

Procedure to Approve Policy, Strategy, and Procedure

UNCONTROLLED WHEN PRINTED

Version Control History

Version Number	Date of Approval	Summary of Revisions Made
1.0	CMT (May 2007)	
2.0	CMT (March 2009)	
3.0	CMT (August 2016)	Rewrite of process of approval, Introduction of: Lead Author, Consultation Group, periodic review schedule.
3.1	December 2018	Change of role to Quality Manager. Updated footer
4	June 2020	Decoupling of Policy and Procedure into 2 separate documents. Review of procedure to ensure it is fit for purpose with current college business operations. Review of scope, line of approval, ownership and editing, publication of approved documents to website. New QUAL number given CMT Approval – October 2020
4.1	June 2021	Minor amendment to: Correct QUAL number – change from 004 to 007 Section 4: 4.10 Quality Dept Adding 4.11 Chair of Approving Committee/Group, and 4.12 Clerk to approving Committee/Group
4.2	March 2023	Rebranded
5	November 2023	Updating of Owner and Lead Author, change to UHI Perth, change of responsibilities from Quality to Project and Planning Officer, removal of links to other policies, review of process to streamline procedure.
5.1	December 2024	Updating of job titles to reflect current organisational structure, removed reference to Policy Owners and responsibilities moved to Lead Author

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Lead Author: Director of HR and OD
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1 Purpose

This document outlines the process to develop, review and approve UHI Perth policy, strategy or procedures.

2 Scope

2.1 The process covers all cross-UHI Perth policy documents, and related procedures and supporting guidance documents.

2.2 The process covers strategies and the relevant enabling plans.

3 Definitions

3.1 A **Policy** is a written set of principles that guide and reflect the position and values of UHI Perth on a given subject and are used as a basis for guiding and making decisions.

3.2 A **Strategy** is a general plan or set of plans intended to achieve a long-term or overall aim. The scope of a Strategy should align to the UHI Perth's strategic aims and values and encompass relevant key policy principles.

A Strategy should have an accompanying **Action Plan** to organise and monitor activities adopted to implement the Strategy.

3.3 A **Procedure** (also known as Process) describes the steps to be performed to deliver the associated Policy. A Procedure will also establish who is responsible for the actions, defines acceptable practice and sets boundaries. There may be more than one Procedure associated with a Policy and more than one Policy guiding a Procedure.

3.4 A **Business Case** (also known as Business Proposal) describes the justification for a proposed project or undertaking on the basis of its expected benefit. Whilst a Business Case may be closely aligned to a Strategy, its primary focus is likely to be on specific aims and it will therefore be appropriate for the Business Case to be approved directly by the appropriate UHI Perth or Board Committee.

3.5 **Lead Author** is someone whose role includes responsibility and awareness of regulatory and legislative frameworks which impact on UHI Perth business.

3.6 The **Lead Editor** is a member of staff who has key responsibility for leading on the business area supported by the policy, strategy or procedure.

3.7 A **Consultation Group** will be key staff that have a stakeholder input to the document. This group should include, where relevant, trade union representation.

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- 3.8 **Board and UHI Perth Committee/Group** are constituted groups which have defined terms of reference that determine their remit and responsibilities to oversee aspects of UHI Perth business.
- 3.9 **Quality Check** is the process that confirms the document complies with this Procedure, is ready to go forward to the relevant approving committee/group for approval or endorsement and is suitable for publication. Documents which fail this check cannot be published.
- 3.10 **Major Revision** to a Policy, Procedure or Strategy changes the essence of the Key Principles and/or steps to a procedure and or direction of travel for the Strategy. All key contributors of the original design and any that are now affected directly by the change must be collaborated with in the discussions to revise. The revision would require formal committee approval.
- 3.11 **Minor Revision** to a Policy, Procedure or Strategy would not affect the key principles, steps of procedure or direction of travel for a Strategy. Key contributors should be informed of the proposed change prior to submission to PLG for approval.
- 3.12 **UHI Single Policy/Procedure.** A cross academic partner/UHI partnership group will be set up to review existing Academic Partner Policy, or provide the provision for a new Policy where Government guidance drives this in order to design an overarching policy document that all academic partner will use. The document will be written in such a way that it can be contextualised to meet the structure of each Academic Partner before implementation. The UHI single policy will require approval by the appropriate UHI Perth committee group and would be added to the UHI Perth register.
- 3.13 The **Consultation Group** will be the key staff that have a stakeholder input to the document. This group should include, where relevant, trade union representatives. The Consultation Group will be identified by Lead Author in consultation with the Depute Principal, Operations.
- 3.14 An **Equality Impact Assessment (EQIA)** is the document produced which demonstrates that there has been an assessment of the equality impact of proposed and revised policies and practices and is a legal requirement to help the UHI Perth meet its general duty. It is the Lead Authors responsibility to ensure that this is done.

