



# University of Otago College Review

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Guidelines (internal): 2023

QA

QUALITY ADVANCEMENT

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[Quality Advancement Unit: Reviews](https://www.otago.ac.nz/quality/reviews/index.html)

<https://www.otago.ac.nz/quality/reviews/index.html>

## Six things you need to action

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1. Select your panel members and contact them to confirm availability (see section 2 The Review Proposal).
2. Set the review dates and confirm with your panel members (they will need to arrive in time for a panel dinner the evening before the review. The Review Secretary will contact panel members to arrange travel). Consider whether any panel members will need to join by Zoom and if so, what the implications are for any time zone differences. Panel members joining by Zoom must have the appropriate working environment to ensure effective participation.
3. Confirm the Terms of Reference for the review.
4. Complete the Review Proposal form.
5. Write the Self Review document.
6. Compile a list of stakeholders who you think would be interested in the review.

## Ten tips for a successful review

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1. A Review is your opportunity to make progress, effect change or consolidate.
2. Success is all in the preparation – this is the only bit of the process of which you have control.
3. Start with a careful stock take.
4. Choose people you and your staff respect for the Panel.
5. Involve all staff (academic, research, technical and professional) in the process and provide different avenues for staff to buy into the process.
6. Develop clear aspirations.
7. Familiarise yourself with the University's strategic documents.
8. Make sure your strategic plan is real, meaningful and useful to you.
9. Bare your soul in the Self Review.
10. Make sure you work with the Convenor of the Panel in advance.

# 1 Overview

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## 1.1 Quality Advancement Reviews Policy

<http://www.otago.ac.nz/administration/policies/otago029244.html>

Category	Administration and Management
Type	Policy
Approved by	Council, 13 June 1995
Date Policy Took Effect	1 July 1995
Last Approved Revision	12 August 2014
Sponsor	Deputy Vice-Chancellor (Academic)
Responsible Officer	Director, University Quality Advancement
Review Date	12 August 2019

### Purpose

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The primary purpose of quality assurance is to review and to effect improvement in the University's teaching, research and out-reach activities. To achieve this, a rolling programme of formal reviews has been instituted, building on the sequence of reviews begun in 1992.

The purpose of this Policy is to define the principles which underpin the University's formal reviews process.

### Organisational Scope

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This Policy applies University-wide.

### Policy Content

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(a) In the context of this Policy, Review will involve reviews of teaching and research programmes, as well as of the University's policies and systems for assuring quality. Some reviews may be of a Division, Faculty, Centre or other administrative unit. Some may concern the entire University.

(b) Each aspect of the University's operations will be reviewed at least once every 10 years on a non-negotiable no exceptions basis, with earlier interim and targeted reviews being undertaken as appropriate and the process initiated by the Deputy Vice-Chancellor (Academic) or upon the request of a particular group.

(c) Before a review begins, a budget will be determined, staff will receive training in the preparation of reviews, and access to useful sources of information and administrative support will be provided.

(d) The starting point for any review is the preparation of self-review materials.

(e) Each review will be in the form of a peer assessment by a panel comprising University staff as well as colleagues external to the University and members of relevant employer groups and professional bodies.

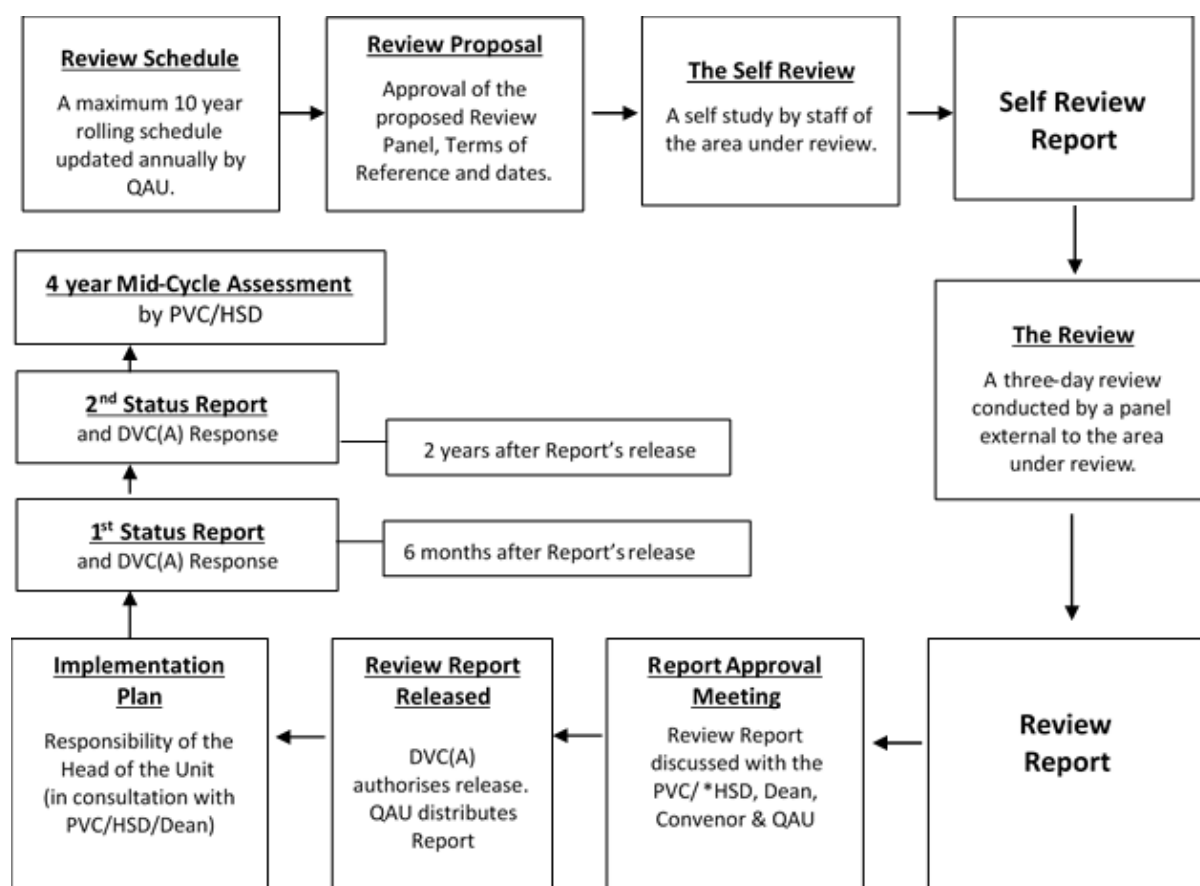
(f) Each such panel will conduct its inquiries on-campus and submit a written report to the Deputy Vice-Chancellor (Academic), who will discuss any recommendations with the Vice-Chancellor.

