



INTERNAL QUALITY REVIEW QUALITY IMPROVEMENT PLAN

RCSI DEVELOPING HEALTHCARE LEADERS WHO MAKE A DIFFERENCE WORLDWIDE

Quality Improvement Plan

Office of Research and Innovation 2016

DOCUMENT CONTROL SHEET

Name of Unit	Office of Research & Innovation					
Project Title	Internal Quality Review					
Document Title	Quality Improvement Plan					
This Document Comprises	DCS	TOC	Text	List of Tables	List of Figures	No. of Appendices

Rev	Status	Author(s)	Reviewed By	Approved By	Office of Origin	Issue Date
Rev1	Final	Office of Research & Innovation		ORI SMT	ORI	14 Jul 2016



Quality Improvement Plan July 2016

Recommendation in order of priority	SAR Ref. PRGR Ref.	Response / Action Planned	Responsibility for Action	Resources Implications	Deadline / timeframe	Measurement / Benchmarking	Outcome / Status
<p>3.21 Facilitate a network of research support personnel throughout RCSI.</p> <p>6.14 Establish researched-based communities of practice to support the implementation of the overall RCSI strategic plan.</p> <p>3.19 Develop a Customer Charter to be approved by the Research Committee.</p>	<p>3.19</p> <p>6.14</p> <p>3.21</p>	<p>We shall establish a research support network consisting of</p> <p>1. <u>Institutional Research Support Team (IRST)</u>, whose role is to review and identify areas of improvement in the ways central support functions support researchers and research activities. The IRST will include representatives from ORI, FD, HR, SPGS, Laboratory and Research Manager Teams, CRC, IT, & Library, A key objective of the group will be to ensure that any research support procedures or systems take into account as much as possible the needs of all stakeholders involved in the delivery and/or use of the procedure/system. In particular we will seek to achieve, as much as possible, integration of procedures and systems. The IRST will also develop a customer charter for research management and support.</p> <p>2. <u>Local research support team for research management & administration</u>. The scope of the establishment of this group is to create stronger links between local and central support and ensure that institutional developments are informed by local activities and needs, are better communicated and lead to better local practises.</p> <p>3. <u>Laboratory management team</u> The scope of the establishment of this group is to create quality standards of practice that are consistent across the Organisation, facilitate the sharing of resources, inform institutional plans and monitor their implementations.</p> <p>4. We will also support the establishment of a <u>Postdoctoral Researchers Group</u> to help them identify and address specific support and development needs.</p>	Associate Director of Research & Senior Research Officers	None	Q2 2016 – Q2 2017	<p>Establishment of teams.</p> <p>Agreed calendar of meetings.</p> <p>Agreed Terms of reference (ToR).</p> <p>Creation of repository of ongoing research-related projects.</p> <p>Agreement on joint projects.</p> <p>Establishment of work-groups</p> <p>Project reports.</p> <p>Customer Charter in place.</p>	Ongoing
<p>4.13 Consider conducting a gap analysis as part of the new research system scoping.</p>	4.13	Undertake a gap analysis of the research management system.	Associate Director of Research (ORI team, FD, HR,	None	Q1 2016	Report	Completed



Quality Improvement Plan July 2016

Recommendation in order of priority	SAR Ref. PRGR Ref.	Response / Action Planned	Responsibility for Action	Resources Implications	Deadline / timeframe	Measurement / Benchmarking	Outcome / Status
-------------------------------------	--------------------	---------------------------	---------------------------	------------------------	----------------------	----------------------------	------------------

			SPGS, CRC)				
5.12 Consider the incorporation of clinical trials data / outputs into new IT Research System	5.12	Evaluation and selection of clinical trials management systems currently on the market.	Associate Director of Research & CRC	Cost of a Clinical Trial Management system (TBD)	Q1 2016	Production of a Report and identification of a suitable clinical trial management system.	In progress
6.16 Consider a lean methodology review of the interface and interdependent processes and functions across support units	6.16	A workgroup of IRST, including finance, HR, ROSIT, SPGS will undertake an end-to-end Business Process Review (BPR) and gap analysis, i.e. review research processes to make them as lean as possible over the entire research life cycle	ORI, FD, HR, SPGS	To be determined	Q2 2016	Production of a Report. Leaner processes, shorter turn-around times for processes requiring approval, and improved staff satisfaction	In progress
4.21 Clarify and communicate ORI's role in each stage of the grant-application approval process; define this in a flowchart.	4.21	Upon completion of the BPR we will develop a single page flowchart of processes including the names of contacts to ensure enquiries are directed to the appropriate office.	ORI, FD, HR, SPGS	To be determined	Q3 2016	Updated handbook. Communication of ORI role at induction event for researchers and the researcher forum.	To be actioned
4.18 At an institutional level review the post-award research finance capacity to meet demand, including benchmarking	4.18	FD has increased resources to 2 fully dedicated Operations staff. In addition it is planned to fully dedicate the role of the Senior Financial Accountant to Research (Head of Research Finance) by end of June 2016 (3 FTE's dedicated to Research). As part of the Lean Process Review of Research Finance, FD is also enhancing its IT capability through an upgrade of the accounting system (Q3 2016) and introduction of the new Research information management system in 2017. Upon completion of the Lean Process Review, FD will review and benchmark the ratio of research finance staff to the volume of activity as well as regular reporting of KPI's.	Financial Controller & Senior Financial Accountant	To be determined	Q2 2017	Benchmark & KPI Reports.	Ongoing



