



TUS

**Technological University of the Shannon:
Midlands Midwest**

Ollscoil Teicneolaíochta na Sionainne:
Lár Tíre Iarthar Láir

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TUS Policy on Linked Provision and Linked Provider Framework 2022 – 2025



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1.0 Introduction

The Technological University of the Shannon: Midlands Midwest (hereafter referred to as TUS or the Technological University) operates under the Technological Universities Act 2018^[1], the Qualifications and Quality Assurance (Education and Training) Act 2012^[2] and the Qualifications and Quality Assurance (Education and Training) (Amendment) Act 2019^[3]. Pursuant to the Qualifications and Quality Assurance (Education and Training) (Amendment) Act 2019, TUS is an autonomous independent awarding body to level 9 of the National Framework of Qualifications (NFQ) and as such is a recognised Designated Awarding Body (DAB). Designated Awarding Bodies are those bodies with the authority in law to make awards. The Qualifications and Quality Assurance (Education and Training) Act 2012 establishes the concepts of a Designated Awarding Body and a Linked Provider. The 2012 Act, defines Designated Awarding Body (as amended by the Technological Universities Act^[1] 2018 and the 2019 (Amendment) Act) (Section 2 (1)) and Linked Provider (as amended by the 2019 Act) (Section 2 (3)) as follows:

Designated Awarding Body (DAB)

“a previously established university, the National University of Ireland, an educational institution established as a University under section 9 of the Act of 1997, a technological university, an Institute of Technology, the Dublin Institute of Technology and the Royal College of Surgeons in Ireland”

Linked Provider

“a provider that has a place of business in the State and is not a designated awarding body but enters into an arrangement with a designated awarding body under which arrangement the provider provides a programme of education and training that satisfies all or part of the prerequisites for an award of the designated awarding body”.

Pursuant to Sections 28 (1) of the 2012 Act, as amended by the 2019 (Amendment) Act, *“each relevant provider, linked provider and associated provider shall establish procedures in writing for quality assurance for the purposes of establishing, ascertaining, maintaining and improving the quality of education, training, research and related services the provider provides”*. Furthermore, pursuant to Section 28 (6) of the 2012 Act, *“a relevant provider or linked provider who organises or procures a programme of education and training which is provided, wholly or partly, by another person shall, in so far as the procedures to be established by the relevant provider or linked provider under subsection (1) relate to that part of the programme provided by that person, agree those procedures with that person”*. Section 33 (1) of the Act states that a Linked Provider shall submit a draft of its proposed procedures to the relevant DAB for approval. Therefore the 2012 Act places an obligation on DABs to approve,

monitor and review its Linked Providers' quality assurance (QA) procedures.

As a result of the Technological University Act (2018) the Technological University of the Shannon: Midlands Midwest falls under the definition of a DAB. As such, TUS recognises its statutory responsibilities in respect of Linked Providers and commits to meeting those responsibilities.

The provisions of the Act are supported by *Sector-specific Quality Assurance Guidelines for Designated Awarding Bodies*^[4], published by Quality and Qualifications Ireland (QQI). The guidelines are applicable to designated awarding bodies as autonomous awarding bodies, responsible for their own programmes of education and training, research and related services and for any programmes offered by Linked Providers leading to awards made by the Designated Awarding Body.

Under Section 32 of the 2012 Act, where a Designated Awarding Body is a relevant provider to whom Section 28 applies, and the Designated Awarding Body proposes to make an award in respect of a programme of education and training of a Linked Provider, the Designated Awarding Body shall, in establishing procedures under Section 28, include procedures for:

- (a) consideration and approval of proposed procedures submitted by a prospective linked provider;
- (b) review the effectiveness of procedures established by the Linked Provider under that section;
- (c) review the effectiveness of the implementation by the Linked Provider of those procedures;
- (d) the appointment of an Independent Appeals Person for the purposes of hearing an appeal by a recognised Linked Provider and for the hearing of that appeal.

2.0 Purpose of the Policy

The Linked Provider Framework set out in this Policy provides a basis for TUS to exercise its statutory obligations as a DAB and it takes due regard of the *QQI Sector-specific Quality Assurance Guidelines for Designated Awarding Bodies*.

As outlined in the Policy, the relationship between TUS and its Linked Providers will largely be framed by inter-institutional Memorandums of Understanding (MoU) and Memorandums of Agreement (MoA) in addition to the quality assurance enhancement (QAE) oversight arrangements articulated in this framework document. TUS will

consider entering a Linked Provider relationship (referred to in this document as ‘linked provision’) with third-party educational providers on a case-by-case basis. TUS will enter into such a relationship only after if (i) the relationship aligns to the strategic aims and objectives of TUS and is compatible with and supports the *TUS Policy on Quality Assurance and Enhancement*^[5] and (ii) it can be demonstrated that the statutory requirements associated with linked provision can be fully met. This includes compliance with the *Standards and Guidelines of the European Higher Education Area* (ESG 2015)^[6], the *QQI Core Statutory Quality Assurance Guidelines*^[7] and the *QQI Sector-specific Quality Assurance Guidelines for Designated Awarding Bodies*.^[4]

3.0 Scope of the Policy

The purpose of the policy is to set out the approach of TUS to linked provision and to specify the Institutional approach to:

- a) meet its statutory obligations as a Designated Awarding Body;
- b) articulate an Institutional Framework in respect of its Linked Providers;
- c) present procedural documentation that facilitates the implementation of this framework;
- d) clarify governance and oversight responsibilities in relation to linked provision;
- e) provide information in a transparent manner to interested parties, internal and external to TUS, in relation to its linked provision policy and procedures;
- f) provide assurance to interested parties that TUS’s linked provision arrangements are in line with national statutory requirements.

It is acknowledged that TUS has established a broad range of collaborative provision relationships under its status as a delegated authority and that the majority of these relationships would not be categorised as Linked Provision/Linked Provider as outlined in Section 1.0. A separate process will be initiated by TUS Management for the identification of Institutions whose existing links with TUS are such that the term ‘Linked Provider’, as defined in the 2012 Act, (and as amended by the 2019 Act) is applicable. While this policy does not set out the parameters of that process, this policy will apply to any Linked Provider relationships that are identified by that process. The policy will also apply to any new prospective Linked Provider relationships established in the future.

4.0 The TUS Linked Provider Framework

The overarching procedures governing Linked Provision are consolidated into an integrated framework constituting three Parts (Figure 1):

Part A: Approving the relevant QAE procedures of current recognised linked

providers;

Part B: Establishing a relationship with prospective linked providers; and

Part C: Annual monitoring and periodically reviewing the relevant QAE procedures of recognised Linked Providers.

TUS would like to acknowledge that this Linked Provider Framework has been adapted from the Linked Provider Framework implemented at the University of Limerick

