

Procedure to Approve College Policy, Strategy and Procedure

October 2020

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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

Procedure to Approve College Policy, Strategy or Procedure

1 Purpose

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

2 Scope

2.1 The process covers all cross-college 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 the College 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 college'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 College or Board Committee.

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

3.6 **Owner** is a member of SMT who has direct accountability to ensure that the relevant Policies, Procedures and Strategies within their remit are established and implemented. **Note:** Where relevant a specific policy may need to express where someone has a legal responsibility other than the owner, per se.

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Version/Status: 4.1/Final

Approved By/Date: CMT/October 2020

Effective Publication Date: October 2020

Owner: Depute Principal, Academic

Lead Author: Quality Manager

Lead Editor: Quality Manager

Review Timing/Date: 4 years/2023

- 3.7 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.
- 3.8 A **Consultation Group** will be key staff that have a stakeholder input to the document. This group should include, where relevant, trade union representation.
- 3.9 **Board** and **College Committee/Group** are constituted groups which have defined terms of reference that determine their remit and responsibilities to oversee aspects of College business.
- 3.10 **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.
- 3.11 **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.
- 3.12 **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 the Deputy Principal for approval.
- 3.13 **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 College committee group and would be added to the college register.
- 3.14 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 Policy Owner.

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4 Responsibilities

- 4.1 The Depute Principal, Academic, has overall responsibility for:
- Accepting the need for a new policy, strategy or procedure and for appointing a Lead Author.
 - Appointing a college representative to a UHI Single Policy SLWG.
 - For ensuring the delegated governance responsibilities are put in place and acted upon.
- 4.2 CMT 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 ie CBP or CASE.
- 4.3 The Quality Manager is responsible for:
- Issuing of guidance to College 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.
- The duties associated with these responsibilities may be delegated to members of staff within the Quality dept, as appropriate.
- 4.4 The Equality and 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 for the publishing thereof of relevant information as per legislative requirements.
- 4.5 All College 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.

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- 4.7 The Owner of a document within the scope of this Procedure is responsible for:
- Liaising with the Quality Dept 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 Lead Author 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, or they have consulted with the Quality Manager for an extension to this timing.
 - 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 college style and returning it to the Lead Author or delegated Editor prior to its submission to Quality.
- 4.10 The Quality Dept is responsible for:
- Conducting a final quality check of the document.
 - Forwarding an approved copy of the EIA, and all final versions of the PPS to the approving committee/group.
 - Forwarding all endorsed documents to the final approval committee, where relevant.
 - Informing the LA/LE of the outcome of the committee/group presented for endorsement/approval
 - Liaising with the LA/LE for any minor amendments to be made and for conducting a final quality check to ensure all required amendments have been made according to the committee/group comments.
 - For ensuring that the documentation and EIA 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

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- 4.11 The Chair of an approving committee/group is responsible for:
- Liaising with the LA/LE to determine an appropriate meeting date for the submission of each policy, procedure and strategy documentation scheduled for review in an academic year cycle.
 - Alerting the clerk to the agreed meeting dates for review of the policy, procedure, strategy
 - Ensuring that an EIA is known to be approved prior to the policy, procedure, strategy is approved/endorsed by the committee/group for publication.
- 4.12 The Clerk to an approving committee/group is responsible for:
- Add to the standard agenda relevant PPS coming forward for approval
 - Circulating to members of the approving committee/group the relevant documentation forwarded by the Quality Department
 - Informing Quality Dept of the outcome of the discussion at the meeting

5 Procedure

5.1 Contextual Information

- 5.1.1 The Policy on developing a new Strategy, Policy and/or Procedure is published on the College 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.
- 5.1.3 All Strategy, Policy and Procedures newly designed or revised must have an EIA 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.
- 5.1.4 A new document or major review to a document must be approved through a relevant College or Board of Management Committee, depending on the statutory duty attached to it.
- 5.1.5 A minor review to a document will be approved by the Depute Principal prior to publication and the relevant approving Committee/group informed of the revisions for note, unless the approving committee is the Board of Management whereby the full document will be required to be submitted for approval by them prior to publication.
- 5.1.6 A committee cover sheet must be produced for a minor review which gives explicit details of the changes ie section #, what has been changed/added. This should also be noted in the version control of the document itself.

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5.1.7 The Owner and Lead Author of the document must be aware of any statutory requirements, both in drafting the document, and in seeking approval through the appropriate body.