Quality Improvement Plan July 2016

Recommendation in order of priority	SAR Ref. PRGR Ref.	Response / Action Planned	Responsibility for Action	Resources Implications	Deadline / timeframe	Measurement / Benchmarking	Outcome / Status
3.17 Review the process of policy development approval and implementation and how these are monitored for compliance.	3.17	As part of the review of processes and procedures we shall review research policies, define a monitoring plan and consequences of non-compliance.	Associate Director of Research (ORI, FD, HR)	None	Q4 2016	Implementation of monitoring plan and compliance policies.	To be actioned
5.10 Plan additional resources for anticipated growth through StAR and HORC and whether such resources should be central or devolved. 5.11 Plan for 'peaks and troughs' cycles of activity in demand. 6.15 Ensure the safeguarding of the value-added service and customer-focussed ORI brand during the imminent growth phase.	5.10 5.11 6.15	In consultation with SMT, we shall set institutional research outputs/targets for the next 3 years. We will then deliver an action and resources plan, which is set to support the delivery of the institutional research targets and takes into account the increase in number of competitive researchers brought by the StAR programme. Outputs and plan will be reviewed annually We shall also ensure that (a) work-load increases are monitored, and if possible, predicted and addressed timely, (b) support resources are shared as much as possible, and highly qualified, skilled & experienced staff are not deployed on, or their impact diluted by tasks that could be undertaken by a more cost-effective resource. To facilitate this we shall set up shared deadline and project calendars and undertake regular activity reviews.	SMT, Research Management Team	Human & Financial resources subject to budget availability	Q4 2016	Documented annual project, support plans and reviews. Shared calendars.	Ongoing
4.19 Develop 'crib sheets' to capture generic information on specific calls which can be accessed by researchers.	4.19	Develop 'crib sheets' to effectively communicate key funding call information (including time frames) in order to reduce duplication of effort by researchers.	Grant Application Support Team	None	Q4 2015	Documents distributed to researchers.	Ongoing
4.20 Create a repository of successful applications for use as exemplars.	4.20	We shall request permission from successful PIs to share their proposals and the reviewer's feedback and agree terms of use.	Senior Research Officers	None	Q4 2016	Number of available recent proposals across a range of funding programmes. Library of reviewers' feedback.	To be actioned
3.20 Clarify the decision making process for ranking grant applications	3.20	Develop a document outlining the selection criteria	Senior Research	None	Q2 2016 –	Document.	Ongoing



Quality Improvement Plan July 2016

Recommendation in order of priority	SAR Ref. PRGR Ref.	Response / Action Planned	Responsibility for Action	Resources Implications	Deadline / timeframe	Measurement / Benchmarking	Outcome / Status
in the case of restricted calls		(incorporating specific call requirements)	Officer		Q2 2017	Email communication 2 weeks in advance of funding call	
4.14 Develop a repository of information to increase office efficiencies.	4.14	Develop shared resources on the server and a unified tracker. Improve record management of soft copy documents. Improve the Researcher Handbook to reduce external researcher queries. Develop and refine the content of the ORI Staff Portal and Website for sharing of key information.	Senior Research Officer (with ORI)	None	Q4 2016 for 1 st iteration	Shared tier 1 resources for identified proposal elements – Monitored re-use of resources. Monitored changes in the volume of external/internal phone and email information queries.	Ongoing
3.22 Endorse the intention of the Innovations Team to develop a pipeline of new Intellectual Property (IP) with support from RCSI.	3.22	Support has been obtained from the Director of Research and Deputy Director of Applied Research to put continued effort into pipeline development and growth. One member of the innovation team has been specifically tasked with this project. To further develop the cohort of active PIs and expand the base for the development of new IP it is proposed to engage more with clinicians. One issue associated with this is the need for an agreement with the hospitals for RCSI to own IP developed under research grants held here. We propose to negotiate a new MOU with the hospitals group and binding agreements with our key hospitals.	Head of Innovation	None - support from EI funded TTSI Case manager	Ongoing from Q1 2016	Increase in number of SFI TIDA, EI CFF and CF grants submitted to funders and approved for funding	Ongoing