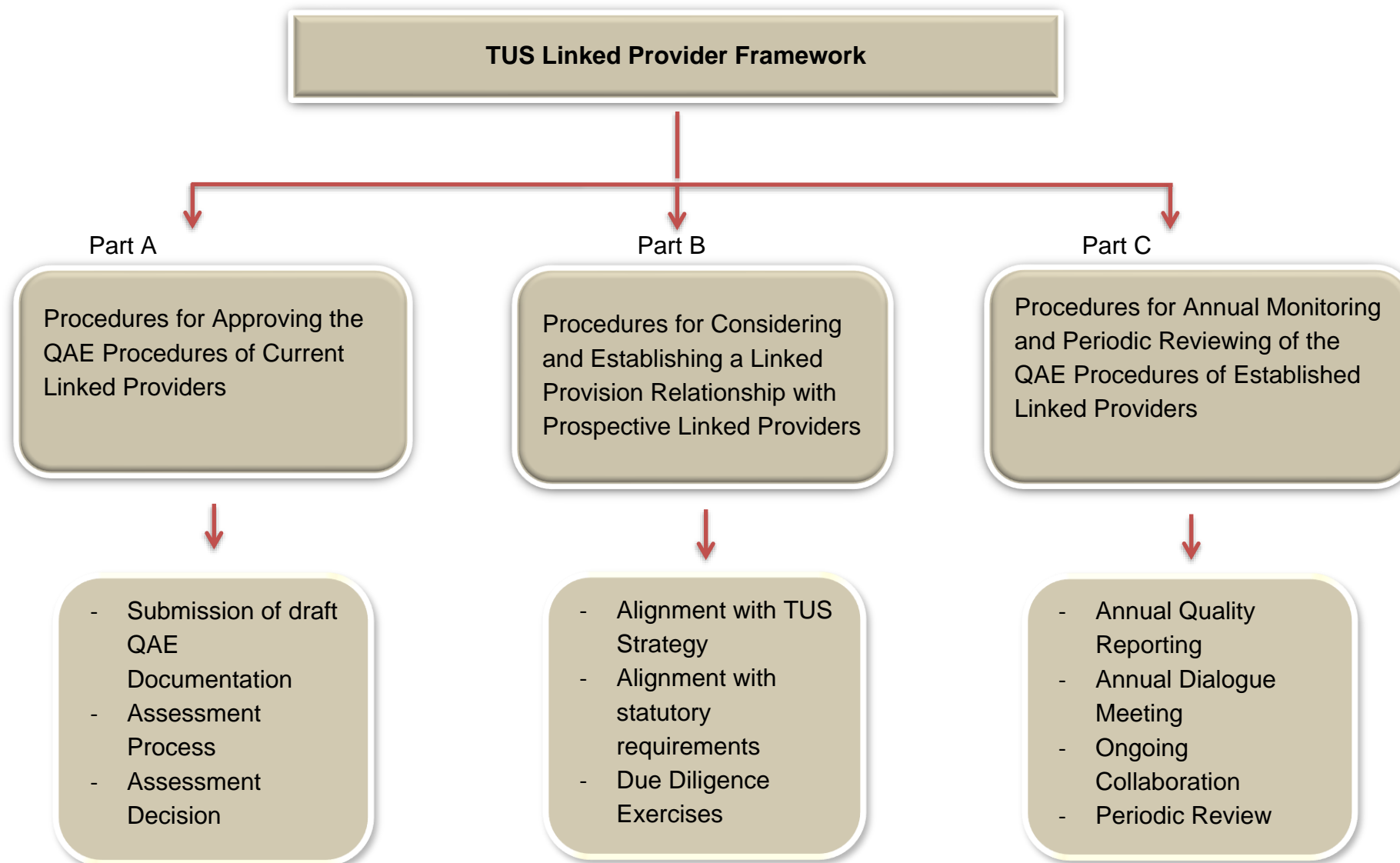


Figure 1. TUS Linked Provider Framework

4.1 Part A: Procedures for Approving the QAE Procedures of Current Recognised Linked Providers

This Part of the framework specifies the procedures that TUS (as a DAB) will apply when considering for approval the QAE procedures of its existing Linked Providers. It applies to Institutions whose existing links with TUS are such that the term ‘Linked Provider’, as defined in the 2012 Act, (and as amended by the 2019 Act) can be applied to those institutions described herein as ‘current’ recognised linked providers. The statutory basis of Linked Providers and their relationship to Designated Awarding Bodies has been described in Section 1.0.

These procedures are designed to formalise and, if necessary, facilitate the realignment of existing inter-institutional QAE arrangements and oversight to ensure alignment with statutory obligations. Additional inter-institutional arrangements, such as those specified in, or underpinned by, an MoU/MoA or localised (e.g. programme-level) arrangements and oversight will continue to operate with a view to complementing this process in terms of the totality of the inter-institutional relationship.

As well as being informed by relevant sections of the 2012 Act ^[2], these procedures are informed by the *QQI Sector-Specific Quality Assurance Guidelines for Designated Awarding Bodies* (2016) developed by Quality and Qualifications Ireland ^[4].

Part C of this Framework, namely, *Procedures for Monitoring and Reviewing the QA Procedures of Established Linked Providers*, is also applicable to all TUS recognised Linked Providers.

4.1.1 Procedure for Approval of the Draft QAE Procedures

- a) In consultation with the Vice President Academic Affairs and Registrar (VPAAR), the Head of Quality (HOQ) invites the Linked Provider to submit a completed application form as set out in Appendix 1. The application must be accompanied by the Linked Provider’s draft QAE procedures (as specified, for example, in a Quality Manual) and any related documentation requested by the HOQ. The precise nature of the related documentation required is determined by the HOQ in consultation with the VPAAR, as appropriate to context.
- b) The HOQ reviews the application form for completeness and checks that all the requested documentation has been submitted. The HOQ may subsequently request the Linked Provider to submit additional documentation.

- c) The VPAAR or their nominee convenes a Linked Provider Assessment Panel to consider the provider's QAE procedures. The assessment panel will comprise:
- VPAAR (Chair) or nominee
 - Dean of Faculty or nominee
 - Head of Department
 - A member of the Academic Council Sub-committee on Quality and Academic Standards, as nominated by the VPAAR
 - HOQ
 - The VPAAR may seek external input if deemed appropriate.
- d) During its review of the Linked Provider's QAE procedures, the Assessment Panel assesses the extent to which the Linked Provider has met the relevant requirements, i.e. compliance with statutory requirements and alignment with the TUS's frameworks, policies and guidelines.
- e) At its discretion, the panel may elect to seek additional information and/or request meetings with Linked Provider representatives. It may also conduct site visits to the Linked Provider or seek additional information or input from any third party it deems appropriate.
- f) Following its review of the Linked Provider's QAE procedures, the assessment panel agrees to recommend one of the following four outcomes:
1. approve the proposed procedures as presented;
 2. approve the proposed procedures as presented but include specific recommendations and timelines for future enhancements;
 3. do not approve the procedures but make recommendations, which must be met prior to resubmitting the procedures for approval;
 4. do not approve the procedures.

Refer to Actions listed in Table 1 with respect to each outcome.

- f) The recommendation and a short justification are forwarded by the Faculty to the V. P. Council and Academic Council for consideration ratification as appropriate.
- g) Once the recommendation has been approved the VPAAR notifies the Linked Provider of the outcome of the review.
- 5 Any existing MoA is reviewed and a new MoA as a Linked Provider is developed.
- 6 The agreed MoA's are signed by the President of TUS and Chief Officer of the

Table 1. Actions for specified outcomes (Section 4.1.1 e) of the review of draft QA Procedures of Prospective Linked Providers

Outcome	Action
Outcome 1	The Linked Provider publishes the QAE procedures in such form and manner as directed by TUS and provides a copy of the published procedures to TUS.
Outcome 2	<p>The Linked Provider implements the enhancement recommendations, updates the procedures accordingly and provides TUS with a copy of the updated procedures.</p> <p>The Linked Provider publishes the QAE procedures in such form and manner as directed by TUS and provides a copy of the published procedures to TUS.</p>
Outcome 3	The Linked Provider sets about implementing the recommendations and, in due course, resubmits the draft QAE procedures to TUS for approval.
Outcome 4	TUS reserves the right to cease to award the Linked Provider's programme(s). Where TUS does not approve a Linked provider's QA procedures, the Linked Provider may appeal against the decision in accordance with Section 39 (5) of the 2012 Act using the Appeals Procedure as set out in Section 5.0 of this Policy.

A flow diagram illustrating the main stages of the procedures for *Approving the QAE Procedures of an Existing Linked Provider* is presented in Figure 2.