(g) The University will give serious consideration to a panel’s recommendations, implementing all those within its discretion and resources.

### Related Policies, Procedures and Forms

- [Payment of Review Panel Members Policy](#)
- [Quality Advancement Reviews](#)

## 1.2 Review Cycle



HSD = Head of Service Division

### 2.3.1 How are the Review Principles implemented?

The Review Principles are implemented through a variety of internal review types, over which the University has control, each with different foci and objectives. A Reviews Framework has been developed to articulate and clarify the different review types and the inter-relationships between them.

### Departmental Review

- A Review of an academic department. The foci are the activities, goals and objectives of the Department. It includes an examination of the Department's Teaching and Student Support, Research, External Engagement and Organisational Resources.
- Departments in the Otago Medical School that contribute to the MBChB must include the Clinical Insert with their ToR.

### Programme Review

- A Review of an entire academic programme (degree or diploma) in the context of; Programme Objectives, Curriculum Design, External Engagement, and Organisational Resource. The primary focus of a Programme Review is the manner in which the range of majors and papers offered (often by many departments) contribute to that Programme.

### Combined Departmental/Programme Review

- When a Programme is exclusive to a single Department or School, the Review of that Programme is undertaken in conjunction with the Departmental Review. The standard Terms of Reference for Departmental and Programme Reviews are combined and customised as appropriate.

### Administrative Review

- An Administrative Review is a review of a non-academic Division, department, section, unit, or area. The foci are the goals, objectives, core activities and services of the Administrative Unit under Review. It includes an examination of the administrative unit's structure and management, core services and activities, and physical, IT resources and health and safety issues.

### Combined Administrative/Programme Review

- Occasionally a programme of study is housed in an academic unit, such as Science Communication or a Research Centre such as the National Centre for Peace & Conflict Studies. The Review of that Programme is undertaken in conjunction with an Administrative Review. The standard Terms of Reference for Administrative and Programme Reviews are combined and customised as appropriate.

## Residential College Review

- The foci of a Residential College Review (hereafter referred to as a College) are the goals, objectives, core activities and services of the College under Review. It includes an examination of the College's ethos, management, resident welfare, and core services and activities including physical, IT resources and health and safety issues.

## Topic Review

- A Topic Review is usually initiated in response to a specific issue or concern, or upon the request of a particular group or individual (known as the sponsor). These reviews are ad hoc in nature and take place as the need arises. The Terms of Reference and selection of reviewers will vary from review to review. Special Topic Reviews may include specific areas or themes.

**NB:** The University is also subject to external reviews (i.e., accreditation reviews) owned by an external body, such as a professional association, and carried out by a group that is largely or entirely external to the institution (e.g., AMC Review, Academic Audit, CUAP Graduating Year Reviews). These external reviews are considered when the University formulates its review programme each year.

### 1.4 How are Reviews scheduled?

In its Review Principles, the University made a commitment to review each aspect of its operations at least once every ten years (as of 2015). In order to monitor this commitment, a rolling schedule of reviews has been developed. Called the Review Schedule, it serves as advance notice of those areas due for review. You can view the schedule [here](#).

### 1.5 How much will it cost?

The QAU is funded for all scheduled reviews using a per-review fixed rate.

Excluded from the central funding:

- the costs of preparing and printing the Self Review (for all members of the panel), which are to be paid for by the unit under review

Air travel and panel size can be the most significant factor in overall review costs; Quality Advancement will monitor expenses and advise if budget limits are being approached.



## 2 The Review Proposal and Terms of Reference

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### 2.1 What is the Review Proposal?

The Review Proposal outlines the Review's purpose, Terms of Reference, and membership of the Review Panel. The Review Proposal is prepared by the Head of the College concerned in consultation with the Director, Campus and Collegiate Life Services (CCLS). The Review Proposal is submitted to the Deputy Vice-Chancellor (DVC) (Academic) for approval, usually **5 – 7 months before the Panel Visit.**

### 2.2 What are the Terms of Reference?

The Terms of Reference are submitted with the Review Proposal. The purpose of the Terms of Reference is to give context and focus to the Panel's investigations. Standard Terms of Reference – **Appendix 1** – have been developed to ensure consistency of approach and investigation across Academic and Non-Academic reviews and to align the review process with the University's key strategic documents. Nevertheless, additional amended or bespoke Terms of Reference may be used to consider a special feature or features requiring investigation.

### 2.3 What is the composition and membership of the Panel?

The Panel is selected by the Head of the College under Review in consultation with the Director, CCLS and confirmed by the DVC (Academic). Formal letters of invitation and thanks to Panel Members are issued by the DVC (Academic). The aim of the Panel selection is to involve people with relevant experience and expertise, and who are representative of a cross-section of the College's 6 stakeholders.

