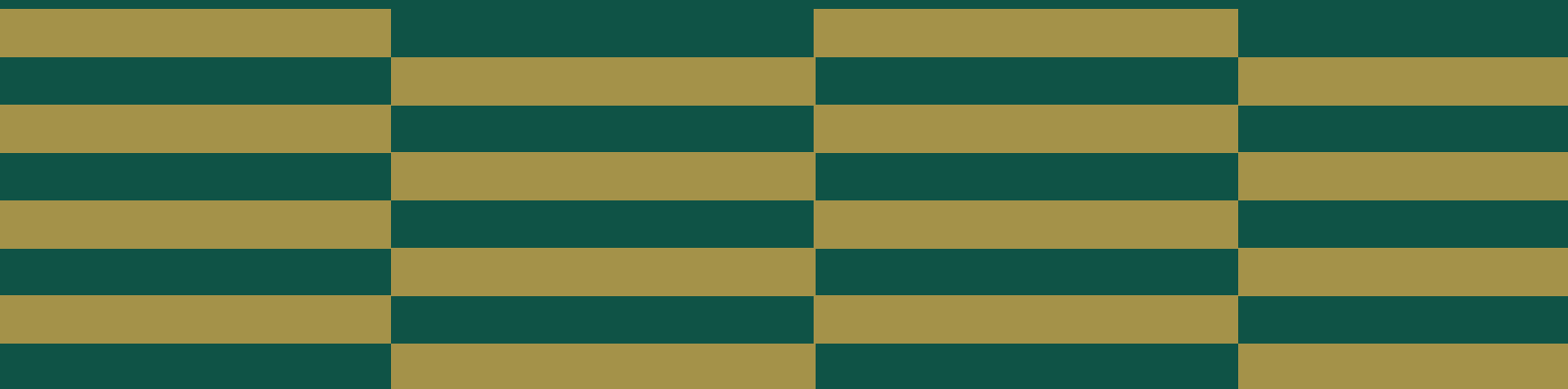# Policy Framework
Version 1.1

Revision History:

Date of this revision: January 2024	Date of next review: January 2025

Version Number/ Revision Number	Revision Date	Summary of Changes	Changes marked
1.0		New Policy	
1.1	22/01/2024	More clarity given in	Yes

Consultation History:

Version Number/ Revision Number	Consultation Date	Names of Parties in Consultation	Summary of Changes
1.0	July to October 2022	VP Council; Joint VP and Deans Council; ARC, and Governing Body.	
1.1	January 2024	ARC and Governing Body	Policy Drafting and Development more clearly defined. Approval process more distinct. Name change to appendices

Development and Approval Log:

Responsible for:	Title
Policy Developer:	Policy Unit in conjunction with Policy Owner
Policy Owner:	Vice President of Finance & Corporate Governance
Recommended by:	Jt. VP and Deans Council (27/10/2022), ARC (08/11/2022), ARC (09/01/2024)
Approving Authority:	TUS Governing Body
Reference Documents:	N/A

Approval:

Version	Approved By:	Date
1.0	TUS Governing Body	22/11/2022
1.1	TUS Governing Body	22/01/2024

This Policy was approved by the Governing Body. It shall be reviewed and, as necessary, amended by the University annually. All amendments shall be recorded on the revision history section above.

Date Approved:	Date Policy to take effect:	Date Policy to be Reviewed:
22/11/2022	22/11/2022	22/11/2023

Document Location:

Website – Policies and Procedures	x
Website – Staff Hub	x
Website – Student Hub	
Other: - Internal Use Only	

Table of Contents

1.   Definitions

1.1   **Policy:** a statement of the Technological University's principles, roles and responsibilities, and required authorisation levels established to provide guidance and assistance to the University in the conduct its business.

1.2   **Procedure:** a guideline or series of steps necessary to implement a policy. University procedures:
- should comply with best practice and relevant legal requirements;
- should outline the sequence of steps necessary to carry out defined tasks;
- should be reviewed and updated by the Policy Owner to ensure that the procedures are 'fit-for-purpose'

1.3   **Policy Unit**: The unit with responsibility for the monitoring of the policy development process, keeping track of the status of each policy, and assisting the Policy Owner in these areas. The Policy Unit will also maintain the Policy Webpage on the Universities Webpage, and will be the point of contact for notification, by Policy Owners, for Policy review and update.

The Policy Unit will be responsible for the policy areas of Governance; Administration; Equality and Diversity, and Support Services policies which include the following policy categories; Human Resources (HR), Governance, Data Protection, Equality and Diversity, Finance, Estates, Health and Safety, Marketing & Communications, and Information Technology (IT).

1.4   **Policy Owner:** The person who has responsibility for the policy and for the development, implementation and review of the policy to ensure that it reflects current needs, practice, and legislation. See Policy Owner list in Appendix D.

