offered by the Linked Provider using Table below in the appendices to the SAR.

<table>
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<tr>
<th>Prog Title</th>
<th>NFQ Level</th>
<th>Mode of Delivery</th>
<th>CAO Points (UG only)</th>
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Outline the process for new programme/stream/module approval through the shared governance arrangements that govern the validation of academic provision.

(ii) Recruitment and admissions

Provide an overview of the recruitment and admissions process, including information provision to applicants on programmes and awards; access routes for non-traditional learners, international students entering directly or under education arrangements with transnational partners, recognition of prior and informal learning, demand for programme-nationally and internationally, quotas, (Core §3.2);

(iii) Quality assurance of Taught Provision

Outline how the Linked Provider revises and updates its taught programmes to reflect, for example, the latest research/thinking in the discipline, the changing needs of society, feedback from students in terms of module/programme evaluations; feedback from external examiners, accreditation bodies and advisory bodies and employers; data such as staff:student ratios, student complaints, appeals data, grade and degree attainment statistics, student progression and completion rates (Core §3.3 and §5.1).

(iv) Supports and learning resources
How does the HEI quality assure the learning environment is fit for purpose for teaching and learning? Consideration should be given to appropriateness of learning spaces where teaching and learning occurs (lectures, seminar rooms, laboratories) including off-campus locations and those provided by professional placement providers (if applicable); (Core 5.4)

Does the HEI provide robust IT systems including virtual learning environment (VLE), use of antiplagiarism software, online access to Library resources, student portal and student record systems, timetabling, exam and room booking system?

What supports and learning resources are provided to enhance the student experience? Include reference to student orientation/induction processes for students including international, visiting or Erasmus students; supports for different cohorts of students e.g. Access, mature, RPL, international including English language supports; Student Services; Student facilities/amenities; Information for students including website, publications, and feedback from students on supports for learners.

3. **Assessment of Research Provision (if applicable):**

(i) Outline the profile of Research programmes offered by the Linked Provider using Table below in the appendices to the SAR.

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<tr>
<th>Programme Title</th>
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<td>FT PT Online Blended</td>
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<td>- Disability - SES - RPL</td>
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(ii) Quality assurance of research provision

Outline the mechanisms in place to monitor the progress of research students. Evaluate how well the procedures in relation to supervision of research students are implemented and what mechanisms are in place to facilitate confidential student feedback on the quality of research supervision.

Evaluate whether the proportion of staff available to provide supervision for research dissertations and theses meets the needs of the institution and of its students.
Outline the mechanisms in place for assuring the quality of postgraduate education align with the National Framework for Doctoral Education and the QQI Topic Specific Quality Assurance Guidelines for Research Degree Programmes (if applicable)

How are the HEI's postgraduate students supported to develop transferable skills though for example undertaking generic taught modules, opportunities to publish their work and present it at national/international conferences, opportunities to demonstrate/tutor, opportunities to commercialise their work?

5. Assessment of Research Activity
Outline the key research areas Linked Provider academics are currently pursuing and comment on the alignment of that with the intuitional strategy?

Describe the link between the institutions research and teaching activities;

How does the institution measure academic research performance or impact e.g. key research metrics; how does it benchmark its research against that of national and international comparators and use the outcomes of such evaluations to continually improve performance and impact?

What systems are in place to support staff in making grant applications, in the management of intellectual property and the commercialisation of research?

What processes are in place to ensure proper oversight of research practice, research ethics/integrity?

6. Resources:
This chapter should outline the resources (financial, human and physical) available to the Linked Provider to deliver on its mission and strategy and set the context for current and future levels of resourcing if these are anticipated to change. Key documents to include in the Appendices include financial and human resource information and condition reports of teaching and learning facilities (if available).

a. Finance & Funding: to include financial statements, annual budgeting cycle, financial risk management.

b. Staffing: to include a profile of academic staff qualifications, staff development, promotion and retention information, HR Policies, Equality, Diversity & Inclusion initiatives;

c. Infrastructure & Equipment: to include reference to accessibility of teaching spaces, research spaces, office space, and social spaces. Is budget allocated to maintenance and replacement of key equipment and infrastructure? Are there
Service Level Agreements related to this activity? How often is the effectiveness and value-for-money of these agreements reviewed or evaluated?

d. Information Management Systems (Core Std 8.1-8.7) does the Linked Provider have protocols on the provision of information to students/staff in accessible formats in accordance with the Accessible Information Policy; on managing data (store and secure) in accordance with the information compliance requirements, European General Data Protection Regulation (GDPR), Records Management and VLE Policies.
## Table of Programme/module level Quality Assurance