The number of Panel Members will vary depending on the nature, size and scope of the Review and whether the review will need to allow for any panel members to attend remotely. Generally, the composition of a Panel will include as appropriate:

Convenor	A senior staff member or Emeritus Professor of the University of Otago, from outside the unit under review and preferably from a different division, with experience and expertise regarding the Terms of Reference.
International	A senior university staff member or similar level counterpart from a relevant area, and/or a senior member of an appropriate industry group, professional association or society.
A <b>maximum of four appointments</b> which should include representatives for the Tertiary or industry/sector (NZ External), Otago staff from the same and/or a different Division, and mana whenua and/or tangata whenua. Note that one person might represent more than one of these positions e.g. External and Mana Whenua	
External	One or two individuals: Normally a senior staff member of a New Zealand university or similar level counterpart from a relevant area external to the University of Otago, and/or a senior member of an appropriate industry group, professional association or society.
Internal	One or two staff members from the University of Otago. Preferably one from the home division (or, in the case of Health Sciences, the home School e.g., UOC, BMS) and one from another division.
Graduate*	A recent (maximum of three years) graduate* is preferred but if appropriate a current senior student may be appointed.
Review Secretary	Either one of the Quality Advancement Unit's Review Administrators or an appropriately experienced University of Otago Professional Staff member from outside the unit under review. This person will be appointed by the Reviews Manager, Quality Advancement Unit.
Contact Person	A member of the unit under review who has knowledge of the Review and who is the first point of contact for the Panel via the Review Secretary.

\*The Graduate must not be employed by the College under review e.g., as a tutor/demonstrator/PPF/TF.

### 2.3.1 Conflict of interest

Panel members deemed to have a conflict of interest will need to be carefully considered. Panel members should declare any perceived and/or potential conflict of interest to the rest of the Panel.

### 2.3.2 External panel members

QAU have prepared an information sheet for units under review to send to prospective external panel members that outlines the process, their responsibilities and time commitment should they choose to take on the role. This sheet is available, as a PDF, on the QAU website and included in the Appendices. Refer also to the Policy on Payment for Review Panel Members.

### **2.3.3 Graduate/Senior Student Panel Members**

QAU have also prepared an information sheet for units under review to send to prospective graduate panel members that outlines the process, their responsibilities and time commitment should they choose to take on the role. This sheet is available, as a PDF, on the QAU website and included in the Appendices. Refer also to the Policy on Payment for Review Panel Members.

## **3 Key participants in the review process: roles and responsibilities**

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### **3.1 The Panel**

#### **3.1.1 Convenor**

The Convenor is the primary point of contact between members of the Review Panel and the Director, CCLS. For a key task list, please refer to **Document A**.

#### **3.1.2 Panel Members**

Panel Members are expected to serve on the Panel for the duration of the review (normally three full days) and to assist the Convenor in the drafting of the Report. Following the receipt of the Self Review, Panel Members may, through the Convenor, request additional information and provide input into the Panel Visit Programme. For a key task list, see **Document A**.

#### **3.1.3 Review Secretary**

The Secretary will work with the Convenor, providing organisational, administrative, and secretarial assistance before, during and after the Review. Duties include arranging travel and accommodation for external Panel Members, booking a venue for the Review, publicising the Review, calling for submissions, collating submissions, drafting invitations to meet with the Panel, distributing all written materials to the Panel, catering arrangements, attending Panel meetings and interviews, and taking notes during the Panel visit. The Secretary will also provide any other administrative support as required by the Convenor and Panel members.

### **3.2 The Department**

#### **3.2.1 Heads of Colleges**

Heads of Colleges are the immediate leaders of the area under review and will be expected to consult with the Director, CCLS on the panel composition and the Terms of Reference for the Review.

Heads also have responsibility for:

- selecting the Panel and confirming availability.
- confirming dates of the Review.
- facilitating the preparation of the Self Review to the Panel (via the Secretary, at least four weeks prior to the Review).
- identifying key stakeholders and individuals who might appreciate an invitation to give a submission to the Review;
- liaising with the Secretary on administrative arrangements as required.

Post Review, the Head will be expected to consider and implement the recommendations of the Panel and to report on progress as required.

### 3.3 The University

#### 3.3.1 DVC (Academic)

The Vice-Chancellor (VC) has delegated authority for the overall direction of the University's rolling programme of formal reviews to the DVC (Academic) as articulated in the Guiding Principles for the Conduct of Reviews approved by the Senate in May 1995 and the University Council in June 1995. For an overview of the role of the DVC (Academic), refer to **Document B**.

#### 3.3.2 Directors of Operational Units

The Director, CCLS has responsibility for consulting with the Head of the College over the coordination of the Review Process – **Document B**. They play a central role in facilitating and documenting progress made towards the implementation of recommendations made by the Panel.

The Director may delegate responsibility for some tasks to a Divisional Administrator as appropriate.

### 3.4 The Quality Advancement Unit

The Quality Advancement Unit is responsible for managing and monitoring the overall review process. **Document B**.

Members of the Unit are available to provide advice on any aspect of the review process and to liaise with University staff as required.

#### 3.4.1 Review Secretary, Quality Advancement Unit

This person will be appointed by the Reviews Manager, QAU. The QAU has two Dunedin-based Review Administrators who normally carry out the role of Review Secretary. Adjunct Review Secretaries are appointed as required.

#### 3.4.2 Reviews Manager, Quality Advancement Unit

The QAU Reviews Manager is the main point of contact between QAU and the College under review, and is responsible for the coordination of the Review Process and advising the College under review and the Panel, as required. The Reviews Manager is responsible for appointing the Review Secretary, provides the DVC (Academic) with an executive analysis of the final Review Report and attends the Report Approval Meeting.

#### 3.4.3 Director, University Quality Advancement

The Director, University Quality Advancement is responsible for the overall monitoring of the University's Review process.

## 4 Confidentiality

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Members of a Panel have access to a great deal of material during a Review. The Panel must treat as confidential any personal information, commercially sensitive material and intellectual property provided to it.

Beyond the production of the Self Review, all aspects of the review process are confidential to the Members of the Panel. The only documents that can be viewed by others, before and during the process, are the Terms of Reference and the list of Panel Members.

