



UNIVERSIDADE FEDERAL DE PERNAMBUCO  
ARTS AND COMMUNICATION CENTER  
POST-GRADUATE PROGRAM IN INFORMATION SCIENCE

## SELF-ASSESSMENT PROJECT

**Responsible for execution:** Self-Assessment Committee

Recife, September 2020

## SUMMARY

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## 1 SELF-ASSESSMENT PROJECT

Considering the close relationship between PPGCI's Strategic Planning and Self-Assessment, this project presents the actions that fit The Self-Assessment Commission. For this reason, it presents monitoring models and schedules for the Strategic Planning stages and the Self-Evaluation stages, in which is defined the data frequency collection and those responsible for it.

### 1.1 Record of SWOT contextual analysis

One of the tasks of the Self-Assessment Committee is to register the analysis of the internal and external context of the PPGCI, whose analysis was carried out by the strategic planning teams. Table 1 presents the model for presenting these records.

In the analysis of the PPGCI, opportunities are variables or situations external to the program, and, therefore, must be leveraged, as they can benefit it as long as they are identified and used in time. Threats, on the other hand, are variables or situations external and adverse to PPGCI, creating obstacles to their performance and, therefore, must be neutralized.

Strengths, or major points, are features or differentiations of the PPGCI that provide or cause an operational advantage to the Program. The strong point is internal and, therefore, it benefits the Program when faced with threats and opportunities from the external environment. Weaknesses are internal inadequate characteristics or situations that cause an operational disadvantage in the PPGCI. Therefore, the weak point limits the program when faced with threats and opportunities from the external environment.

In Table 1, the Self-Assessment Committee will monitor each team, responsible for each of the PPGCI strategies and, along with the team, should insert only the most relevant Opportunities, Threats, Strengths and Weaknesses in relation to the strategy under analysis.

**Table 1- PPGCI contextual analysis record**

Strategies	Opportunities	Threats	Strong points	Weaknesses	Analysis Date
Program					
Internationalization					
Program Visibility					
Self-evaluation					
Alumni					
Impact on Society					
Innovation and Knowledge Transfer					
Professors					
Students					

Source: Valadares (2003).

## 1. 2 Action plans elaboration

This action is up to the teams responsible for the strategies. This is a 5W2H plan prepared by the team responsible for the Strategies (Table 2).

**Table 2 - Action plan**

		Data da realização							
Plano de Ações de Melhoria									
Estratégia:		Professor responsável:							
		Discentes responsáveis:							
No.	Ação	O quê	Por que?	Quem	Quando	Onde	Quanto	Como	
1									
2									
3									
4									
5									

Source: FNQ (2020).

The 5W2H technique allows the basic and most fundamental information to be clearly defined and the proposed actions (FNQ, 2020). The acronym 5W2H is formed by the initials, in English, which are characterized by seven questions that, once they are well established, doubts are eliminated.

**What-** What improvement actions should be planned? - Refers to the description of the activities that are necessary to solve the problem.

**Why-** Why should these actions be implemented? - Justifies the implementation of the solution.

**Who-** Who will be responsible for putting them into practice? - Establishes the person responsible for implementing the solution.

**When-** When will the actions be carried out, that is, in how long will it take? It is suggested to plan the actions within the 2021-2024 period.

**Onde-** Where, in what location or department will they be held? - Defines the physical location or area where the solution will be deployed.

**How-** How will the actions be carried out? - Establishes the steps to be followed, or the method to be adopted.

**How much** - It concerns the quantity and the time, that is, it is the goal to be reached.

Based on the responses, there is a specific and detailed map of the improvement actions required by the PPGCI.

### 1.3 Action plans control

The PPGCI Self-Assessment Committee is responsible for the specific stage, and it consists of collecting and recording information about the implementation of the action plans, according to the model in Table 3. It is a process of planning control and evaluation and is related to comparisons between planned and performed actions, to ensure that the results (objectives) are achieved. The monitoring also has the purpose of providing feedback to the team responsible for the Strategy in order to make necessary corrections.

**Table 3 - Action Plan Control**

Controle da Implementação das Ações de Melhoria							
Estratégia:		Professor responsável:					
Ação de melhoria		Discentes responsáveis:					
	Responsável	Previsto		Realizado		Status	Justificativa
		Início	Fim	Início	Fim		
1							
2							
3							
4							
5							
6							

Source: FNQ (2020).