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4 Responsibilities

- 4.1 The Depute Principal, Operations has overall responsibility for:
- Accepting the need for a new policy, strategy or procedure and for appointing a Lead Author.
 - Appointing a UHI Perth representative to a UHI Single Policy SLWG.
 - For ensuring the delegated governance responsibilities are put in place and acted upon.
- 4.2 PLG has responsibility for the overview of the register as a whole, although approval/endorsement of a document itself may be by a different committee or group
- 4.3 The Risk Management and Project Officer is responsible for:
- Issuing of guidance to UHI Perth managers in developing documents within the scope of this Procedure in house style
 - Monitoring of development and approval of documents within the scope of this Procedure, including ensuring a final quality check has taken place prior to approval
 - Maintenance of a document control system including a record of archived versions
 - Discussion by the relevant approving group on the revision schedule for strategy, policy and procedures to ensure that such work is prioritised appropriately
 - The publication of approved documents within a timely manner
 - Providing notification to staff of all new and revised policy, procedure and strategy
- 4.4 The Equality, Diversity & Inclusion Adviser is responsible for offering support and guidance on the assessment of the equality impact of strategy, policy and procedure within the scope of this Procedure and confirming that an approved document can be published thereof of relevant information as per legislative requirements.
- 4.5 All UHI Perth managers are responsible for staff awareness and the implementation of all Strategies and the supporting action plans, policies, and procedures within their area, as appropriate.
- 4.6 All staff are responsible for ensuring that they are aware of, and follow all relevant strategic aims and principles, policies and procedures, and contribute to implementing Strategy where they are designated with actions in a related Action Plan.
- 4.7 The Lead Author of a document within the scope of this Procedure is responsible for:

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- Liaising with the Risk Management and Project Officer to alert them to a required revision that is outwith the review schedule in order to maintain document control.
 - Adhering to the master schedule, being aware of legislative changes, and ensuring appropriate review of the document occurs.
 - To liaise with the Depute Principal, Operations to determine the appropriate consultation group members, and whether it needs to go forward to the appropriate Joint Negotiating Committee (JNC).
- 4.8 The Lead Author of the document, or delegated Lead Editor, within the scope of this Procedure, is responsible for ensuring:
- That an equality impact assessment is completed prior to drafting the document and once final draft is completed.
 - They have consulted widely, with the relevant key staff, and where relevant the appropriate JNC.
 - That the document meets the agreed timeline to be presented at the relevant approval meeting. Where required they have provided a Committee Cover Sheet to accompany the completed draft document.
- 4.9 The Desk Top Publishing (DTP) team are responsible for final formatting of the document to UHI Perth style and returning it to the Risk Management and Project Officer.
- 4.10 The Risk Management and Project Officer is responsible for:
- Conducting a final quality check of the document.
 - For ensuring that the documentation and EQIA has been published in a timely manner and in PDF format, unless required otherwise.
 - For informing staff of new documents that have been published on SharePoint/Website.
 - For maintaining an appropriate archive of past versions
 - Maintaining a schedule of activity for review and approval of PPS in any given academic year

5 Procedure

5.1 Contextual Information

5.1.1 The Policy on developing a new Strategy, Policy and/or Procedure is published on the UHI Perth website.

5.1.2 The Flowcharts in Appendix 1 show the full process for approval, and/or review, and/or endorsement of a Strategy, Policy and Procedure prior to publication.

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- 5.1.3 All Strategy, Policy and Procedures newly designed or revised must have an EQIA completed and approved before being formally approved. A document will **not** be published until it has been approved by the relevant committee/group and has been to DTP for final formatting.