Colleges under review can assist in maintaining this confidentiality by declining or redirecting any communications about the Review to the Review Convenor or Secretary.

### 4.1 Submissions

Colleges under review are asked to supply the names of individuals or organisations that have an interest in the College and that may be invited by the Panel to make a submission. However, all written and oral submissions to the Panel are confidential to the Panel. This includes the submissions, names of those who have made submissions, and any other information about such submissions.

All written submissions and notes from oral submissions will be destroyed at the end of the Review Process.

### 4.2 Review Programme and Interviews

The Panel Visit Programme is confidential to the Panel. Colleges under Review are not entitled to this information. Enquiries made during the Review are to be directed to the Review Secretary or Convenor.

### 4.3 Self Review

The Self Review is confidential to the College that produced it and the Review Panel although it is expected that the College will provide the Director, CCLS with a copy of the Self Review at the time of submission. Neither QAU nor the Review Panel will share this information with others without prior permission from the College who produced it.

### 4.4 Review Report

The Final Report will become a public document within the University Community. The Report is confidential to the Panel until finalised, approved by the entire Panel, checked for factual accuracy by the Head of the College under review and then released to the DVC (Academic). Following consultation with the Convenor; Chief Operating Officer; Director, CCLS; and the QAU Reviews Manager, the DVC (Academic) will authorise distribution of the Report to the University. At this point, the Report is no longer confidential except in that it is for internal University use only. Any external use or distribution requires the authorisation of the DVC (Academic).

As the Report is about an organisation, it will not normally identify individuals. It is expected that every effort will be made to ensure that, whenever possible, concerns shall be framed in terms of the system – not the individual.

Where an individual is identifiable (due to their position), the Panel should provide the individual with an opportunity to discuss the matter with a member of the Panel, and ensure that issues in contention are resolved before publication of the Report.

#### **4.5 Confidential Matters - Beyond the Scope of the Review**

Panels can be challenged by matters of a confidential and/or personal nature or financial concerns which are generally beyond the scope of the Terms of Reference and the Review Panel's brief. The Panel have the authority to submit a confidential letter to the DVC (Academic) so that such issues can be dealt with under a separate process.

#### **4.6 Confidential Disposal of Review Documentation**

All material generated by the Review (i.e. submissions, the Panel Visit Programme, drafts of the Report, notes taken during the review, electronic files) are to be confidentially disposed of, or returned to the Secretary, upon the completion of a review, for confidential disposal.

## 5 The Self Review

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### 5.1 What is the Self Review?

The Self Review exercise is one of gathering information about the College in accordance with the approved Terms of Reference and presenting this information in the form of a Self Review. The responsibility for preparing the Self Review material may be delegated by the Head of the College to a Self Review Committee, led by a Self-Review Manager (often the Head of the College under Review). However, garnering input from staff and providing access to the final document is strongly encouraged and staff should have the opportunity to access the final document prior to the Review.

It is expected that the Self Review document will be completed at least **four weeks prior to the Review Panel Visit**. This information is confidential to the College and to the Review Panel.

### 5.2 What is the Self Review document?

QAU have examples of Self Review documents available.

The Self Review document forms the basis of the College's submission to the Panel. The Self Review needs to include factual information that contextualises the College, outlines its structure and management, current status, and anticipated future developments; it should also be considered, thoughtful and analytical. The document should highlight strengths and identify areas for improvement.

Key questions that you might consider are:

- Where is the College now?
- Where do you want to be in five years' time?
- What do you need to do to get there?
- How can the University help you to get there?
- What do you do well?

#### 5.2.1 Format

The structure of the Self Review document should reflect the Terms of Reference of the Review with the addition of a brief preamble which provides background information relating to the College, and highlights any special characteristics or factors that have influenced development. Major headings for the Self Review are generally taken from the Terms of Reference.

As a general guide, the main document should be approximately 20 – 30 pages in length (including diagrams and flow charts). Additional appendices should support the main document. Refer to **Document C** for suggested content.

#### **Please note:**

A PDF version of the Self Review must be provided to the Review Secretary. Please also make available a Word version, which may be required by the Secretary and/or Convenor. At least two hard copies will be required.



## 6 The Review

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### 6.1 What is the visit programme?

Reviews are normally held over three days. The Panel visit programme is prepared by the Convenor and Secretary in consultation with the Panel Members. In addition to their individual meeting with the Panel, the Head of the College should be available for the duration of the Review to provide additional information and answer questions as required. The Panel visit programme includes meetings with staff, students and other interested parties as arranged by the Convenor and Secretary. A site visit may be required, and a senior member of staff will need to be available for this.

On the final day of the Review, the Panel will present their preliminary findings to the Head of the College. Whenever possible, the Panel should also hold a second presentation open to all the College's staff. This session is often brief, and it is not usually a forum for discussion.

### 6.2 Individual Submissions

Interested parties may make confidential written submissions to the Convenor (via the Secretary) and/or request a personal interview with the Panel during the Panel Visit. This includes staff and students of the College.

It is the responsibility of the Secretary to publicise the Review, call for and collect submissions for distribution to the Panel.

All staff, including the Head of College, are encouraged to make personal submissions to the Panel prior to their interviews. These may be as simple as several bullet points in an email or a lengthier document outlining any concerns or observations staff may have. Submissions are confidential to the Review Panel and destroyed at the end of the Review process.

### 6.3 What is the Review Report?

The Review Report is a public document within the University of Otago community including students and can be obtained from the Quality Advancement Unit by any member of the University. It outlines the Panel's findings in accordance with its Terms of Reference and provides sufficient detail to enable a good understanding of the issues leading to the subsequent recommendations. It is also expected to include commendations and may highlight areas of good practice.

Preparation of the final Report is coordinated by the Convenor and Secretary of the Panel and written in collaboration with other Panel Members; it is expected to be completed 6-8 weeks after the Review Visit.