Part A: Approving the QAE Procedures of an Existing Provider

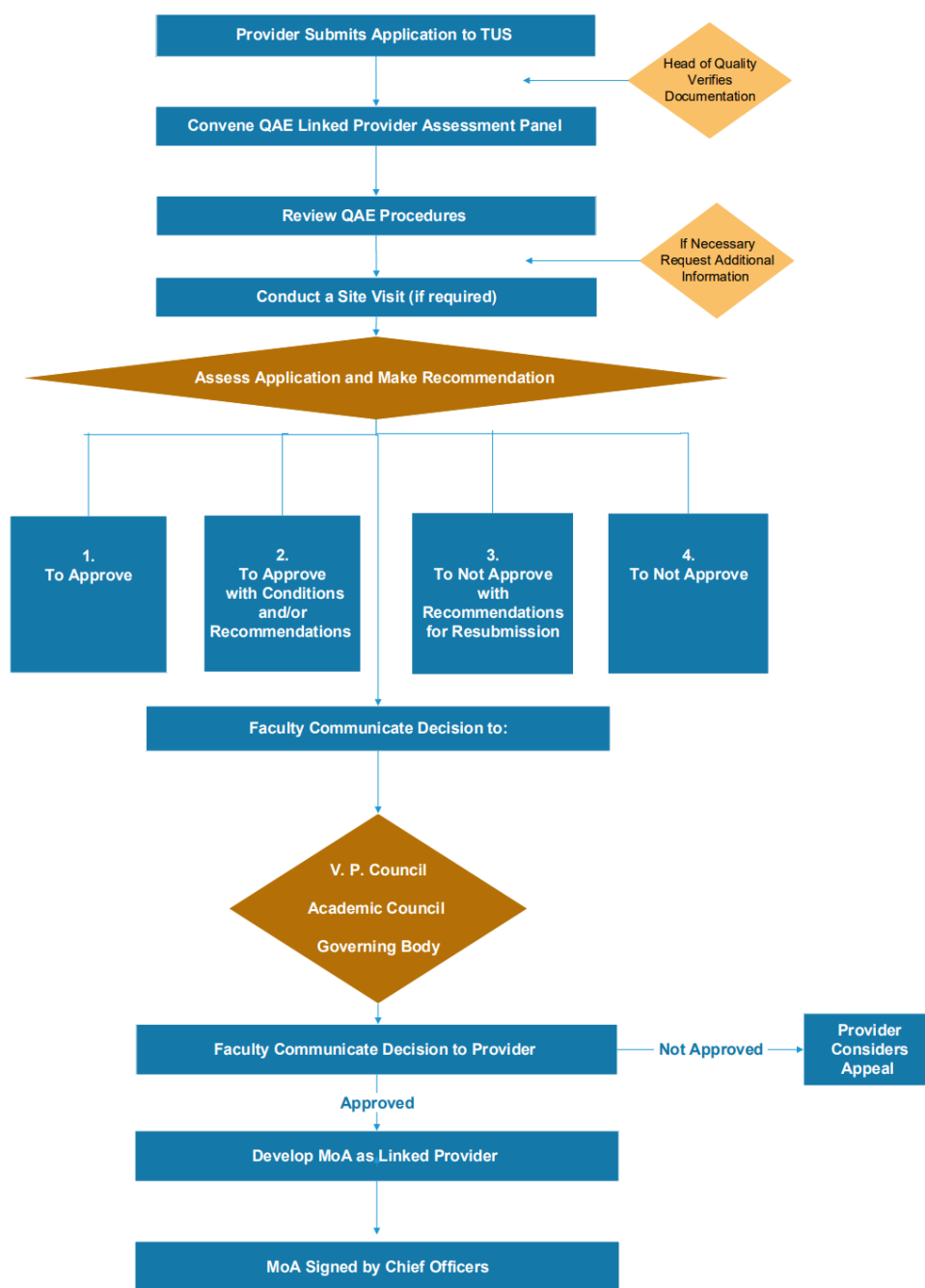


Figure 2. Illustration of the Procedures for Approving the QAE Procedures of an Existing Provider

4.2 Part B: Procedures for Establishing a New Relationship with a Prospective Linked Provider

This section of the Framework describes the procedures TUS will follow in considering establishing a linked provision relationship with a prospective (new) Linked Provider and, if appropriate, when establishing such a relationship. The relevant statutory requirements as specified in the relevant Acts^{[1],[2],[3]} and the QQI Sector-specific Quality Assurance Guidelines for Designated Awarding Bodies^[5] are incorporated into these procedures.

There are three discrete stages to establishing a prospective Linked Provider relationship as outlined in Figure 3.

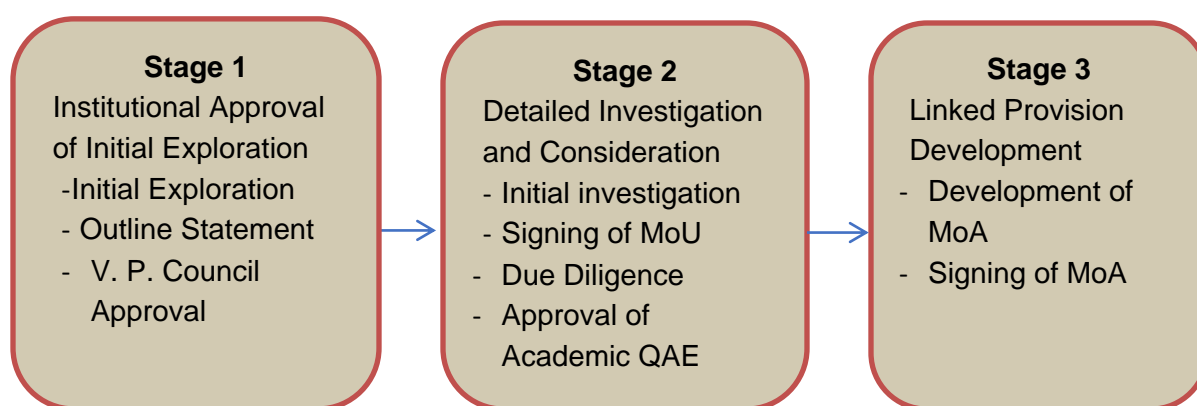


Figure 3. Overview of the stages for Establishing a prospective Linked Provider relationship

4.2.1 Stage 1: Institutional Approval for Initial Exploration

It is recognised that proposals for linked provision may arise from a range of sources including strategic alliances between higher education providers and the emergence of common teaching or research interests in different institutions. The commencement of any linked programme provision typically involves a Dean of Faculty/School and/or Head of Department undertaking exploratory discussions with, and preliminary background research on, potential linked partners.

Any planned linked provision activity shall be notified to the relevant Dean of Faculty/School by the Proposed submitting an Outline Statement. The Dean of Faculty/School submits the Outline to the V. P. Council and requires a positive recommendation from the V. P. Council to proceed to full investigation. This allows

any emerging arrangement to be governed and managed strategically and systematically and in full integration with the overall strategic goals and development plan of TUS.

The Outline Statement sets out overall parameters of the linked provision proposal in terms of:

- strategic justification;
- legal considerations;
- negotiation and development;
- management and/or oversight;
- quality assurance;
- nature and ownership of programmes and awards;
- programme(s) involved and programme validation;
- delivery and assessment mechanisms;
- professional/regulatory body recognition;
- learner entitlements; and
- business case and estimate of costs.

While the individual points do not require elaboration in detail, the Outline Statement needs to provide sufficient information on each point to allow for an informed decision on the part of the V. P. Council. The V. P. Council considers the proposal as detailed in the Outline Statement and makes one of the following recommendations:

- a) grants approval to perform a detailed investigation and consideration of the linked provision proposal;
- b) requests further information and the resubmission of the Outline Statement;
- c) does not grant approval to proceed with the proposed investigation.

4.2.2 Stage 2: Linked Provision Investigation and Assessment

There are two key parts to the linked provision investigation and assessment, namely;

1. Due Diligence Investigation
2. Assessment of the QAE System of the Proposed Linked Provider

The intending collaborators sign a Memorandum of Understanding (MoU) that will enable the sharing of information to enable a Due Diligence Investigation and an assessment of the QAE procedures of the Linked Provider and to be completed. The MoU will be established prior to these steps to set the enabling framework for the sharing of confidential information including a data sharing agreement. Both

institutions shall ensure full compliance the EU General Data Protection Regulation (GDPR)^[8] and Data Protection Acts 1988–2018^[9] and with the TUS Data Governance Policy.^[10] The President, or their designee, signs any MoU on behalf of TUS. The MoU must be countersigned on behalf of any other party by a representative of similar status and with the authority to enter into such an agreement.

