University Policy Framework

Document Control

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1. Purpose

1.1 This framework guides staff involved in the development, approval, publication and review of the University's policy documents. Effective policy management ensures consistent standards are applied across policy documents and that up to date and relevant information is available.

2. Scope

2.1 Policy documents refers to a range of official University documents, comprising strategies, regulations, policies, procedures, codes of practice and guidance:

    2.1.1   Strategies are statements of long term goals and how it is planned these will be achieved.

    2.1.2   Regulations, whilst often academic rather than administrative, detail the rules or standards which govern a process of area of business.

    2.1.3   Policies, whilst often administrative rather than academic, provide a position or principles for any required action covering a given area of business.

    2.1.4   Procedures are a set of actions and decision which set out how something must be done, normally to ensure consistency and fairness.

    2.1.5   Codes of Practise set out the expectation of behaviour and/or good practice.

    2.1.6   Guidance provides advice or instructions about how something should be done.

    2.1.7   Forms capture information, normally in support of a procedure.

2.2 All policy documents must comply with this framework. By exception:

- strategy development and management is the remit of the Department of Planning & Corporate Strategy, and;
- guidance documents / forms / departmental standard operating procedures will be managed locally and therefore are not considered to be in scope of this framework, although application of the same principles is encouraged.

3. Roles and Responsibilities

3.1 Governance and Compliance will publish this framework on the University Policies webpage and provide specific guidance to Policy Owners and authors when requested.

3.2 Heads of areas are responsible for ensuring staff with a responsibility for the development of policy documents are aware of and comply with this framework.

3.3 Policy Owners are ultimately responsible for ensuring their policy documents are managed effectively as per this framework.

3.4 Policy Owners will arbitrate when any element of their policy document may be considered ambiguous, seeking advice from the Governance team if required.

4. Rationale for Development or Review

4.1 The need for a new policy document or revision to an existing policy document may arise for a range of reasons, which include:

- changes to or new legislative and regulatory requirements;
- changes to or new processes, roles and structures;
- a need to enhance clarity in existing policy documents;
- a statutory requirement to review policy documents periodically.

4.2 The identification of the need for a new policy document should include a review of whether a new policy document is necessary. For example, new content may be best placed within an existing policy document. Duplication of substantively similar content, or the separating out of directly related content into separate individual files (i.e. separating policies from related procedures) must be avoided in order to ensure policy documents are simple to identify, understand and apply.

5. Content, Format and Style

5.1 Policy documents should adhere to the following content, format and style requirements:

5.1.1 The University logo (positioned left), document title with version number and date of approval (positioned right) must be included in the header of each page (size 8 font, Arial);

5.1.2 Page numbers in the format 'Page X of X' must be included in the footer of each page, centred and size 11 font, Arial;

5.1.3 Policy documents must start with a document control table which includes:
   i. the Policy Owner's identity (name and role);
   ii. an email address for general contact;
   iii. the version number;
   iv. the date of approval;
   v. the approving body (committee);
   vi. the date the policy document will next be reviewed (maximum of three years).

5.1.4 Policy documents should be drafted in size 11 font, Arial and aligned left;

5.1.5 Introductory sections should set out the purpose, scope and roles and responsibilities;

5.1.6 The main body should be sub-sectioned, with clear section headings and all sections and paragraphs numbered;

5.1.7 Policy documents should be written in plain English, concise, and checked for accuracy; they are formal documents, but formality is not achieved merely by using longer words. Authors should avoid using longer, complicated or Latin words and sentences when shorter ones would convey the intended meaning.

5.1.8 Where acronyms are used, the full name must be used in the first instance with the acronym presented afterwards in brackets. The acronym can be used thereafter;

5.1.9 Avoid including information that may become quickly outdated (for example, names) except where this serves the function of the document (such as naming Designated Safeguarding Leads);

5.1.10 Policy documents will comply with best accessibility practice.

5.2 Drafting advice can be sought from the Governance team.

5.3 Any redrafting should use Tracked Changes, with the Tracked Changes version of a policy document made available to colleagues during the approval stage.

6. Procedure for Development and Approval

6.1 Equality Analysis Guidance should be followed, ideally prior to drafting/review, and an Equality Impact Assessment (EIA) completed, where necessary.

6.2 Tracked changes must be used to indicate where amendments have been made to existing policy documents during review, so these can be understood by stakeholders during any consultation and when the document is submitted to committee for review/approval.

6.3 Consultation with key stakeholders, such as members of the Senior Leadership Team, Heads of Schools and Professional Services Departments (and Students' Union and Trade Unions colleagues where appropriate), is essential for ensuring implications for specific areas of the business are understood when developing or reviewing policy documents. Consultation should be carried out before a policy document is submitted for approval. Consultation should be proportionate to the materiality of the review. For example, simply updating titles of roles would not require extensive consultation.

6.4 Minor modifications to policy documents (such as updating contact details or titles of roles, teams, or departments, or correcting typographical errors) can be approved by the Governance team, as long as the modifications do not materially change the meaning/application of the policy document.

6.5 Major modifications to policy documents should be considered by a relevant sub-committee (the sub-committee will then recommend the policy document for approval, if content).

6.6 Final approval of policy documents will be either via meetings of the Senior Leadership Team, Academic Board or the Board of Governors, dependent on the policy document's purpose, impact and/or legislative/ regulatory requirements.

6.7 If in any doubt, advice on approval routes should be sought from the Governance team.

6.8 Policy documents must state its approving body within its document control table.

7. Publication

7.1 All policy documents will be published on the central policies page on the University website by the Governance team. This improves accessibility for students, staff and third parties. The Governance team will also issue a monthly circular confirming newly approved policy documents. Policy Owners are then otherwise responsible for communicating and implementing approved policy documents.

7.2 If a Policy Owner considers it necessary that a policy document should not be publicly available, this request must be approved by the Governance team.

7.3 Policy documents can be published on departmental webpages/intranet sites. However, this must be via a link to the document held on the central policies page rather than upload of a separate copy. It is the responsibility of Policy Owners to ensure links on departmental webpages/intranet sites remain up to date.

8. Review

8.1 It is a Policy Owner's responsibility to ensure a review is undertaken and the revised policy document submitted for approval in accordance with the date of next review.

8.2 The Governance team will provide an annual report to the Senior Leadership Team on the status of policy document review, including reviews/approvals complete in the previous period, reviews due in the next period, and overdue reviews.

9. Policy Disestablishment

9.1 Sometimes an approved policy document needs to be withdrawn from use. The Policy Owner should inform the Governance team if this is the case, and the Policy Owner will be asked to submit a rationale to the approving committee to ratify the withdrawal of the policy document.