## 7 Post Review

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### 7.1 What happens to the Review Report?

Prior to the finalisation of the Review Report by the Panel, the Convenor will discuss the preliminary findings and proposed recommendations with the Director, CCLS. The Convenor will then send a copy to the Head of the College to check for factual inaccuracies. The Head has two weeks from receipt of the Report to reply with any factual corrections. If no corrections are received within the two weeks, it will be assumed that the Report is factually correct.

Upon final approval from the Panel, the Report is sent by the Convenor to the QAU Reviews Manager, who provides the DVC (Academic) with an executive analysis and a copy of the Report.

The DVC (Academic) convenes a Report Approval Meeting and discusses the Report's key findings with the Chief Operating Officer, Director CCLS, the Convenor and the QAU Reviews Manager to reflect on the Review, the Report and the outcomes. Any confidential matters may also be discussed at this meeting. The DVC (Academic) also discusses the Report's key findings with the Vice-Chancellor as appropriate.

Depending on schedules, this stage can take up to several weeks.

#### 7.1.1 When will the Review Report be released?

The DVC (Academic) generally authorises release of the Review Report at the conclusion of the Report Approval Meeting. QAU then distributes the Report, first to those directly involved in the Review, then broadly across the University, as per QAU distribution procedures. **Document D.**

Notice of release of the Report is posted on the QAU website and an all-department email is sent.

#### 7.1.2 How are the recommendations implemented?

Following receipt of the Report it is suggested that an "Implementation Plan" is prepared by the Head of the Unit (and/or the PVC or Divisional Head) for their own use; this will provide a framework for action to be taken in response to the recommendations in the Review Report. For example, the Plan may:

- prioritise the recommendations
- identify steps to be taken on each recommendation
- delegate responsibility for action
- provide a time-line for implementation.

Where recommendations are targeted to areas or individuals outside the remit of the Unit reviewed (e.g., Property Services, ITS, etc), it is the responsibility of the Head of the Unit to liaise with the relevant parties to discuss what steps or actions are required and develop a timeframe that ensures implementation of the recommendations.

**Time Frame:** An Implementation Plan should be developed within a month of receipt of the Report.

## 7.2 How is implementation monitored?

Progress towards implementation of the Review recommendations is monitored through the submission of two Status Reports to the DVC (Academic) by the PVC or Divisional Head and the Head of Unit.

The Status Report is a detailed report on the progress made towards implementation of each recommendation in the Review Report. It reports on those recommendations implemented successfully as well as those not yet implemented, and the reasons for this. The preferred reporting format is for the Head of the Unit to submit a full Status Report to their PVC or Divisional Head, and then for the PVC or Divisional Head, and Dean where appropriate, to prepare their own Report(s); all reports are then submitted to the DVC (Academic).

For those recommendations targeted to areas or individuals other than the area reviewed, such as Property Services or ITS, it is expected that the Head of Unit will contact the relevant group to obtain an update in order that they can report on progress.

Two formal reports are required during the follow-up phase:

- the first Status Report: to be submitted to the DVC (Academic) after six months; and,
- the second Status Report: to be submitted to the DVC (Academic) after two years.

### 7.2.1 What format should the Status Report take?

There is no standardised style for reporting on review recommendations, however the document should record action taken and outcomes to date with respect to each recommendation. It can be useful to produce this report in tabulated form in order to record who or which roles are responsible for oversight of activity related to the recommendation and the timeframe in which action is expected. If a recommendation has not been addressed or has been rejected, then a brief explanation of why, should be included along with a timeline for any action planned. **Document F.**

### 7.2.2 When are the Status Reports due?

The First Status Report is due six months after release of the Review Report. The Second Status Report is due two years after release of the Report.

Official requests for the Status Report will be sent by the DVC (Academic) to the PVC or Divisional Head approximately six weeks prior to the due date.

### 7.2.3 What happens to the Status Report?

The DVC (Academic) responds to the Status Reports via the PVC/Divisional Head on progress as appropriate. The DVC (Academic) response will comment on the progress made on each recommendation and may request that further action be taken and/or that further information be supplied. A copy of the first Status Report will be supplied to the Convenor for their information.

## 7.3 Mid-Cycle Assessment

An additional formal report, known as the Mid-Cycle Assessment, is now required at four years. This task is undertaken by the relevant PVC/Divisional Head in consultation with the Head of Unit.

The University norm for departmental, programme, area review is once every 10 years, but the University's Quality Advancement Reviews Policy allows for earlier interim and targeted reviews to be

undertaken as appropriate. The primary purpose of this Mid-Cycle Assessment is to confirm the next review date for the Unit concerned.

In conducting this exercise, consideration is to be given to any outstanding recommendations and an assessment of the level of commitment to the recommendations; the current status of the area including significant changes; commentary on whether the review has added value to the College; a re-evaluation of the categorisation allocated at the time of the Review Report's release (see below); and, either a recommendation for an earlier review date, a targeted topic review to address particular outstanding issues, or confirmation of the 10 year review date will be required.

# DOCUMENT A:

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## Duties of a Review Convenor

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The duties of the Convenor include:

- meeting with the Director, CCLS and the Head of the College to discuss issues, in the early stages of the review process;
- meeting informally with all staff of the area under review, before the Panel visit, to outline the review process, encourage participation and address any concerns (ideally this would take place at a regularly scheduled staff meeting);
- co-ordinating requests for information additional to the Self Review documentation and forwarding these to the Head of the College via the Review Secretary;
- formally inviting staff and students to meet with the Review Panel as per the Visit Programme and inviting written submissions, via the Review Secretary;
- submitting the Report to the DVC (Academic) within a reasonable time frame (generally 6 – 8 weeks after the Review Visit);
- meeting with the DVC, (Academic) and the Director, CCLS to discuss the Review findings following submission of the Review Report.

The Convenor may also request the DVC (Academic) to augment the Review Panel by the appointment of an additional member should it become clear that this step is necessary to ensure a thorough review of the Department.