4.2.2.1 The Due Diligence Investigation

The due diligence process helps to determine the level and likelihood of exposure that might be anticipated and how it should be contained and managed. The paramount consideration informing any risk assessment must be learner protection.

- a) Overall oversight over the due diligence search related to a proposed collaborative arrangement remains with the V. P. Council.
- b) The due diligence involves a detailed investigation of the proposal under five key risk areas and will take account of the guidance for due diligence provided in the *QQI Sector-specific Quality Assurance Guidelines for Designated Awarding Bodies*^[4]. The five key risk areas are:
 1. financial risk;
 2. legal risks;
 3. academic risks;
 4. operational risks;
 5. reputational risk.
- c) Responsibility for the conduct of due diligence enquiries into Financial and Legal Risks will lie with the Office of the Vice President of Finance and Corporate Governance, unless otherwise determined by the President.
- d) Responsibility for due diligence enquiries into Academic Risks will lie with the Office of the Vice President of Academic Affairs and Registrar, unless otherwise determined by the President.
- e) Responsibility for due diligence enquiries into Operational and Reputational Risks will be determined by the V. P. Council on a case-by-case basis, depending on the nature of the potential risk. Operational and Reputational risks will intrinsically form a part of the investigation of the financial, legal and academic risks.
- f) TUS will establish detailed criteria for evaluation of the risk categories that align with the specific context of the proposed Linked Provider context.
- g) TUS will require the prospective partners to conduct a self-evaluation against those criteria and submit relevant documentation as required to

complete the due diligence investigation. Independent validation of the self-evaluation may be required along with independent investigations.

- h) Given the developmental nature of the proposed collaboration, due diligence enquiries should be carried out in consultation with the TUS proposers, and in a manner appropriately respectful of both the proposed partner and the preliminary stage of the discussions.
- i) As part of the due diligence process, provisions will be made for at least one site visit to the prospective Linked Provider by TUS representatives, including a meeting with key stakeholders and a visit to the key learning facilities and resources. This is necessary to ensure that local facilities and infrastructure are adequate in order to validate equivalence of learner experience.
- j) To support the due diligence process, the applicant provides documentation that enables the following requirements to be assessed:
 - legal status, reputation and compliance;
 - financial sustainability;
 - organisational structure, governance and management of QAE;
 - QAE system and procedures;
 - equality, diversity & inclusion policies;
 - additional information as requested by TUS to enable completion of the due diligence investigation.
- g) The recommendation and a short justification are forwarded by the Faculty to (i) the V. P. Council, and (ii) Academic Council via Sub-Committee on Quality Management: Assurance, Enhancement & Integration for their consideration and approval.
- h) The relevant Vice President with responsibility for due diligence in the respective risk area shall collate a report of the due diligence investigation. The Reports shall contain an overall finding and recommendation be submitted to the V. P. Council for consideration.

4.2.2.2 Assessment of the QAE System of the Proposed Linked Provider

- a) The prospective Linked Provider submits a Linked Provider Application Form and accompanying documentation as outlined in Appendix 1. The prospective Linked Provider submits its draft QAE procedures (as specified, for example, in a Quality Manual) and any relevant documentation requested by TUS.
- b) The prospective Linked Provider shall be asked to submit an evidence-based self-

assessment of how it complies with relevant statutory QQI QA guidelines.

- c) The VPAAR, convenes a Linked Provider QAE Assessment Panel to assess the QAE System of the prospective linked provider. The membership of the panel shall comprise:
- VPAAR (Chair) or nominee;
 - Dean of Faculty or nominee;
 - Head of Department or nominee;
 - A member of the Academic Council Sub-Committee on Quality Management: Assurance, Enhancement & Integration, nominated by the VPAAR;
 - An External representative nominated by the VPAAR;
 - HOQ.
- d) The Linked Provider QAE Assessment Panel has two functions:
1. To contribute to an evaluation of academic risks as part of the due diligence exercise described in Section 4.2.2.2; and,
 2. To make a finding with respect to the approval of the QAE system of the prospective linked provider.
- e) The Linked Provider Assessment QAE Panel assesses the extent to which the Linked Provider has met relevant (QAE-specific) requirements. Depending on the context, the panel may make a decision based on a desk review and discussion of the documentation submitted. The Panel may also seek third-party input into the process at its discretion.
- f) Following assessment by the panel, the VPAAR, or their nominee, coordinates the collation of a Report of the Linked Provider QAE Assessment Panel.
- g) Following its review of the QAE System, the Linked Provider QAE Assessment Panel may recommend one of the following four outcomes:
1. approve the proposed procedures as presented;
 2. approve the proposed procedures as presented but include specific recommendations and timelines for future enhancements;
 3. do not approve the procedures;
 4. do not approve the procedures but make recommendations, which must be met prior to resubmitting the procedures for approval.

The Report of the Panel is presented to the V. P Council and Academic Council for consideration and ratification as appropriate.

4.2.2.3 Approval of the Prospective Linked Provider as a TUS Recognised Linked Provider

- a) The V. P. Council considers the Due Diligence Report received from the VPAAR and takes into account the evidence, analysis and conclusions of the report.
- b) Based on these considerations, the V. P. Council will issue a recommendation on the further development of the proposed collaborative arrangement. It may recommend that:
 - 1. development of the arrangement should be progressed;
 - 2. development of the arrangement should be terminated;
 - 3. the parameters of the arrangement should be modified with a proposal resubmitted.
- c) The V. P. Council will notify the proposers of the reasons for its recommendation through the Faculty/School structure.
- d) Upon endorsement by the V. P. Council, the recommendations will be formally presented for ratification by Academic Council.
- e) Where the V. P. Council and Academic Council has recommended approval of the Linked Provision arrangement, the Faculty/School shall inform, in writing, the partner organisation. The proposers in conjunction with the proposed partners should commence preparation of a detailed Memorandum of Agreement (MoA) as outlined in Section 4.2.3, Stage 3, Linked Provision Development, as appropriate.
- f) Where the V. P. Council and Academic Council has recommended that a proposed collaboration should not be pursued, the Faculty shall inform, in writing, this decision to the proposed partners.
- g) Where TUS does not approve a Linked Provision arrangement, the Linked Provider may appeal against the decision using the Appeals Procedure as set out in Section 4.3.3 of this Framework.

4.2.3 Stage 3: Linked Provision Development

Once the academic linkage has been approved, a comprehensive MoA shall be developed between TUS and the recognised Linked Provider. The MoA shall make provision for the academic management, assessment and QAE procedures and processes. The precise nature of the relationship between TUS and the Linked Provider shall be articulated in the MoA. The MoA will contain clauses that shall include

but are not limited to:

- a) The scope of provision covered by the agreement;
- b) A statement on what aspects of this policy, if any, are delegated to the linked provider;
- c) A statement on the academic regulations that apply to the linked programmes;
- d) A statement on the obligations of the Linked Provider in respect of quality assurance procedures;
- e) A statement outlining the content and design of the award parchment to be provided to learners;
- f) A statement on the obligations of TUS to approve, monitor and review those procedures;
- g) Arrangements for the termination of the agreement;
- h) A statement on the arrangements in place for the protection of learners in the case of termination of the agreement.

In the event of the termination of the academic linkage between TUS and the recognised Linked Provider, TUS shall ensure that the learners enrolled on linked programmes leading to awards of the Technological University are protected. TUS and the recognised Linked Provider shall implement, on commercially reasonable terms, arrangements to enable students who are enrolled on programmes that are accredited by TUS and are the responsibility of the recognised Linked Provider to complete their programmes.