1.5   **Policy Developer:** Where relevant, the person assigned responsibility by the Policy Owner for drafting and developing the policies for a specific category.

1.6   **Policy Review Committee:** The PRC is a Management Committee comprising the policy owner, policy developer and other members of the Vice President and Deans Council or their nominees.

1.7   **Policy Issues Log:** A record of issues identified during the operation of the policy. This will help to identify the need for policy reviews and/or remedial action to the policy. The Policy owner will be responsible for the creation and maintenance of the policy issues log.

1.8   **Stakeholders:** Members of University and the wider community affected by the policy.

1.9   **Approving Authority (s):** The approving authority is the body tasked with the final review and approval of a policy.

2. Purpose of the Policy

2.1 The purpose of this policy is to define the process by which University policies are to be developed, approved, reviewed, and maintained. A consistent policy development process and a standardised format, should result in developing policies which are clear, concise, easy to understand, updated, and consistent with best practice. It will also make it easier for relevant stakeholders to identity if a policy relates to them and enable compliance.

3. Scope of the Policy

3.1 This policy relates to all Stakeholders, of the University, and will be applied to policies across the areas of Governance, Administration, Equality and Diversity, and Support Services.

3.2 The scope of this policy does not include policies relating to academic administration, student services, research and innovation, except where those policies have a governance compliance requirement which may require Governing Body Approval.

3.3 Academic and research policies approved by Academic Council are outside the scope of this framework.

3.4 Specific policies can apply to some, or all members of the University, and to external Stakeholders associated with the University, including members of the public using the University facilities or attending University events.

4. Policy Statement

4.1 This policy provides a guideline for policy developers to ensure that policies are:
- Developed according to the process set out in this document;
- Presented in a standard and common format;
- Formally approved by an appropriate authority as per 1.9 above prior to publication or issuing;
- Accessible to all stakeholders and, where appropriate, the general public (as required), in usable formats in line with the Open Data Strategy 2017-2022;
- Appropriately developed and regularly monitored, reviewed, and revised in line with the University Strategic Plan;
- Compliant with applicable laws and national / international benchmarks of best practice. This includes but are not limited to the Technological Universities Act 2018, the THEA Code of Governance for Technological Universities 2022 and relevant Circulars from the Department of Public Expenditure and Reform (DPER), the Department of Finance, the Department of Further and Higher Education, Research, Innovation and Science
- Clearly marked as policies and separated from associated documentation such as procedures, guidelines and forms which provide specific instructions for carrying out defined tasks.

5. Reasons for Policy Development or Renewal

5.1 The reasons for a new policy development or a policy review may include:
- An identified need for a new policy, including mitigation of issues recorded on the Policy Issues Log.

- A change to current legislation,
- An update to an existing policy before the renewal date due to new requirements

5.2 The Policy Unit (see 1.3 above) should be notified about the development of any new, or the review of any existing, policy. See Appendix D for contact details for these offices.

6. Policy Drafting and Development

6.1 The Policy Owner will liaise with the Policy Unit (see 1.3 above) about the development of a new, or review of an existing, policy.

6.2 The Policy Unit will draft and manage a development and consultation timeline for the policy.

6.3 The Policy Owner in consultation with the policy unit will research, and reference this research in the policy where necessary, to ensure that it is up to date, and aligns with legislation, and best practice.

6.4 The Policy Unit will work closely with the Policy Owner throughout the development of the policy.

6.5 University policy templates should be used for all University policies to maintain consistency and standardisation. See Appendix A.

6.6 A standard format and naming protocol will apply to all University policies within the remit of this policy. See Appendix E for policy naming protocol.

6.7 The Policy document should cover all the main requirements and be written concisely in plain, easy to understand, language.

6.8 Where possible Stakeholders should be given the opportunity to comment on the draft policy.

6.9 Consideration will be given to how the proposed policy will impact on other University policies.

7 Consultation

7.1 A consultation and implementation plan (Appendix B) will be developed for each policy by the policy owner with assistance from the policy unit.

7.2 The Stakeholders, identified in the consultation plan, need to be consulted during the development of the draft policy and should be invited to offer feedback. This consultation should be noted within the "Consultation History" in the policy format.

7.3 Depending on potential constraints arising around development, it may not always be possible to consult with all Stakeholder groups. Where this occurs, preference will be given to Stakeholders who are most affected by the policy. Any constraints to consultation should be made clear and notified to Stakeholders as early in the process as possible.

7.4 The length of time allowed for consultation will depend on the complexity of the policy and its Stakeholders, however the development plan should be well structured in order to finalise the policy in a timely manner.

7.5 The Information and Data Compliance unit should have review of any policy at an early stage in the process, as there may be a requirement for a data protection impact assessment.