Quality Improvement Plan July 2016

Recommendation in order of priority	SAR Ref. PRGR Ref.	Response / Action Planned	Responsibility for Action	Resources Implications	Deadline / timeframe	Measurement / Benchmarking	Outcome / Status
4.15 Develop a two-way communications plan for the ORI which incorporates both internal and external communication.	4.15	We shall develop a communication strategy that joins currently dispersed channel of communications tailored for different audiences - All research staff, postdoctoral researchers, & external audiences (e.g. potential new hires, postgraduate students, funders, industry, etc). We will revisit the structure and content of the research website. In particular, develop a page that provides an overview of RCSI research successes (funding, publications, awards, etc) and research metrics. The strategy will cover several methods of communication and dissemination activities that reach local national and international audiences (staff portal, website, handbook, dissemination activities, workshops, conferences).	Institute of Research Support & Development Manager (ORI team)	None	Q1 2017	Document (plan). Positive feedback from research staff and external audiences. Launch of quarterly Inductions for researchers. Revised content of website, handbook and staff portal.	Ongoing
3.15 Commission and deliver a communications plan clarifying the ORI and the Institute of Research (IoR) boundaries and the functions of each. 3.16 Clarify and communicate the role of the ORI in the allocation and management of research space.	3.15 3.16	We shall communicate the new organisational structure of the ORI, including ORI staff roles and responsibilities in relation to the IoR activities and infrastructures, through different communication channels (research committees and workgroup meetings, email, staff portal, website, handbook, researcher forum and, if possible, town hall meetings).	Associate Director of Research & Institute of Research Support & Development Manager	None	Q3 2016	Revised content of researchers handbook Positive feedback form meetings with lab managers Clarity confirmed by staff survey	Ongoing
6.12 Consider alternative ways of collecting customer satisfaction metrics reflecting different stakeholder groups at appropriate times.	6.12	We shall review our customer base, segment it on the basis of activities, support and training needs, develop tailored support and management strategies and satisfaction metrics. We will then develop feedback mechanisms in the form of emails targeting specific ORI support activities (Grant Applications, Technology Transfer, Institute of Research, Agreements, Recruitment, etc), and a more generalised annual survey directed at all staff involved in research activities. All feedback to be coordinated by the QEO.	PDP (ORI team)	None	Q2 2017	Annual Customer satisfaction report	To be actioned
3.18 At an Institutional level consider more frequent meetings of the Research Committee and	3.18	The ToR of the RC is available to all staff on the staff portal. We shall ensure that they are also communicated at the Researcher Forum. The ORI will consult with the RC	Director of Research	None	June 2016	Positive feedback from survey	Ongoing



Quality Improvement Plan July 2016

Recommendation in order of priority	SAR Ref. PRGR Ref.	Response / Action Planned	Responsibility for Action	Resources Implications	Deadline / timeframe	Measurement / Benchmarking	Outcome / Status
-------------------------------------	--------------------	---------------------------	---------------------------	------------------------	----------------------	----------------------------	------------------

communicate the terms of reference		and determine if it would be beneficial to hold more frequent meetings.					
4.16 The ORI will scope out the possibility of establishing and promoting a satellite presence in Beaumont Hospital based on a similar model that is established in the Rotunda Hospital to provide services in grants applications and budgeting, financial management of projects, clinical research support and administration, technology transfer support and industry liaison.	4.16	We shall ensure that support services in the hospitals are delivered effectively and face to face meetings will be held as required.	Senior Research Officer	Office Space, which is currently not available	TBD	Staff satisfaction Support calendar which is evidence of presence	Ongoing
4.17 Develop and implement a training strategy for multi-site delivery	4.17	<p>A range of research specific classroom based and online training is available to all researchers. A less formal lunchtime workshop series on "Supporting Researchers" is also in place. 1:1 coaching for Researchers is available at points throughout the year to support professional development.</p> <p>Instructor led training topics range from Writing for Publication, Research Project Management and Media Skills for Researchers.</p> <p>Online learning is provided through vitae.ac.uk, Lynda.com and naturemasterclasses.com.</p> <p>Offerings are in response to needs identified by Researchers themselves and in line with the Vitae Researcher Development Framework. Another survey of Researchers is planned this year as part of the HRS4R action plan and provision will be modified in accordance with changing needs.</p> <p>All training courses are advertised and made available to staff in all locations as required. They can register for these courses via the staff portal.</p> <p>Intellectual property and commercialisation training will</p>	HR Learning & Development and School of Postgraduate Studies	Ongoing cost involved for classroom based training resources and licences for online resources.	Ongoing	All courses evaluated on completion by participants. Outcome of the HRS4R survey.	In progress