- i) The MoA shall be submitted to V. P. Council for approval.
- j) The President signs any MoA on behalf of the TUS. The MoA must be countersigned on behalf of any other party by a representative of similar status and with the authority to enter into such an agreement.

The MoA shall take full cognisance of the principles and procedures relating to Standards, Awards and Certification as outlined in Appendix 2.

A flow diagram illustrating the main stages of the *Procedures for Establishing a New Relationship with a Prospective Linked Provider* is presented in Figure 4.

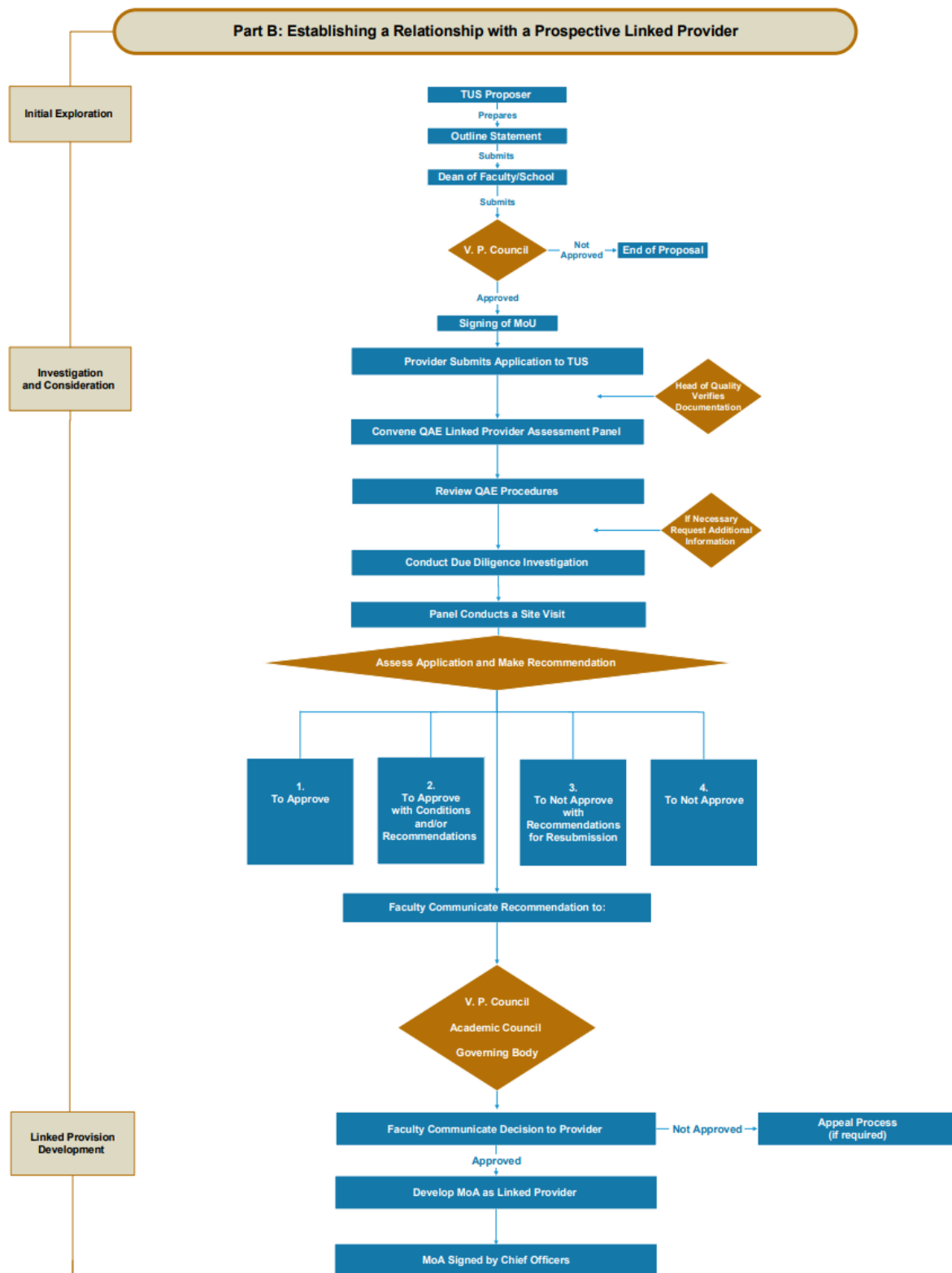


Figure 4. Procedures for Establishing a Relationship with a Prospective Linked Provider.

4.3 Part C: Procedures for Annual Monitoring and Periodic Reviewing the QA Procedures of Recognised Linked Providers

This part of the framework describes how TUS monitors and reviews the effectiveness of the QAE procedures of its linked providers. Additional inter-institutional arrangements, such as those specified in or underpinned by an MoU/MoA or localised (e.g. programme-level) arrangements and oversight will continue to operate with a view to complementing this process in terms of the totality of the inter-Institutional relationship and fulfilling statutory requirement.

There are three distinct procedural elements described in this part of the framework:

1. Annual monitoring and review of the already-established QA procedures of the linked provider
2. Periodic review of the adequacy and effectiveness of the implementation of the QA procedures by the linked provider
3. Linked Providers appeals procedure.

4.3.1 Annual Monitoring of Established QA Procedures

The approach that TUS will adopt for the oversight of its Linked Providers involves both annual monitoring and periodic review. The model is largely based on the approach taken by QQI for the oversight of awarding bodies nationally but with a scale proportionate to the DAB, Linked Provider context. The annual monitoring involves the submission of an Annual Quality Report (AQR) by the Linked Provider to TUS followed by an Annual Dialogue Meeting (ADM). This annual monitoring is complemented by periodic review involving a comprehensive review with external input at least every 7 years (Figure 2).

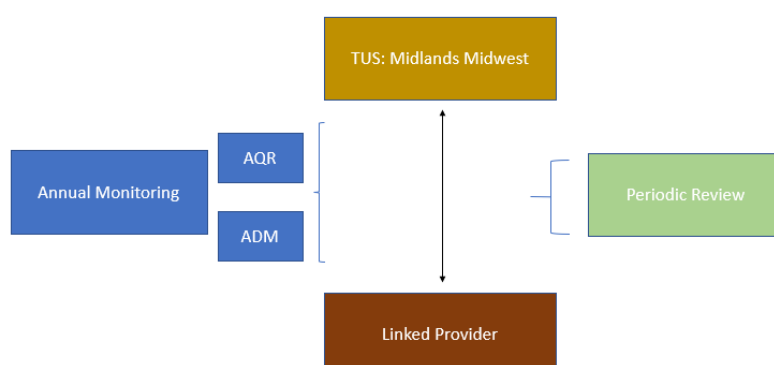


Figure 2 TUS Oversight of Linked Provider Quality Assurance Model

- a) The Head of Quality (HOQ) provides the Linked Provider with a Linked Provider AQR template and invites the Linked Provider to return the completed report to the HOQ by a given date. A sample AQR template is provided in Appendix 3.
- b) The report template may be tailored by the HOQ to suit the specific context. The purpose of the report is to provide TUS with an overview of the QA activities and enhancements undertaken by the Linked Provider in the previous year and to indicate planned QA activities and enhancements for the coming year.
- c) If the Linked Provider's Quality Manual has been updated during the year under review, a copy of the updated manual, with the changes highlighted, must accompany the AQR.
- d) It is necessary for a recognised Linked Provider to submit an AQR annually, at a date agreed between TUS and the Linked Provider and, at some point in Quarter 1 of each calendar year.
- e) After receiving the completed AQR from the linked provider, the HOQ reviews the report and forwards it to the relevant Dean of Faculty/School and Head of Department.
- f)
- g) The Head of Quality, in consultation with the Linked Provider arranges an Annual Dialogue Meeting to be held between representatives of TUS and the Linked Provider. The relevant Dean of Faculty/School, Head of Department and Programme representatives are also present. The ADM is chaired by the VPAAR or their nominee.
- h) The Annual Dialogue Meeting provides a forum at which both parties discuss the AQR and broader, relevant QAE-related activities.
- i) Approval by TUS of incremental updates to the Linked Provider's QAE procedures is normally ratified through the Annual Dialogue Meeting. If fundamental changes to the provider's QA procedures are reported or proposed, the chairperson of the meeting refers the changes to Academic Council and the V. P. Council Committee for approval.
- j) TUS produces a note of the ADM a copy of which is sent to the Linked Provider for approval as an agreed record of the meeting. This process must be completed with four weeks of the ADM.
- k) Following the ADM, TUS may request the Linked Provider to modify the content of its AQR to reflect the meeting's deliberations.