<table>
<thead>
<tr>
<th>No.</th>
<th>Description</th>
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<tbody>
<tr>
<td>1.</td>
<td>Approval programme/validation proposal document</td>
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<td>2.</td>
<td>Programme governance committee terms of reference</td>
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<td>3.</td>
<td>Programme regulations</td>
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<td>4.</td>
<td>Assessment framework</td>
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<td>Programme/course Handbook</td>
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<td>6.</td>
<td>Programme webpage</td>
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<td>7.</td>
<td>Learning resources – VLE, IT, Library,</td>
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<td>8.</td>
<td>External examination policy, process, details and response to findings</td>
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<td>9.</td>
<td>Annual programme/module evaluation survey, process, response rate and response actions</td>
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<td>10.</td>
<td>Applicable Professional/Statutory Accreditation Standards cycle and report and response actions</td>
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<tr>
<td>11.</td>
<td>Quality assurance of professional placement requirements (if applicable)</td>
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<td>12.</td>
<td>National Student Survey (if applicable)</td>
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<td>13.</td>
<td>Benchmarking data (if available e.g. subject ranking)</td>
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<tr>
<td>15. Achievement of PG Degree Class (count and %)</td>
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<tr>
<td></td>
<td>- Doctoral (Level 10 NFQ)</td>
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<tr>
<td></td>
<td>- PhD</td>
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<tr>
<td></td>
<td>- Other Doctoral (list titles)</td>
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<td></td>
<td>- Award of lower degree</td>
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<td>- Fail</td>
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<td>- Masters (Level 9 NFQ)</td>
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<tr>
<td></td>
<td>- Taught Masters</td>
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<td>- Masters by Research</td>
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<td>No</td>
<td>Prog 1</td>
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<td></td>
<td>Award of a lower degree</td>
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<td>Fail</td>
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<tr>
<td>17</td>
<td>Progression/retention rate</td>
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<td>18</td>
<td>Completion rate by cohort</td>
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<td>Graduation rate by cohort</td>
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<tr>
<td>No</td>
<td>HEI Level</td>
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</tr>
<tr>
<td>1</td>
<td>Staff FTE</td>
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<td></td>
<td>- Academic</td>
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<tr>
<td></td>
<td>- Administrative</td>
</tr>
<tr>
<td>2</td>
<td>Student FTE</td>
</tr>
<tr>
<td>3</td>
<td>Academic Teaching Staff/Student Ratio</td>
</tr>
<tr>
<td>4</td>
<td>Administrative Staff/Student ratio</td>
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<td>5</td>
<td>Profile and number of current vacancies</td>
</tr>
<tr>
<td>No</td>
<td>HEI Level</td>
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<tr>
<td>----</td>
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</tr>
</tbody>
</table>
| 6  | Profile and number of  
|    | - Permanent staff  
|    | - Contract staff  
|    | - Adjunct staff | |
| 7  | Profile of appointments by qualification. Total by:  
|    | - PhD  
|    | - Masters  
|    | - Other Higher Degree  
|    | - Primary Degree | |
| 8  | Profile of appointment by gender: total by FTE by  
|    | Academic Title, as per  
|    | Linked Provider  
<p>|    | xx | |</p>
<table>
<thead>
<tr>
<th>No</th>
<th>HEI Level</th>
<th>Faculty/School/Departmental Level by programme</th>
</tr>
</thead>
</table>
| 9  | Profile and number of staff by Age:  
   - 20-39  
   - 40-54  
   - 55+   |                                               |
| 9  | Profile of staff by Undergraduate Teaching & Learning responsibilities by Academic Title as per Linked Provider  
   - |                                               |
| 10 | Profile of staff by Postgraduate taught Teaching & Learning responsibilities, by Academic Title as per Linked Provider:  
   - |                                               |
<table>
<thead>
<tr>
<th>No</th>
<th>HEI Level</th>
<th>Faculty/School/Departmental Level by programme</th>
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<tbody>
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<tr>
<td>11</td>
<td>Profile of Staff by Research Supervision load</td>
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Table of disclosure of third-party contractual agreements, partnerships, arrangements

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<tr>
<th>No</th>
<th>Name of Partner &lt;link to partner website&gt;</th>
<th>Type/Nature of Partnership</th>
<th>Date signed/reviewed Status: Active/Lapsed</th>
<th>Jurisdiction</th>
<th>Link to MOA/Contract</th>
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NOMINATION OF EXTERNAL REVIEWER FOR ACADEMIC REVIEWS

One form is to be completed for each nominee by the Head of School/Programme Director/Director TRI or Linked Provider to be reviewed.

NAME OF SCHOOL/PROGRAMME TO BE REVIEWED:

(Specify if the Programme leads to a Collaborative; Dual or Joint Award and the name of the academic partner institution).

In completing this form, the following should be noted:

- Nominees should have had no formal links with the College in the last 5 years (e.g. acted as an external examiner, auditor, reviewer, collaborator, been through the College’s recruitment process etc.);
- Nominees should have no professional or personal links with staff of the School/Programme under review;
- Nominees should include representatives from the university and service/professional sectors where appropriate, with at least one coming from within Ireland. The composition of the nomination list should be balanced in terms of geography, gender, and experience;
- Nominees should come from top-ranked Universities (QS World and Subject Rankings), comparable to Trinity in terms of institution.
- Nominees should be of international standing in their field with some senior administrative experience if possible;
- A minimum of sixteen nominees should be provided by the School/Programme (with more being required for multidisciplinary Schools/Programmes) in order to allow the Working Group to select their first preference candidates as well as a number of reserve candidates;
- There should be no contact with the nominees by the School/Programme under review;

NAME AND POSITION OF PROPOSED REVIEWER:

FACULTY AND SCHOOL:

CONTACT ADDRESS, EMAIL AND TELEPHONE NUMBER:
In order that the appropriate information can be sourced to inform the Selection Panel, please provide a link to the proposed nominee’s:

(i) home institution website;
(ii) academic profile webpage;
(iii) research profile webpage.

I certify that the information given above is to the best of my knowledge correct and that the nominee has had no formal links with the School/Programme during the last five years.

Signed: ________________________________  (Head of School/Programme Director/TRI Director/)

Signed: ________________________________  (Faculty Dean/President /Director of Linked Provider)

Please complete this form and email it to Quality.Office@tcd.ie