5.1.8 The Quality Dept can offer advice and assistance on the process.

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

5.2.1 Each Academic Year, the Quality Manager will liaise with the Depute Principal to view a list of those published documents that will be due for review in the following Academic Year. A schedule for revision for that year will be agreed and submitted to CMT for note.

5.2.2 The Depute Principal will appoint a Lead Author, or delegate a Lead Editor, for each document listed on the schedule, and identify key members of staff for them to consult with and propose a timeframe for the document to be presented to the relevant committee/group for approval. NB: the impact of failing to meet the agreed timeframe will have a knock-on effect on the workstream of the approving committee/group. Wider consultation may be determined by the LA/LE, as relevant, in addition to that identified by the Depute Principal.

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 (Perth College 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 an Owner should submit an email to the Quality Manager who will review it with the Depute Principal 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 will at this point agree on a Lead Author and key members of staff for them to consult with as per 5.2.2, and which committee or group will be responsible for its approval.

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- 5.2.5 Where a Strategy, Policy or Procedure is due to be revised, the Quality Dept 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 Where an existing Strategy, Policy and Procedure is to be revised outwith the scheduled cycle for review then the owner must notify the Quality Manager prior to work commencing on the review describing why the document needs to be reviewed outwith the review cycle. The Quality Dept will release the latest document version to the Lead Author or delegated Lead Editor in a suitable format to enable revisions to be made and will update the master register and schedule.
- 5.2.7 Lead Authors, or delegated Lead Editor, must complete a new equality impact assessment (EIA) 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 EIA should be revised, in all other cases a new EIA will be required. In all cases, the EIA should at this point be sent to the Equality, Diversity and Inclusion Advisor for checking and approval.
- 5.2.8 Once a Lead Author, or delegated Lead Editor, has completed consultation and produced the final draft document they must send it to the DTP Team who will house-style the document to ensure it is fully accessible and correctly branded. Once returned to them by DTP the Lead Author/Editor will submit the approved EIA, final draft documentation, and a Committee Cover Sheet to the Quality Dept at quality.perth@uhi.ac.uk (shown as pc quality on Global Address Book) in time for a 'quality approval check' to be completed prior to the deadline for papers to the relevant committee or group.

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

NB: Documents not submitted in time to Quality for a quality check prior to the scheduled meeting will be removed from the meeting agenda and held over until the next meeting. Quality will inform the Clerk of the need for this should it arise.

5.2.9 The Quality Dept 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 – determined by Quality Department.

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- 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.
- Owner –Lead Author Review timing and date – this would show the review period in years ie it is to be reviewed every 4 years, and the next academic year for its review.
- Provide a monthly status report to CMT on all activity.

5.2.10 Where a document is deemed new or a major revision, the Quality Dept will send the 'quality checked' document and Committee Cover Sheet to the relevant Committee Clerk for inclusion on the agenda of the scheduled, or next, appropriate meeting.

5.2.11 If a document is too late for a quality check prior to a scheduled meeting quality will inform the Clerk to remove from the agenda and add to the following scheduled meeting agenda and inform the LA/LE.

5.2.12 In cases of extreme urgency, the Chair of Committee/group can approve a document, as long as it has met the appropriate quality checks, and it will go to the next available meeting for information. All documentation must be sent to the Quality Dept to be forwarded to the Chair of the Committee/group for approval.

5.2.13 The Clerk will note for the minutes whether the document is **Approved**, **Approved Minor Changes**, or **Not Approved Incomplete**. Where final approval is to be made by another committee the Clerk will note it as **Endorsed**, **Endorsed Minor Changes**, **not Endorsed incomplete**. The Clerk must inform the Quality Dept directly after the meeting of the decision, and any further amendments required to be made by the Lead Author/Lead Editor.

5.2.14 Where endorsed, the Quality Dept will forward the complete documentation to the approving committee as per 5.2.10.

5.2.15 Where Approved, the Quality Dept will inform the Lead Author/Lead Editor and progress the document to be published.

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

5.2.17 Where Not Approved Incomplete, the Quality Dept will update the Lead Author/Editor and determine a timeline for resubmission to committee.

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

5.2.19 Where Not Approved Incomplete, the Quality Dept will update the Lead Author/Editor and determine a timeline for resubmission to committee.

5.2.20 The Quality Dept will enable publication of the document.

5.2.21 The Quality Dept will enable publication of the EIA.

5.2.22 The Quality Dept will ensure that a record of Committee approval of documents is maintained and communicate with Owners on the status of documents.

5.2.23 Once approved, the Quality Dept will progress the document to be lodged within the Cross College Document Repository. At this point the document is password protected to avoid unintentional changes. This is essential for maintaining document control. (as per 6.2.6 above Lead Authors must liaise with the Quality Dept if they want to revise documents so they are assured they have the most recent version.)