- l) The agreed AQR is then published by TUS and the Linked Provider and remains on both websites until it is replaced with the following year's AQR.
- m) By default, the entire AQR is published. However, should TUS and the Linked Provider agree, elements of the AQR can be redacted at the discretion of both parties for appropriate reasons such as protecting confidential, business-sensitive information.
- n) If TUS should, at any time, consider there to be serious deficiencies in the Linked Provider's QAE procedures or in their implementation of same it will issue directions to the Linked Provider in relation to those issues.

4.3.2 Periodic Review of QA Procedures and their Implementation

- a) At least once every seven years, and from time to time as deemed appropriate, the VPAAR, with operational support from QTL, arranges for a review to be conducted of both the adequacy of the Linked Provider's QA procedures and the extent to which the provider is implementing the procedures effectively.
- b) The review is coordinated directly by TUS or on behalf of TUS by a competent authority appointed by TUS.
- c) TUS produces and publishes a set of review guidelines that details the scope and terms of reference of the review process. The content of the guidelines is informed by relevant elements of the MoU/MoA, relevant statutory requirements and guidelines, and nationally and internationally accepted norms.
- d) The Linked Provider is provided with an opportunity to comment on the guidelines document before it is finalised. TUS retains ownership of the guidelines document and review process.
- e) As a part of the review process, the Linked Provider will:
 - conduct a comprehensive self-evaluation and critical self-study;
 - prepare and submit to TUS a Self-Evaluation Report
 - submit an updated Quality Assurance Handbook of policies and procedures.
- f) The VPAAR, or their nominee, will convene a suitably Qualified Review Panel, and appoint a Chairperson, to conduct a Review visit to the linked provider.
- g) Following the review, the Review Panel prepares a Review Report setting out the findings of the review.

- h) The Chair of the Review Panel provides a copy of the Review Report to TUS Head of Quality and to the Linked Provider.
 - i) The Linked Provider provides a response to the Review Report and the findings of the review within 2 months of receipt of the Review Report.
 - j) The report and response by the Linked Provider are considered by the relevant Governance and Management Committees of both institutions and then published by both institutions.
 - k) The Linked Provider generates and works on implementing a quality improvement plan (QIP) based on the findings of the report. The Linked Provider must provide periodic progress reports on the implementation of the QIP to TUS within a timeline specified by TUS.
 - l) If, during its consideration of the Review Report at 4.3.2 (j) above, TUS identifies significant deficiencies in the adequacy/effectiveness of the implementation of the Linked Provider's QAE procedures, it may, following consultation with the linked provider, issue 'directions' to the Linked Provider in relation to those issues (in accordance with section 38 (1) of the 2012 Act).
 - m) The Linked Provider will provide a response to TUS which must detail how it intends to address the directions issued to it by TUS within one month of receipt of the directions.
 - n) Where TUS considers that the directions issued to the Linked Provider (in the context of 4.3.2 (j) or 4.3.1 (l) above) have not been complied with, TUS notifies the Linked Provider in writing that, in the absence of further remedial action, it proposes to withdraw its approval of the procedures and includes the reasons for the proposed withdrawal.
 - o) Within one month of receiving the notice of withdrawal, the Linked Provider may submit in writing to TUS any observations it has on TUS's reasons for proposing to withdraw approval of the procedures or details of any further remedial action undertaken.
- 3.3 Where, after consideration of the response of the Linked Provider under 4.2.2 (n) above, TUS continues to consider the QA procedures to be significantly deficient, TUS shall inform the Linked Provider in writing that it shall withdraw its approval of the provider's QA procedures from a specified date with Section 39 (3) of the 2012 Act. The notice shall include the reasons for the withdrawal. TUS shall also send a copy of this notice to QQI.

3.4 Where TUS withdraws its approval of the linked provider's QA procedures, the

Linked Provider may appeal against that withdrawal to an Independent Appeals Person appointed by TUS for that purpose, in accordance with Section 39 (5) of the 2012 Act. The appeals process is documented in Section 4.3.3.

A flow diagram illustrating the main stages of the *Linked Provider Annual monitoring and Periodic* is presented in Figure 5

Part C: Procedures for Annual Monitoring and Periodic Reviewing

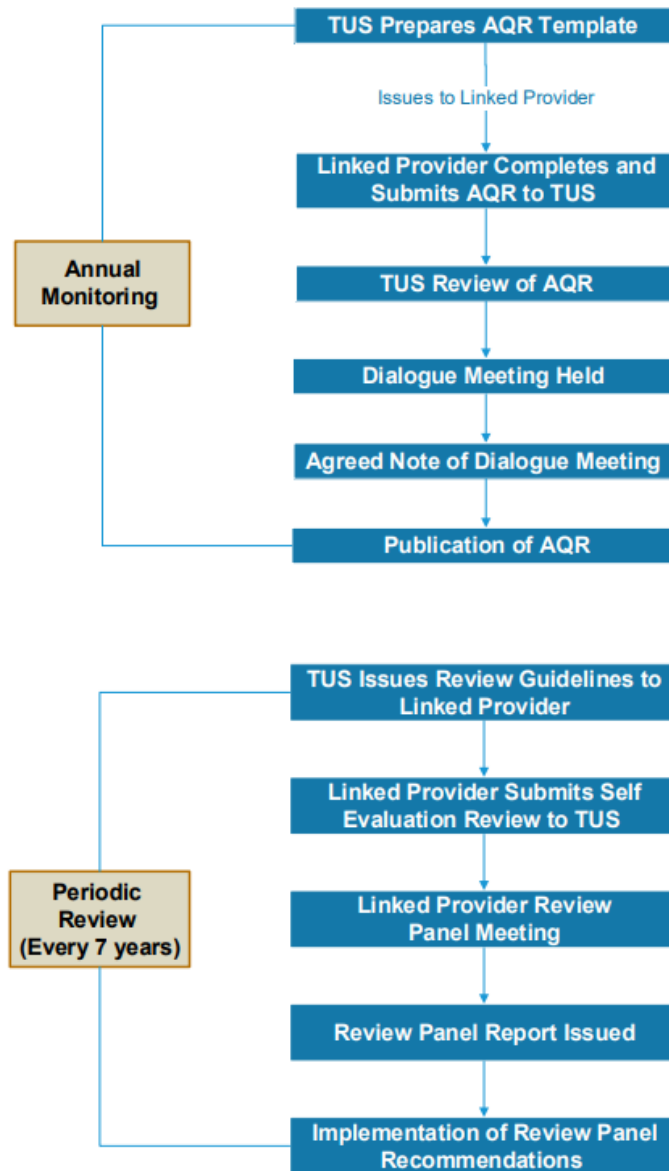


Figure 5. Procedures for Annual Monitoring and Periodic Linked Provider

5.0 Appeals Process for Recognised Linked Providers

This Section of the document describes the appeals process that can be invoked by a Linked Provider to whom TUS has informed its intention to withdraw its approval of the linked provider's QA procedures.