In Table 3, the team responsible for the strategy records the actions the expected date for the implementation, as planned and recorded in Table 2. It will be up to the Self-Assessment Committee to control the implementation of the actions, filling in the other fields of Table 3: check if the actions were or are being carried out. In the “status” box, the Self-Assessment Committee registers one of the four options:

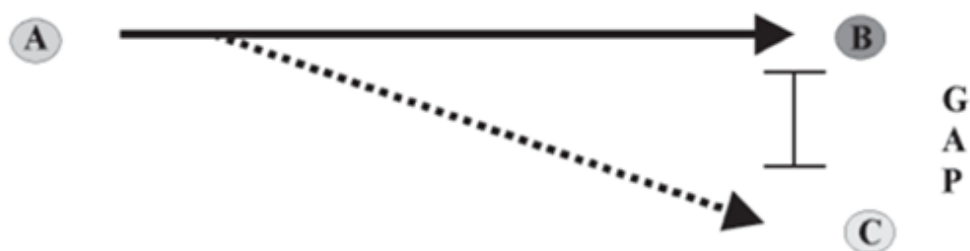
- I. **Still to start** (when it is not expected to take place until the date of the control);
- II. **In progress** (when it is already in progress, that is, being implemented);
- III. **Late** (when it should have been started, but it was not);
- IV. **Finished** (when the action has already been taken).

The justification (Table 3) will be elaborated only when the status is late. In these situations, the person responsible for the action justifies it to the Self-Assessment Committee, which records it in the respective field in Table 3.

#### 1.4 Monitoring of results

This step, coordinated by the Evaluation Committee, should be carried out with the participation of the teams responsible for the Strategies. The results of each action evaluated, that is, the results of each goal, will be compared with the desired situation - the one that was planned. In situations where the results have not been achieved, the situation will be understood as a problem (Figure 2) and, consequently, will be the object of analysis. Problem is any difference between the current situation found (gap) and the desired situation.

**Figure 2** - Identification of a problem



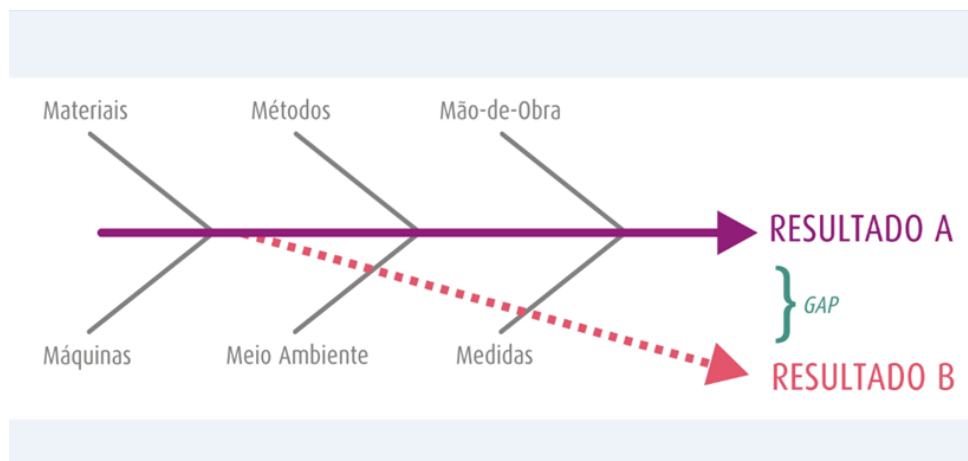
**Source:** Adapted from Mello et al. (2002).

In these situations, the causes of the problems will be identified, and new improvement action plans will be proposed to solve them. At this stage, the Ishikawa diagram (Figure 3) will constitute the analysis technique.

The Ishikawa diagram (or Diagram of Cause and Effect or Fishbone) makes it possible to structure hierarchically the causes of a given problem, as well as its effects on the quality of services (MELLO et al., 2002).

Ishikawa proposed a method to analyse the problems in six categories of causes: Method, Materials (or Raw Material), Labour (or Human Resources), Machines, Measures and Environment. These categories classify the potential causes of a given problem and, thus, it will be possible to clearly identify the main causes.

**Figure 3** - Cause and effect diagram.



**Source:** Adapted from Mello et al. (2002).

When many causes are identified, the GUT Matrix, technique proposed by Kepner and Tregoe (1981), is used to prioritize the causes of problems, taking into account their severity, urgency and tendency:

G - Severity refers to the impact of the problem on operations or people in the organization;

U - Urgency is the time needed to solve the problem;

T - Trend is the potential to worsen the problem.

Table 4 presents the scale to be used and Table 5, how to prioritize the causes.

**Table 4 - Scale of the GUT matrix**

Note	Gravity	Urgency	Trend ("If nothing is done ...")
5	extremely serious	need immediate action	... it will get worse quickly
4	very serious	is urgent	... it will get worse in a short time
3	serious	as fast as possible	... it will get worse
2	less serious	not so much urgent	... it will get worse in the long run
1	not serious	it can wait	... it will not change

**Source:** Kepner and Tregoe (1981).

Therefore, a form registers the cause of the problem and distributes the evaluation in the columns, assigning scores from 1 to 5 for each listed cause, as shown in Table 5.

**Table 5 - Analysis and prioritization of the causes of the problem**

N°	List of causes	G	U	T	G x U x T	Prioritization
1						
2						
3						
4						
...						