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

5.2.25 The Quality Dept will notify staff of all new and revised Policy, Procedure and Strategy.

5.3 Promoting Awareness of Published Policies, Procedures and Strategies

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

6 Linked Policies/Related Documents

- QUAL007 Policy to Approve College Policy, Procedure and Strategy
- Equality Impact Assessment Guidance
- Policy Template
- Procedure Template
- Strategy Template
- Perth College Strategic Plan

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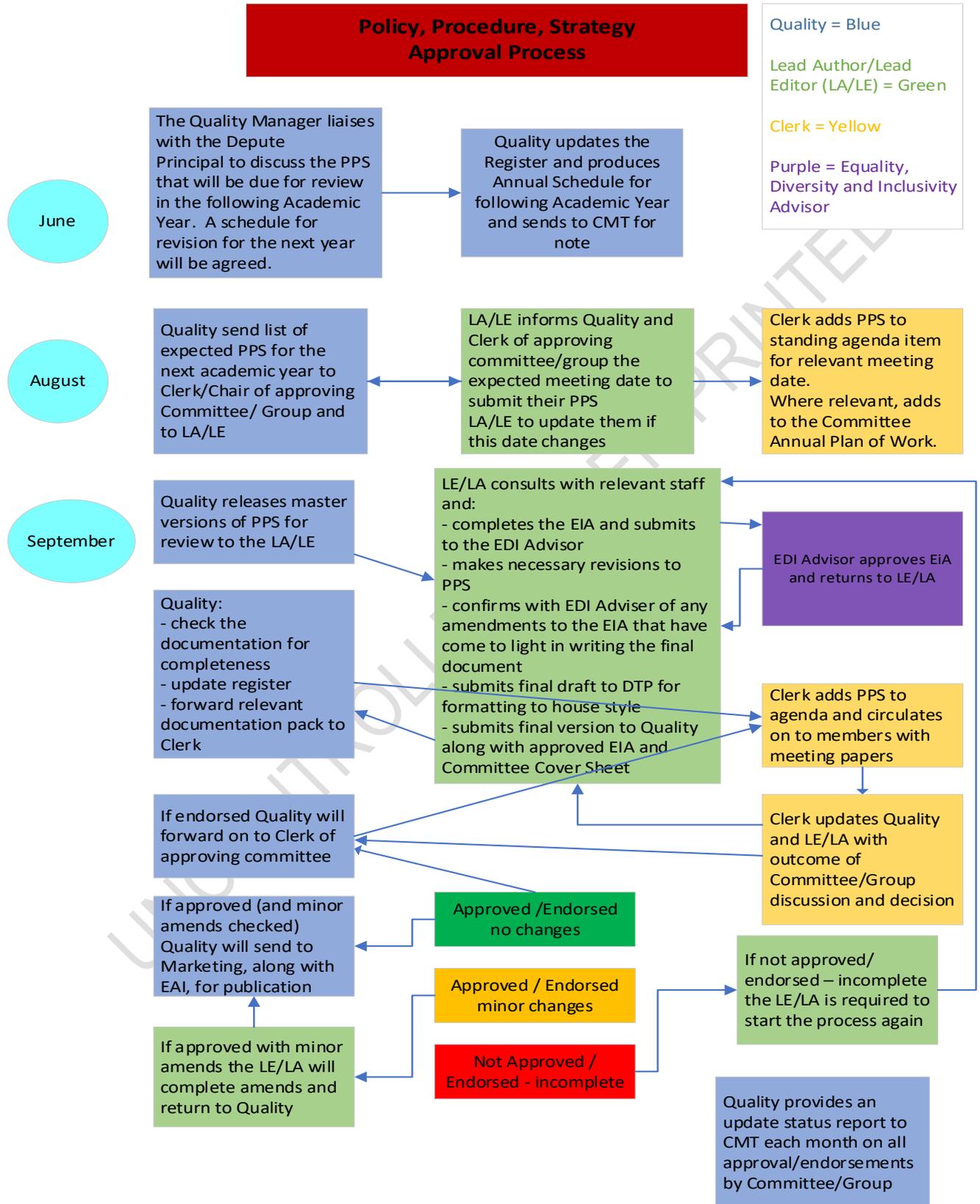
Owner: Depute Principal, Academic

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Appendix 1a – Process for Approval of Cross College Strategy, Policy or Procedure



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Lead Editor: Quality Manager
Review Timing/Date: 4 years/2023