An appeal from a Linked Provider against a decision of TUS to serve a notice in writing under Section 39 (3) of 2012 Act will be considered under the procedures described below and in accordance with the provisions of Section 39 of the Act. Where TUS withdraws approval of a Linked Provider's QA procedures, the Linked Provider may appeal against the decision in accordance with Section 39 (5) of the Act. In dealing with an appeal, privacy and confidentiality will be respected. Disclosure about the appeal will be made only insofar as this is necessary for dealing with the appeal or to the extent required by law.

- a) TUS will nominate an independent person to hear the appeal (the Independent Appeals Person). The independent Appeals Person shall be external to TUS and have senior management experience in Registry and/or Quality assurance in higher Education.
- b) An appeal must be submitted in writing to the VPAAR within one calendar month from the date TUS gives written notice to the Linked Provider that TUS proposes to withdraw or has withdrawn approval of the linked provider's QA procedures.
- c) The written appeal must state all the grounds on which the Linked Provider challenges the decision of TUS, and any documentation the Linked Provider relies upon must be attached.
- d) TUS shall provide the Independent Appeals Person all relevant documentation necessary to carry out the appeal. This shall include:
 1. a written submission by TUS;
 2. the written notice of withdrawal of approval by TUS that includes the reasons for the withdrawal;
 3. the written appeal of the Linked Provider;
 4. additional relevant documentation as requested by the Independent Appeals Person.
- e) The Independent Appeals Person shall consider the Linked Provider's written appeal and TUS's written submission and shall then convene a hearing. Logistical considerations for this hearing are outlined in Appendix 4.
- f) The Linked Provider and TUS may make oral submissions to the Independent Appeals Person at the hearing, but may not be represented by another party,

including a legal representative.

- g) Subsequent to the hearing and within a period of not more than 30 days, the independent appeals person shall make one of the following findings:
 - (i) allow the appeal and rescind the decision of TUS;
 - (ii) reject the appeal, in which case the decision of TUS shall stand;
 - (iii) seek further written information prior to reconvening a second hearing.
- h) The determination of the Independent Appeals Person shall be given in writing with reasons. Should the appeal be rejected, there shall be no further right of appeal.
- i) The decision of the Independent Appeals Person will be communicated to TUS, the Linked Provider and QQI within ten working days of the decision being made.
- j) The outcome of the appeal will be reported to the V. P. Council, Academic Council and Governing Authority.
- k) TUS may withdraw its written notice served under Section 39 (3) of the Act at any point up to the time the Independent Appeals Person makes their determination. TUS does this by notifying the Linked Provider and the Independent Appeals Person in writing.
- l) The Linked Provider may withdraw its appeal at any time up to the time the Independent Appeals Person makes their determination. The Linked Provider does this by notifying TUS and the Independent Appeals Person in writing.

6.0 References

- [1] [Technological Universities Act 2018](#)
- [2] [Qualifications and Quality Assurance \(Education and Training\) Act \(2012\)](#)
- [3] Qualifications and Quality Assurance (Education and Training) (Amendment Act) 2019
- [4] [QQI Sector-specific Quality Assurance Guidelines for Designated Awarding Bodies](#)
- [5] TUS Policy on Quality Assurance and Enhancement 2022 – 2025
- [6] [ESG Guidelines](#)
- [7] [QQI Core Statutory Quality Assurance Guidelines 2016](#)
- [8] [General Data Protection Regulation \(EU\)](#) 2016/679
- [9] [Data Protection Acts](#) 1988 to 2018
- [10] TUS Data Governance Policy

7.0 Appendices

Appendix 1: Linked Provider Application Form.

Appendix 2: General Principles and Procedures Relating to Standards, Awards and Certification when Completing Memorandum of Agreement for Linked Provision.

Appendix 3: TUS Sample Linked Provider AQR Template.

Appendix 4: Logistical Considerations for the Hearing in the Appeals Process for Recognised Linked Providers.

Appendix 1: Linked Provider Application Form



Application to TUS in its capacity as a Designated Awarding Body (DAB) for approval of the quality assurance (QA) procedures of a current or prospective Linked Provider

Institutional Details:

Name	
Address	
Website Address	

Details of Contact Person in Relation to Application:

Title:	
Name:	
Job Title:	
Telephone Number	
Email	

Include the following the supporting documentation with this application:

- Copy of your Institutional Quality Manual, which provides an overview of your institutional QAE framework, policies and procedures;
- A self-assessment of your compliance with ESG^[7] and QQI Core QQI Guidelines^[8]
- Equality, Diversity & Inclusion Policies
- Additional [linked provider-specific] documentation required is listed here:

Declaration:

I [institutional contact person], on behalf of [institution name], request that the Technological University of the Shannon: Midlands Midwest consider our institutional QA procedures for approval in line with national statutory requirements.

X

Signature

Date: 12/01/2022

Please submit this application form and the accompanying requested documentation, in both hard and electronic format, to the TUS, Head of Quality. TUS reserves the right to amend this form to render it more context- appropriate to individual linked providers.

Appendix 2: General Principles and Procedures Relating to Standards, Awards and Certification when completing Memorandum of Agreement for linked provision

General Principles Relating to Standards, Awards and Certification:

- a) The integrity of the awards and QAE procedures of linked providers is an integral part of TUS's Academic Standards and Quality Policy.
- b) The TUS will ensure that each award made on behalf of the recognised Linked Provider within the specified academic linkage framework, in so far as is reasonable and practicable, is recognised within the National Framework of Qualifications (NFQ).
- c) TUS will ensure that learners enrolled on programmes leading to awards recognised within the NFQ acquire the standard of knowledge, skills and competencies associated with the level of that award.
- d) TUS will safeguard that the development and validation of new programmes by the recognised Linked Provider are conducted in a systematic way and are designed in a constructively aligned way so that they meet the objectives set for them, including the intended learning outcomes and appropriate assessments.
- e) TUS will ensure that professional regulatory bodies and QQI are consulted with on the standards and quality assurance of programmes leading to qualifications in regulated occupations.

General Procedures Relating to Standards, Awards and Certification:

- a) Learners enrolled on linked programmes leading to awards of the Technological University of the Shannon: Midlands Midwest shall be registered students of both the recognised Linked Provider and TUS (as the DAB).
- b) Proposals regarding the accreditation of new and/or modification of existing programmes of the recognised Linked Provider shall be directly submitted to TUS's Academic Council for approval through its Programme Provision including Flexible Learning Subcommittee of Academic Council.
- c) Validation panels for new or modified programmes of the Linked Provider shall be convened and chaired by TUS. Such validation panels shall comprise representatives from both institutions and external advisors. The recommendation for a new or modified programme award made by the Validation panel shall be submitted to TUS Academic Council for approval.

- d) In certain circumstances, TUS Academic Council may delegate responsibility regarding the validation of new programmes and the modification of existing programmes to the relevant academic authorising body of the recognised linked provider. That authorising body of the Linked Provider shall communicate in writing its decisions to the chair of TUS Academic Council in a timely manner.
- f) TUS Academic Council shall ratify all awards made on linked programmes leading to awards of the Technological University of the Shannon: Midlands Midwest.
- g) On behalf of TUS Academic Council, examination boards for programmes offered by the Linked Provider that lead to awards of the Technological University of the Shannon: Midlands Midwest shall be constituted and chaired by a TUS nominee of the VPAAR. The examination board shall make recommendations to TUS Academic Council in relation to the awards to be made to students who have completed such programmes of study.
- h) TUS Academic Council shall meet to consider the recommendations of a duly constituted examination board for linked programmes leading to awards of the Technological University of the Shannon: Midlands Midwest. The recommendations of the examination board shall be communicated to TUS Academic Council, for ratification, in a timely manner.
- i) The decisions of TUS Academic Council in the case of these recommendations shall be considered final, and appropriate awards shall be granted to the candidate on linked programmes leading to awards of the Technological University of the Shannon: Midlands Midwest. TUS Academic Council shall determine the award, including grade and classification (if applicable), to be conferred on the candidates considered.
- j) TUS Academic Council shall retain the power to appoint external examiners to the programmes offered by the recognised linked provider. The functions of such external examiners shall be those set out in TUS's Academic Regulations.
- k) A recognised Linked Provider must have robust approaches in place in regard to learner admission, progression and recognition. This means that there are pre-defined and published regulations that are consistently applied by the Linked Provider to cover all areas related to learner admission, progression, recognition and certification of awards. Access policies, admission processes and criteria are established and implemented consistently and in a transparent manner and, as appropriate, in accordance with national policies and procedures for access, transfer and progression.