## Role of Review Panel Members

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Review Panel Members have responsibility for:

- where appropriate, conducting themselves throughout the Review as independently representing their profession/discipline/area of expertise rather than their university or employer;
- familiarising themselves with the Self Review and related documentation, and Review Guidelines in preparation for the Review Visit;
- providing feedback on drafts of the Review Report, and assisting with its writing as required;
- endorsing the final Review Report before its submission to the DVC (Academic).

## DOCUMENT B:

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### Role of the Deputy Vice-Chancellor (Academic)

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#### Pre-review

- Approve the Review Proposal prior to issuing official letters of invitation to members of the Review Panel.
- Augment the Review Panel by the appointment of an additional member should it become clear that this step is necessary to ensure a thorough review of the unit.

#### Post-review

- At the Report Approval Meeting, discuss the Review findings with the Review Panel Convenor and PVC/Head of Division/Chief Operating Officer and suggest possible amendments or clarification as required.
- Acknowledge the contribution of members of the Review Panel following approval of the Review Panel Report.
- Take the lead on matters of a confidential nature beyond the scope of the Review.
- Discuss the outcomes of the Review with the Vice-Chancellor, recognizing that in some cases it may be more appropriate for the PVC/Head of Division to meet directly with the Vice-Chancellor.
- Authorise the release of the Review Report.
- Report, where appropriate, key findings of the Review to various University Committees and individuals.
- Request two Status Reports on progress towards meeting implementation targets from the PVC; six months following the official release of the Review Report and then two years after that same date.
- Respond to the Status Reports in consultation with the Vice-Chancellor as appropriate
- Receive the completed Four Year Mid-Cycle Assessment prior to its submission to the Quality Advancement Committee.

## Role of the Director, Campus and Collegiate Life Services

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### Pre-Review

- Advise Heads of Colleges of the Review Schedule.
- In consultation with the Head of the College under Review agree and approve the Panel Members.
- In consultation with the Head of the College under Review, agree and approve the Terms of Reference for the Review.

### Post-Review

- At the Report Approval Meeting, discuss the Review Report with the Review Convenor, DVC (Academic) and COO and suggest possible amendments or clarification as required.
- In consultation with the Head of the College, consider the development of an implementation plan based on the recommendations of the Review Report.
- In consultation with the Head of the College, document progress towards implementation of the recommendations made in the Review Report.
- In consultation with the Head of the College, prepare Status Reports at six months and two years for submission to the DVC (Academic).
- Complete the Four Year Mid-Cycle Assessment to confirm the next scheduled review date or propose intermediary actions to satisfy any outstanding recommendations.

## Role of the University Quality Advancement Unit

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The QAU Reviews Manager, is responsible for the management and monitoring of the Review process.

- Advise PVCs of the Review Schedule.
- Send annual reminders of forthcoming reviews (covering the next 3 years) to the PVCs.
- Provide information and guidance to University staff on all aspects of the Review process.
- Follow up on all aspects of the Review process as required including Status Reports and the Four Year Mid-Cycle Assessment.
- Draft letters, prepare reports and provide advice to the DVC (Academic) on all aspects of the Review Process.
- Maintain the Reviews web page on the Quality Advancement website from which information and documents relating to the Review Process can be accessed.

## DOCUMENT C: Supporting documentation

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Refer also to the relevant Review Guidelines available at <http://www.otago.ac.nz/quality/reviews/>.

The Self Review document forms the basis of the College's submission to the Panel. The Self Review needs to include factual information that contextualises the College, outlines its structure and management, current status, and anticipated future developments; it should also be considered, thoughtful and analytical. The document should highlight strengths and identify areas for improvement. The structure of the Self Review document should reflect the Terms of Reference of the Review.

A range of frameworks<sup>1</sup> and reports are available to support the review process and to enable alignment with the University's Strategic Direction. The list below outlines what is currently offered to units under review. **Reports** are provided from some University offices to include as appendices. These are listed below and you may wish to comment on these in the Self Review. **Prompt sheets** suggest points for you to consider in relation to a particular strategy, imperative or focus, whilst writing the Self Review.

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<sup>1</sup> <https://www.otago.ac.nz/about/official-documents/index.html#strategicframeworks>



Māori Strategic Framework	• Prompt sheet
Pacific Strategic Framework	• Prompt sheet
Sustainability Office	• Prompt sheet
Equity and Diversity	• Prompt sheet
Health & Safety	• Health & Safety Audit
Property Services, Asset Management Unit	• Space Assessment Report
Strategy, Analytics and Reporting Office	• EFTS and Headcount data
PBRF & Publications Office	• Research outputs, citation lists and statistics
Research Support Unit	• Bibliometrics
Surveys & Evaluations (QAU)	• A range of student/graduate survey reports and evaluations
Financial Services	• Financial performance indicators (Traffic Light Report)

For consideration and/or inclusion in the Self Review document as appropriate Succession planning

- Workload
- Resources
- Promotion

The Self-Review document should also include discussion of:

- Challenges, concerns
- Successes
- Restrictions/Wants or aspirations
- Realities.

### Introduction:

- Provide a short history/evolution of the College, highlight any special factors that have influenced development.
- What does the College want from the review process e.g. Panel ideas, endorsements?

### **Management/Organisational Structure/Resources:**

- Outline the management structure and describe the processes for decision making.
- Staff profile (names, age profiles, levels) – and comments on the adequacy of the level of support.
- Describe committee structures and key roles.
- Information on opportunities for staff training, development initiatives and associated procedures.
- How is communication handled e.g. to staff/students/wider University/external stakeholders?
- Overview of basic financial position, forecasts and future expectations – including any constraints and/or access to additional resources.
- How is marketing undertaken?
- Discuss Health and Safety aspects.
- Discuss space aspects including, shared spaces, equipment maintenance, etc...