**Source:** Kepner and Tregoe (1981).

As shown in Table 5, initially all causes are recorded in the specific column. Posteriorly:

- a. Column G is intended to receive a score for severity,
- b. Column U is intended to receive the score for urgency,
- c. Column T is intended to receive the score for the trend,
- d. Another column contains the product of the G x U x T evaluations,
- e. The last column is used to prioritize the causes, resulting from the result of the evaluation, that is, the attribution of grades and their multiplication (GXUXT).



The main causes identified, usually the first three, should receive attention, preferably through a new action to correct the problem, as shown in Table 6.

**Table 6 - Monitoring of results**

		Data da realizaç				Comissão de Autoavaliação					
Monitoramento dos resultados											
Estratégia:		Professor responsável:									
		Discentes responsáveis:									
No.	Ações	Metas planejadas				Metas realizadas				Causa do Problema	Ação corretiva
		2021	2022	2023	2024	2021	2022	2023	2024		
1											
2											
3											
4											
5											

**Source:** FNQ (2020).

The proposed new actions must be presented by the teams responsible for the strategies for approval at the PPGCI collegiate. Subsequently they enter the monitoring cycle like the others.

### 1.5 Results release

The results of the contextual analysis and the action plans may be disseminated in the models in Tables 1 and 2 of this document. The Self-Assessment Committee may propose other reports, for specific audiences, structured in such a way as to contain, at a minimum:

- I. Scope of evaluation;
- II. Responsible for data collection and analysis;
- III. Date of data collection;
- IV. Results found;
- V. Proposed improvements.

It is understood that the systematic monitoring of the performance of the improvement action plans and their publication, can be an opportunity to improve the transparency of the PPGCI with the academic community, as long as the Self-Assessment

Committee is attentive to minimize possible constraints that may result in a negative impact on the process.

#### 1.6 Execution schedule

In Table 7, the steps are outlined in Strategic Planning.

**Table 7** - Strategic Planning Schedule

Phases	Responsible	Date
Establishment of the Strategic Vision	PPGCI Collegiate	February / 2020
Defining Strategies	Coordination (with collegiate approval)	February / 2020
Strategic Diagnosis (Analysis of the current situation of the strategies)	Teams responsible for strategies	July / 2020 to July / 2021
Contextual Analysis (SWOT Analysis)	Teams responsible for strategies	May- June / 2021
Elaboration of action plans	Teams responsible for the strategies (later collegiate approval)	August/November / 2021

**Source:** PPGCI Self-Assessment Commission (2020).

Next the steps to be performed during an estimated period are defined and detailed. Although on separate schedules, it is possible to perceive the dependency relationship between the activities of Strategic Planning and Self-Assessment. If necessary, you will not hesitate to adjust any planning stage to ensure its effectiveness.

Table 8 shows the self-assessment activities organized in stages, and as we read, some stages require the participation of the team responsible for each of the strategies. However, after drawing up the Action Plans, the Self-Assessment Committee takes over the process (see Table 8).

**Table 8 - Self-Assessment Schedule**

Phases	Responsible	Date
Coordination Preparation: Meeting with PROPG	Dean office of Graduate Studies and UFPE's Own Evaluation Committee	08/28/2020
Webinar participation: Self-assessment of graduate programs and institutional strategic planning for graduate courses	Webinar promoted by Unesp - lecture given by Professor Robert Evan Verhine, from the Federal University of Bahia (UFBA), coordinator of the Education area at CAPES and coordinates the Self-Assessment Work Group of Postgraduate Programs	09/11/20
Preparation for Self-Assessment: student's awareness	Coordination, remote meeting convened for this purpose	9/17/2020
Preparation for Self-Assessment: professors' awareness	Collegiate meeting	10/1/2020
Definition of the Self-Assessment Committee	Collegiate meeting	10/1/2020
Elaboration of the Self-Assessment Guidelines and the Self-Assessment Project	Self-Assessment Committee, with approval by the Board	October / 2020
Record of SWOT contextual analysis	Self-Assessment Committee with the participation of the teams responsible for the strategies	April / 2021
Elaboration of Action Plans (see Table 2)	Teams responsible for strategies	May / 2021
Control of action plans (see Box 3)	Self-Assessment Committee	July to November 2021
Monitoring of results (see Table 6)	Self-Assessment Committee with the participation of the teams responsible for the strategies	January / February 2022/2023/2024
Results Release	Self-Assessment Committee	June / 2021
Elaboration of new Improvement Plans	Participation of the team responsible for the strategies	January / February 2022/2023/2024
Control of new Action Plans	Self-Assessment Committee	March 2022/2023/2024
Disclosure of Results	Self-Assessment Committee	May 2022/2023/2024

**Source:** Self-Assessment Committee (2020).

## REFERENCES

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