- l) The academic regulations for TUS -accredited programmes offered by the recognised Linked Provider shall be, or shall align as fully as practicable with, the academic regulations of TUS. Exceptions to this stipulation may be requested by the recognised Linked Provider through formal written proposal to TUS Academic Council.
- m) The recognised Linked Provider shall commit to ongoing monitoring and periodic review of all linked programmes in accordance with Part C of this Framework. The outcomes of annual monitoring, which will include an action plan for quality enhancement, shall be communicated to TUS in an open and timely manner. There should be an emphasis on opportunities to evaluate and enhance the programme with the benefit of feedback from staff, students, external examiners, employers, student enrolment, retention, progression, completion and graduate destination data, as relevant.

Appendix 3: TUS Sample Linked Provider AQR Template



TUS Midlands Midwest AQR Template for Completion by: [Insert Organisation Title]

The Technological University of the Shannon: Midlands Midwest's commitment to quality is articulated in its *Policy for Quality Assurance and Enhancement*^[6] which commits the Technological University to complying with national statutory quality requirements and to a culture of continual quality improvement and enhancement. The purpose of this template is to facilitate [\[Insert Organisation Title\]](#), as a Linked Provider of TUS, to complete an Annual Quality Assurance Report (AQR) in accordance with the relevant provisions of the *Qualifications and Quality Assurance (Education and Training) Act 2012* and the *TUS Policy on Linked Provision and Linked Provider Framework 2021 - 2022*

Instructions for completion and submission

1. Fill in the reporting period and complete the text boxes by overwriting the text within each box.
2. While there is no exact word limit, it is expected that each completed text box would fill approximately one to two pages (guideline only). Hyperlinks to websites and online documents can be inserted. Additional supporting material can be submitted along with the completed template.
3. Please include the [\[Insert Organisation Title\]](#) Quality Manual/Quality Framework, document when submitting this AQR. This document should incorporate an overview description of quality governance as well as institutional-level quality policies and procedures.
4. Please indicate in Section 1, of this template, any changes that have been made (in the current reporting period) to the Quality Manual/Quality Framework document.
5. Return the completed AQR along with the Quality Manual/Quality Framework document and any additional relevant documents to the TUS Head of Quality, by the agreed date for AQR submission.

Please note:

The Technological University of the Shannon: Midlands Midwest reserves the right to tailor this template to render it more context- appropriate to individual Linked Providers.

Insert Reporting Period (Academic Year) Applicable:

September 1st 20__ to August 31st 20__

Section 1: Quality Assurance and Enhancement Activity and Evolution at Institutional Level

Please describe institutional-level quality assurance or enhancement activity that occurred during the reporting period (e.g. an institutional-level quality-review-related activity). Please include reference to any amendments made to systematic, institutional-level quality assurance or quality enhancement mechanisms, activities, policies or governance arrangements during the period.

The focus of this section should be on institutional-level, quality-related processes, activities, policies and governance arrangements that are either applied systematically or have a systematic effect across the institution (e.g. institutional-level student survey activity, external examination system, institutional-level policies impacting upon the quality of activities, changes in the structure or resourcing of the quality assurance/enhancement infrastructure of the institution).

*In each case, please provide a **brief** description of the innovation; the rationale for its introduction (e.g. to strengthen compliance with a particular item from the European Standards and Guidelines (ESG^[7]) or a Quality and Qualifications Ireland (QQI) statutory guideline or to implement a particular quality review recommendation); the anticipated impact of the innovation; and, if relevant, the internal reporting structure and how the feedback loop is closed.*

Section 2: Quality Assurance and Enhancement Activity and Evolution at Local Level

*Focus on change or innovation in quality-related processes or activities introduced at a local level (e.g. within a specific support or academic unit). In each case, please provide a **brief** description of the innovation; the rationale for its introduction (e.g. to strengthen compliance with a particular ESG, etc.); the anticipated impact of the innovation; and, if relevant, the internal reporting structure and how the feedback loop is closed.*

If relevant, please describe local-level quality-related innovations introduced by individual units/departments/offices during the reporting period.

Section 3: Implementation of Quality Governance and Oversight

Please attach (or provide a link to) the published academic calendar for the reporting period and, if relevant, please indicate and discuss deviations from the detail therein that occurred in practice.

Please attach or provide a link to the schedule of meetings of key governance and quality committee meetings. If relevant, please indicate and discuss deviations from the detail therein that occurred in practice.

Focus on significant deviations from published calendars/meeting schedules.

Section 4: Internal Quality Reviews Undertaken During the Reporting Period

Please provide detail of any internal quality review activity that occurred during the reporting period.

Please include the name of the unit/activity/academic programme(s) reviewed, the composition of the quality review team (names, positions and home organisations), the dates of the review site visit, a link to any published review reports and any post-review quality improvement plan (QIP) oversight activity undertaken, as appropriate.

Please also include a brief update on the overall status of the internal unit/activity/programme review cycle, focusing on any deviations therefrom.

Section 5: Quality Activity and Interaction with Third Parties

Section 5a:

Please provide details of professional, regulatory or statutory bodies with which you have a relationship, focusing in particular on quality-related activities pursued with such bodies over the reporting period (e.g. professional body review activity). Please provide details of the outcomes of any such activity (e.g. professional body review reports and follow-on activities on foot of such reports, changes in accreditation status, etc.).

Section 5b:

Please provide details of other third-party institutions (national or international) with which you have a relationship (e.g. programme-based academic linkages), focusing in particular on quality-related activities pursued with such institutions over the reporting period. Please provide details of the outcomes of any such activity (e.g. reports and follow-on activities on foot of such reports, changes in relationship terms or status, etc.).

Section 6: Quality-related objectives over the coming reporting period

Please list and briefly describe each objective.

Section 7: Additional information

Please use this section to provide additional information relating to quality assurance or to report upon relevant quality-focused topics or issues.

Section 8: Declarations

I confirm that this AQR was reviewed and approved by [*please insert the relevant governance body/office/officer with responsibility for quality assurance*] and constitutes a comprehensive and accurate account of quality-related activities pertaining to [\[Insert Organisation Title\]](#) over the reporting period.

This AQR is submitted to Head of Quality, TUS, on: [*Insert Date*]

[Insert Name: Officer with responsibility for QA]

[Insert Name: Chief Executive Officer or Equivalent]

[Insert Organisation Title]

Appendix 4: Logistical Considerations for the Hearing in the Appeals Process for Recognised Linked Providers

- 1) Venue: TUS will secure a room/location for the oral hearing.
- 2) Payment of expenses: The Linked Provider and TUS will separately be responsible for their own costs.
- 3) Format of the oral hearing: The oral hearing will be held in private. The Independent Appeals Person will begin the hearing by introducing those present and will then give an outline of the decision against which the appeal is being made, the grounds of appeal and TUS's response to these grounds.

Both parties to the appeal will be entitled to be heard and to present evidence. Both parties will be given an opportunity to present their case; each will have the right of reply and to question the other through the Independent Appeals Person. The order of speakers is determined by the Independent Appeals Person; this may be communicated to the parties in advance of the hearing by means of a proposed agenda.

- 4) Timescale: The oral hearing will be completed promptly and efficiently within a reasonable timescale. The hearing may be adjourned for a short period, as required, to review information supplied in the course of the hearing. If necessary, the hearing may be adjourned until a date specified by the Independent Appeals Person.
- 5) Determination: The determination of the appeal will be made within 30 days of the completion of the oral hearing.