8 Approval

8.1 Each TUS Policy, within the scope of this policy framework will be assigned a policy approval level. The approval levels are:-

Policy Approval Level	Approving Authority	Authority Rationale
1	Governing Body (GB) (via appropriate GB committee)	Legislative, Compliance or Governance Requirement for GB approval.
2	Policy Review Committee (PRC) or function specific committee	TUS wide Directional or Operational Policy, not requiring GB approval
3	Policy Owner	Function Specific Policy, outside 1 & 2 above.

The PRC is a Management Committee comprising the policy owner, policy developer and other members of the Vice President and Deans Council or their nominees. The composition of the PRC will be determined by the policy owner in consultation with the policy unit, and should comprise subject matter experts and other stakeholders depending on the policy (s) under review. It is recommended to have a minimum of four members on the PRC. The PRC will also review policies that require Level 1 approval and make a recommendation to GB for approval of same via the appropriate GB committee.

A function specific committee would include the TUS Health & Safety (H&S) Committee for H&S Policies and other specific committees as required.

The Policy Unit will maintain a full list (Appendix D) of TUS policies within the scope of this policy framework, and each policy will have an approval level and an approving authority. The Policy unit will compile an updated list for approval by the Governing Body.

8.2   The agreed draft policy document should be submitted for approval at a meeting of the relevant Approving Authority. The following documentation, relating to the development of the policy, should be provided to the Authority.
- A synopsis of the development process and timeline.
- The consultation and implementation plan and checklist for the policy. See Appendix B and C
- Confirmation that relevant consultation has occurred with all stakeholders to include the data protection/ information compliance unit, legal or staff representative bodies where applicable.

8.3   If the policy is approved by the relevant Approving Authority, it should then be registered as 'Approved' and published as outlined in Section 10.

8.4   If the policy is not approved, the Approving Authority will give appropriate feedback with reasons and return to the Policy Unit for further review.

8.5   All relevant information and documentation relating to the development and review process must be retained by the Policy Unit for the lifetime of the policy.

8.6   All policies must follow the policy framework for development, consultation, review, and approval.

9   Implementation

9.1 The Policy Unit will implement the policy in accordance with the consultation and implementation plan and maintain a log of progress against the plan.

9.2 The Policy Owner will notify all Stakeholders and other relevant parties of any changes to the policy.

9.3 Where requested or considered necessary, question and answer sessions, or information workshops should be held for relevant Stakeholders. Consideration should be given to providing online recordings of recorded information sessions.

9.4 The policy consultation and implementation plan (Appendix B) are especially important when policies are critical, complex or time-sensitive or when a suite of policies are developed or reviewed.

10   Publication of Policies

10.1 To ensure that University policies and associated documentation are accessible, all relevant policies and associated documents will be available in a usable format on the University website and located in the Policy Unit repository of the website. Where other departments wish to make policies accessible, they should do so by providing a link to the Policy Unit webpage. These can include links from the Student Portal, and Staff Portal. The document location should be noted in the "Quality Assurance" section of the policy.

10.2 There are a number of policies which are deemed confidential and not for distribution to all staff or students. These policies will be marked Confidential using a watermark.

11   Monitoring, Maintenance and Review

11.1 The Policy Unit will be responsible for ensuring the policy is regularly reviewed and will agree an appropriate review timeframe for the specific type of policy, with the Policy Owner.

11.2 An appropriate review timeframe for policies would not generally exceed three years.

11.3 The Policy Unit will ensure that any associated policies are modified or superseded and archived.

11.4 The Policy Unit will liaise with the Policy Owner to review whether:
- There is an ongoing need for the policy in relation to its stated purpose and goals and that it remains consistent in relation to the Universities' overall strategic plan.
- There is a potential need to change the policy to improve its effectiveness, or to ensure that it is up to date, and aligns with legislation, and best practice.

11.5 This Policy on the Formulation and Issuing of Policies will be reviewed every three years from the effective date unless otherwise required.

11.6 The Policy Unit will provide periodic reports to the Governing Body and GB committees on the operation of this policy framework and the approval, maintenance and review of TUS policies.

12   Roles and Responsibilities

12.1 All individuals who are responsible for the drafting, updating, approval and distribution of Universities' policies within the scope in section 3 shall comply with this policy.

12.2 The VP Finance and Corporate Governance is the Policy Owner of this Policy and will, along with the staff of the Policy Unit, oversee the monitoring and review of this Policy.

13   List of Appendices

13.1   Appendix A - Templates for Universities Policies
13.2   Appendix B - Policy Consultation and Implementation Plan
13.3   Appendix C - Policy Development Checklist
13.4   Appendix D – Approval Level Listing for Governing Body
13.5   Appendix E – Policy Naming Protocol