### Appendices might include:

- Details of uptake of training.
- Biosketches with photos of staff.
- Current Health & Safety Report (H&S office).
- Space Register.
- Marketing material.

### **Strategic Focus:**

- Detail the key areas that directly support the University's strategic aims.
- Discuss compatibility between the University's and Division's strategic aims and those of the College.
- Discuss how to best achieve all strategic aims.
- Discuss staff related issues. For example: recruitment; current and future staff profile in relation to the strategic direction.
- How is strategic success measured and/or demonstrated?
- Can this be maintained or improved upon?

### **College Community:**

- Outline staff contributions to University service on committees/Boards/etc.
- Tutorial programmes
- Mix of residents – undergraduates/post-graduates; international/exchange students, under-18s, student:staff ratios
- Inter and intra-College collaboration – events, activities
- Pastoral care
- Opinion surveys and other data collection.

## DOCUMENT D: Quality Advancement report distribution

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### **General Information**

Upon authorisation for release by the DVC (Academic), a Review Report is a public document within the University and will be distributed by the Quality Advancement Unit as below. Notice of release will be placed in the Staff Bulletin and on the QAU Website. Further distribution by those receiving Reports from QAU is expected. Released Reports can be requested from the Quality Advancement Unit by any staff at any time. Permission must be obtained from the DVC (Academic) to circulate a Review Report outside the University.

### **Standard distribution: Two part process**

Review Reports will be released in two separate distributions, the Initial Distribution and the General Distribution, to ensure that parties directly involved receive the Report prior to circulation University-wide.

#### **i) Initial distribution:**

Upon release by the DVC (Academic), hard copies of the Review Report will be sent to the Head of the Department reviewed, their Divisional Head (and Dean or other Director where applicable) and members of the Review Panel. It is the responsibility of those Department, Unit and Divisional Heads to distribute the Report to relevant staff within their section. (An unbound copy will be sent to facilitate reproduction and an electronic version will be available upon request.) The Initial Distribution list will be approved by the DVC, PVC/Head of Division and Convenor prior to release.

#### **ii) General Distribution:**

One week following the Initial Distribution, the Report will be distributed electronically to the wider University community. This General Distribution will be by email from QAU (with the Report as a pdf attachment). This list cuts across the University at top levels seeking to disseminate the Report as broadly, equitably and efficiently as possible. It is the responsibility of each recipient to further distribute the Report to staff within their area as appropriate.

For further information please contact [Megan Wilson](#), QAU Reviews Manager.

## DOCUMENT E: Resources and key contacts list

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### **Quality Advancement Unit**

Review guidelines and processes

Megan Wilson (Reviews): [m.wilson@otago.ac.nz](mailto:m.wilson@otago.ac.nz)

Refer also to <http://www.otago.ac.nz/quality/reviews/index.html>

Student/Graduate Opinion Surveys

Romain Mirosa (Surveys): [romain.mirosa@otago.ac.nz](mailto:romain.mirosa@otago.ac.nz)

Refer also to <http://www.otago.ac.nz/quality/surveys/index.html>

Student Evaluations

The Evaluation team holds student evaluation of teaching and course data from 2004 to the current year. The team can aggregate ratings to standard questions by department and division to identify multi-year trends in student feedback.

Contact: Allen Goodchild or Julie Samson [evaluation@otago.ac.nz](mailto:evaluation@otago.ac.nz)

University of Otago Staff Values and Behaviours Survey

The University of Otago Staff Values and Behaviours Survey ran in 2021 data collection, analysis and reporting was coordinated through the University of Otago Quality Advancement Unit on behalf of the Vice-Chancellor Advisory Group. The results of the survey are intended to support decision making or policy settings related to the University of Otago staff culture and experience. Targeted reports were produced for areas with a sufficient number of answers at the Divisional, School and Departmental level. An overall university-wide report and reports based on socio-demographic characteristics were also produced.

Contact: Romain Mirosa (Surveys): [romain.mirosa@otago.ac.nz](mailto:romain.mirosa@otago.ac.nz)

### **Strategy, Analytics and Reporting (SAR)Office**

SARO provide standard data-packs to inform QAU reviews. Requests for clarification or further information should be emailed to [planning@otago.ac.nz](mailto:planning@otago.ac.nz)

The primary contacts for QAU panels are:

- Tracey Neville (Analyst)
- Kevin Maley (Senior Manager)
- David Thomson (Director)

The core tasks of this Office include:

#### Strategy and Advisory

- Manage and facilitate the development and application of the University Strategic Plan and associated frameworks that support and underpin University operations and decision making.
- Undertake and manage the provision of consistent and integrated strategic and operational planning, review processes for client portfolios, and monitor strategic initiatives throughout the University. Manage or be actively involved in selected initiatives where required.

- Provide the primary contact between the SAR Office and other Divisions, engaging with committees, divisions and departments to facilitate analysis, reporting and advice to assist in the development and achievement of plans.
- Dealing with government departments and agencies and other third parties in regards to strategy, regulations, policy and other matters.

#### Analytics and Insights

- Conduct institutional research (analysis to inform University operations).
- Coordinate a cross-university institutional research group, to collaborate and share related analytics.
- Gather and analyse marketing intelligence and market research.
- Forecasting of student load (EFTS) and other indicators.
- Combine internal and external information to inform and develop computational models and calculations.
- Coordinate institutional benchmarking (e.g. UniForum and Tribal) and international rankings (e.g. QS, Time Higher Education).
- Coordinate surveys related to SAR operations, in collaboration with the Quality Advancement Unit and other stakeholders.

#### Reporting and Compliance

- Responsible for the University's compliance with statutory student reporting to the Tertiary Education Commission, including the Single Data Return, Fees-Free reporting, and maintenance of relevant components of eVision.
- Monitoring funding-related student performance.
- Coordinate Government compliance change projects such as the evolution of Fees-Free policy, and a new Single Data Return.
- Provide student numbers (headcount and EFTS) and related reporting for all parts of the University.
- Responsible for, or participate in, the development of other regular reports such as the Triannual Report and the University's Annual Report.