5.2 Approval and/or Review of a Strategy, Policy or Procedure

- 5.2.1 Each Academic Year, the Risk Management and Project Officer will ask all Lead Authors to review the risk level for all of their policies. This will generate a schedule for revision for that year which will be submitted to PLG for noting.
- 5.2.2 The Lead Author is then responsible for ensuring that the identified policies are reviewed within the agreed timelines.
- 5.2.3 In conducting a review of the Strategy, Policy and Procedures, Lead Authors, or delegated Lead Editor, must consult with relevant staff identified for consultation and consider evidence from relevant sources such as:
- Feedback.
 - Case studies.
 - Legislation.
 - Related documents (UHI Perth and/or UHI).
 - Complaints.
 - Changes to organisational charts.

The list is not exhaustive, but Lead Authors, or Lead Editors, must be diligent in reviewing as thoroughly as possible.

- 5.2.4 Where a new Strategy, Policy or Procedure is proposed then this should be discussed with the Risk Management and Project Officer who will discuss this with the Depute Principal, Operations to ensure there is sufficient need for it as a stand-alone document, or whether the information can be incorporated within an existing document. The proposal should describe the purpose and scope of the document. If agreed to go forward for development it will be added to the schedule and the Depute Principal, Operations will at this point agree on a Lead Author and key members of staff for them to consult with and the required approval process.
- 5.2.5 Where a Strategy, Policy or Procedure is due to be revised, the Risk Management and Project Officer will issue the Lead Author, or delegated Lead Editor the latest version, released in a suitable format and with track changes enabled for revisions to be made.
- 5.2.6 Lead Authors, or delegated Lead Editor, must complete a new equality impact assessment (EQIA) for each revision and prior to any revisions being made. Where the review results in no substantive change to the

document (ie minor changes such as is confined to revising job titles of responsible persons etc), then the original EQIA should be revised, in all other cases a new EQIA will be required. In all cases, the EQIA should at this point be sent to the Equality, Diversity and Inclusion Advisor for checking and approval.

- 5.2.7 Once a Lead Author, or delegated Lead Editor, has completed consultation and produced the final draft document, including getting the EQIA approved they should forward it to the Risk Management and Project Officer who will ensure the document is placed in the house style, forwarded to the appropriate committee for review and then circulated to PLG for approval and information prior to publication on the website.

NB: Documents which fail this quality check will **not** be sent for endorsement/ approval but will be returned to the Lead Author for correction.

- 5.2.8 The Risk Management and Project Officer will:

- Conduct a quality check to ensure the document follows the published template.
- Ensure the footer of the document identifies the following:
 - Title of document.
 - Document reference number.
 - Version number/status of document ie draft/final.
 - Approved by: Committee that gives final approval.
 - Date of approval: date of final approval by committee shown above.
 - Effective publication date: (month/year). This will normally differ from the approval by date as it may not be relevant to publish until a specific date ie for next academic year.
 - Lead Author
 - Provide a monthly status report to PLG on all activity.

- 5.2.9 The Clerk will note for the minutes whether the document is **Approved**, **Approved Minor Changes**, or **Not Approved Incomplete**. The Clerk must inform the Risk Management and Project Officer directly after the meeting of the decision, and any further amendments required to be made by the Lead Author/Lead Editor.

- 5.2.10 Where Approved Minor Changes, the Risk Management and Project Officer will update the Lead Author/Editor of the Committee decision and any further work that may be required prior to approval. The Lead Author/Editor will be responsible for submitting the revised documentation to Risk Management and Project Officer within a timely period, whereby it will be resubmitted to the Chair for review and approval.

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5.2.11 Where Not Approved Incomplete, the Risk Management and Project Officer will update the Lead Author/Editor and determine a timeline for resubmission to committee.

5.2.12 The Risk Management and Project Officer will enable publication of the document and the EQIA.

5.2.13 The Risk Management and Project Officer will ensure that a record of Committee approval of documents is maintained and communicate with Lead Authors on the status of documents.

5.2.14 Once approved, the Risk Management and Project Officer will progress the document to be lodged within the UHI Perth Document Repository.

5.2.15 A PDF version will be created for publishing purposes and posted to the external UHI Perth website. Only relevant proforma will be published in a format other than PDF to enable use.

5.2.16 PLG members should notify their staff of all new and revised Policy, Procedure and Strategy notified through PLG.

5.3 **Promoting Awareness of Published Policies, Procedures and Strategies**

5.3.1 Key Strategies, Policies, and Procedures are available on the UHI Perth website for staff to familiarise themselves with.