Quality Improvement Plan July 2016

Recommendation in order of priority	SAR Ref. PRGR Ref.	Response / Action Planned	Responsibility for Action	Resources Implications	Deadline / timeframe	Measurement / Benchmarking	Outcome / Status
-------------------------------------	--------------------	---------------------------	---------------------------	------------------------	----------------------	----------------------------	------------------

		alternate between Stephen's Green and Beaumont sites.					
4.22 The Innovations Team develop a suite of training materials to support early career researchers in technology transfer and commercialisation.	4.22	In conjunction, we will develop a training plan for early career scientists to cover intellectual property, commercialisation and industry engagement. This will be rolled out as half day workshop three times a year initially and content will be reviewed for suitability on an ongoing basis. Additional post doc specific engagement is planned in the form of informal clinics coordinate in conjunction with the post doc reps.	Head of Innovation	None	Q2 2016	Number of attendees and satisfaction among attendees with the quality of training (captured from attendees in feedback forms).	Ongoing
6.13 Implement a mentoring and 'buddy' system as part of the HR Strategy for Researchers focusing initially on Early Career Researchers and support talent management initiatives.	6.13	Currently piloting at a senior level through the StAR Advisor programme. Create a buddy system managed/allocated by local management – build this into the on-boarding process. HR Support provided regarding responsibilities. Pilot of 'mentoring' process within a Research area. HR to create guidelines, templates and provide training.	HR L&D, Business Partner & Research Line Managers	None	End Q4 2016	Feedback from participants mid programme and on completion of mentoring.	In progress



Quality Improvement Plan July 2016

Recommendation in order of priority	SAR Ref. PRGR Ref.	Response / Action Planned	Responsibility for Action	Resources Implications	Deadline / timeframe	Measurement / Benchmarking	Outcome / Status
-------------------------------------	-----------------------------	---------------------------	------------------------------	---------------------------	-------------------------	-------------------------------	---------------------

GLOSSARY

BPR	Business Process Review
CRC	Clinical Research Centre
FD	Finance Department
HORC	Health Outcomes Research Centre
HR	Human Resources
IoR	Institute of Research
IRST	Institutional Research Support Team
IT	Information Technology
ORI	Office of Research & Innovation
QEO	Quality Enhancement Office
RC	Research Committee
ROSIT	Research Operations, Support and Infrastructure Team
SPGS	School of Postgraduate Studies
StAR	Strategic Academic Recruitment
TBD	To be determined
TOR	Terms of Reference



Quality Improvement Plan July 2016

Recommendation in order of priority	SAR Ref. PRGR Ref.	Response / Action Planned	Responsibility for Action	Resources Implications	Deadline / timeframe	Measurement / Benchmarking	Outcome / Status
-------------------------------------	--------------------	---------------------------	---------------------------	------------------------	----------------------	----------------------------	------------------

Key recommendations that have emerged from of the quality review and require Institutional Support:

Recommended area of development	Support required from SMT
Review processes, supporting IT systems and policies	Support the outcomes of the end-to-end business reviews so that processes are leaners and, wherever it is possible, administrative workload is taken away from the researchers and delivered by central research support resources shared by HR, Finance, ORI and SPGS. Help us develop a greater culture of engagement, compliance and integrity. Endorse the implementation of new policies
Plan resources for research expansion	Agree institutional research targets (research outputs) that will inform a 3year support and resources plan. Review the plan annually to ensure that the targets are met Support the engagement with affiliated hospitals (as a group) to agree on the approaches and requirements for the implementation of clinical research projects
Seek the endorsement for the development of a pipeline of new IP	Support the negotiation a new MOU with the hospitals group and binding agreements with key hospitals to facilitate RCSI associated clinicians' engagement in research at RCSI.
Dissemination activities	Support a plan that supports and incentivises the dissemination of RCSI research locally and internationally and ultimately enhances RCSI reputation