#### Business Intelligence

- The new SAR office has been charged with leading the further development of the University's business intelligence capability. This will be a multi-year programme of work which will require separate consultation which will be conducted at a later time.
- Business Intelligence is a broad term that encompasses the software, systems, tools, and infrastructure used to facilitate dissemination and analysis of data and information to inform data-driven decision making. BI topics include data governance, data warehouses, online dashboards, predictive analytics, and many other topics.
- In the University of Otago context, this programme of works is envisioned to bring together disparate sources of data, to allow staff throughout the university to easily access a consistent suite of data via an online-self-service dashboard, and to aid analytics teams in conducting more complex analytics.
- Once developed, the University BI capability will help the SAR Office deliver its core operational tasks, and will support data-driven decision making to achieve the University's strategic goals.

### **Sustainability Office**

The Sustainability Office is responsible for the Sustainability Strategic Framework (SSF). The SSF provides direction so that sustainability principles and practices are integrated across all our campuses and throughout all our activities: administration and governance, operations, research, teaching & learning, community engagement and outreach activities. A revised SSF for 2022 – 2030 is currently being developed.

While a lot of focus is rightly upon environmental issues, sustainability is seen as a much broader and more complex concept that embraces environmental, social and cultural concerns. This is best seen in our commitment to the United Nations Sustainable Development Goals (UNSDGs). The Times Higher Education Impact Ranking is one measure of that commitment (Ranked 23<sup>rd</sup> in World 2020).

The Sustainability Office provides a range of opportunities to engage with sustainability. This includes student events, a Green Your Scene staff engagement programme, living lab research initiatives, summer student-ships and scholarships, staff excellence awards, and bespoke workshops. We are currently focussed on reducing and offsetting our greenhouse gas emissions to meet our objective of net carbon zero by 2030.

If you would like to discuss how sustainability relates to your department or programme, please do not hesitate to get in touch. We are happy to meet over a coffee (fair trade of course!) or take a more structured workshop approach to help integrate sustainability into your strategy and planning.

#### *Contacts:*

Ray O'Brien, Tumuaki o Toitū te Taiao/Head of Sustainability [sustainability@otago.ac.nz](mailto:sustainability@otago.ac.nz)

Refer also to [www.otago.ac.nz/sustainability](http://www.otago.ac.nz/sustainability) , [Sustainability Strategic Framework](#) and [United Nations Sustainable Development Goals](#)

### **Asset Management Unit**

The Asset Management Unit is the custodian of the University's property portfolio. It drives maintenance and priorities and along with the Campus Development division, sets the strategy for capital development. It includes asset management, property management, space management and quality and systems.

The Asset Management Unit provides a detailed space and asset report to the panel. This includes any space surplus or shortage the group may have, condition and functionality of the spaces, and any utilisation analysis results that may be available. It also touches on future space needs or potential changes, and provides recommendations from an asset management viewpoint.

#### *Contact:*

Diana Horn, Senior Space Planner, [diana.horn@otago.ac.nz](mailto:diana.horn@otago.ac.nz)

### **Equity and Diversity**

The University of Otago's Equity and Diversity Strategic Framework and Policy commit the University to actions that support a campus-wide culture of equity and diversity in which all individuals are valued and different ways of thinking are embraced. It aims to enable all members of the University community to achieve to their fullest potential.

Refer to the Equity and Diversity prompt sheet. Templates for stocktakes can be found at [Quality Advancement](#). For further information contact:

[Joe Llewellyn](#), Adviser, Equity, Diversity and Inclusion, Human Resources

[Professor Christina Hulbe](#), Chair, Equity Advisory Committee

### **Health & Safety**

Nevan Trotter: [nevan.trotter@otago.ac.nz](mailto:nevan.trotter@otago.ac.nz)

### **Information Technology Services**

Nicola Walmsley: [nicola.walmsley@otago.ac.nz](mailto:nicola.walmsley@otago.ac.nz)

### **Financial Services**

Michael McAlpine: [michael.mcalpine@otago.ac.nz](mailto:michael.mcalpine@otago.ac.nz)

Brita Fields: [brita.fields@otago.ac.nz](mailto:brita.fields@otago.ac.nz)

### **Office of Māori Development**

[maori.development@otago.ac.nz](mailto:maori.development@otago.ac.nz)

### **Pacific Development**

[pacificdevelopment@otago.ac.nz](mailto:pacificdevelopment@otago.ac.nz)

## DOCUMENT F: Post-review status reports

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QAU suggest that the Head prepares an “Implementation Plan” for your own use, within two weeks of receipt of the Review Report, to:

- prioritise the recommendations;
- identify steps to be taken on each recommendation;
- delegate responsibility for action;
- and provide a time-line for implementation.

NOTE: The Head is also responsible for following up and reporting on recommendations made external to their unit.

QAU will ask for your Status Reports at the 6-month and 2-year marks, to monitor progress of the implementation plan. There is no standardised format for the status reports but a template is available on request.

### **Status Reports should include:**

- **detailed feedback on the progress of each recommendation;**
- **feedback on those recommendations successfully completed and**
- **the reasons/details as to why recommendations are NOT yet implemented.**

PVC (and Dean for Health Sciences) comment is required before the Status Report is returned to QAU; this may be embedded in the HOD’s Status Report or added in a separate document.

**BE PREPARED** – the DVC (Academic) will comment on your progress, report to the Vice-Chancellor as necessary, and may request further action or ask for additional information.

### **Mid-Cycle Assessment**

An additional formal report, known as the Mid-Cycle Assessment, is now required at four years. This task is undertaken by the relevant PVC/Divisional Head in consultation with the Head of Unit and a template will be provided. Upon completion this will be submitted to the DVC (A) and the Quality Advancement Committee.