

**SRUC**

**Research Excellence Framework  
(REF) 2021**

**Code of Practice**

**September 2019**

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## List of Acronyms

ALT	Academic Leadership Team
C4i	Connect for Impact
CBS	Core Business System
CEO	Chief Executive Officer
Col	Co-investigator
COP	Codes of Practice
CRIS	Current Research Information System
DPA	Data Protection Act
E&D	Equality and Diversity
ECR	Early Career Researcher
EDAP	Equality and Diversity Panel
EDT	Equality and Diversity Team
EHRI	Equality, Human Rights and Inclusion
EIA	Equality Impact Assessment
ELT	Executive Leadership Team
FTE	Full time equivalent
GDPR	General Data Protection Regulations
GOS	Guidance on Submissions
HE	Higher Education
HEI	Higher Education Institute
HR	Human Resources
MoU	Memorandum of Understanding
PGO	Postgraduate Office
PI	Principle Investigator
PMR	Performance Management Review
QAA	Quality Assurance Agency (for Higher Education)
REF	Research Excellence Framework
RISE	Respect, Innovate, Support, Excel
SAT	Self-Assessment Team
SFC	Scottish Funding Council
SRUC	Scotland's Rural College
SWAN	Scientific Women's Academic Network
UOA	Unit of Assessment

# Part 1: Introduction

## Overview

### Context

- 1 The Research Excellence Framework (REF) provides a system for assessing the quality of the research and research environment provided by UK Higher Education Institutions (HEIs). The primary purposes of the REF are to evidence and provide accountability for the investment in Higher Education in the UK, to benchmark UK HEIs and to inform the selective allocation of funding for research to them from 2022.
- 2 This Code of Practice lays out how SRUC will go about determining which staff and outputs will be submitted to REF 2021. For the majority of staff, all relevant information will be included in the main body of the text. Additional information relating to specific aspects of the codes is contained in the appendices or accessible on the SRUC intranet via the hyperlinks provided. The REF 2021 website is also a useful source of further information and where relevant, this is referenced in the text.
- 3 As a HEI we have a legal responsibility to ensure that our REF processes do not discriminate against, or lead to harassment or victimization of any staff in relation to any protected characteristic such as:
  - Age
  - Disability
  - Gender identity
  - Marriage or civil partnership
  - Race
  - Religion or belief
  - Sex or sexual orientation
  - Pregnancy or having recently given birth
- 4 We must also ensure that part-time staff and those on fixed-term contracts are treated no less favourably than those on full-time or open-ended contracts.

### Guiding Principles of REF 2021

- 5 The current REF exercise (hereafter referred to as REF 2021) which runs from 2014-2020, is guided by three principles – Equity, Equality and Transparency. These are guiding principles which also underpin the Equality and Diversity policies applied in SRUC (see **Appendix A: SRUC Equal Opportunities and Diversity Policy**) and monitored by the EHRI (Equality, Human Rights and Inclusion) Committee. These describe amongst other things how SRUC supports its fixed-term and part-time staff, including contract research staff, in relation to equality and diversity and, in doing so, how we strive to build a culture which supports inclusion, celebrates difference, challenges prejudice and promotes equity.
- 6 Various groups, including the EHRI Committee, Academic Leadership Team (ALT), Executive Leadership team (ELT) and trade union representatives, have been engaged in the development and review of the SRUC REF Code of Practice, and will continue to advise on and monitor adherence to it through reports from the REF Equality and Diversity (E&D) sub-group.
- 7 There will be many individuals performing roles which support fully the objectives of their Academic Faculty or Department but whose primary role does not currently

meet the REF definition of independent research. Their non-inclusion in the REF 2021 submission will not affect their career opportunities within SRUC. SRUC takes a long term and holistic view of staff development, particularly at the current time when we are on a transformational journey as we move towards becoming a unique, market-led and mission diverse 21<sup>st</sup> Century rural university. Our aim is to create a community and culture where all individuals, no matter what their role is, are able to develop to their full potential and are valued for their contribution. A high level summary of SRUC's governance structure and Academic structure are included in **Appendix B**. A description of the remit of these Committees is included in **Appendix C**.

- 8 In contrast to the 2014 REF submission, SRUC has elected to manage the REF 2021 submission through separate Core REF team and REF delivery team, operating under the leadership of the Head of Research that are independent of those managing the academic restructuring (see paragraph 22). Communications with staff on REF related items is dealt with via central communications from the SRUC REF team as well as via faculty reporting structures. The composition and Terms of Reference of all SRUC REF committees and teams relevant to REF 2021 are outlined in **Appendix D**.

### A culture of inclusivity

- 9 Equality and Diversity is a SRUC Board responsibility, operationalised through the EHRI Committee which took over from the Equality and Diversity Team (EDT), in January 2016. The EHRI Committee has membership drawn from across SRUC including representatives from the recognised trade unions, is chaired by a member of the ELT and is attended by the Company Secretary, to reflect SRUC's legal requirement to comply with the Equality Act 2010. Non-executive SRUC Board members who have volunteered to be Equality champions are also invited to attend. The Committee's primary purpose was to develop and monitor SRUC's policies and to drive forward SRUC initiatives to comply with legislation and Scottish Funding Council (SFC) requirements.
- 10 As an institution, SRUC is a Disability Confident Employer and a member of Athena SWAN, currently in the process of applying for the Bronze award. Having learnt from an earlier unsuccessful application, an Executive Champion is now in place and a pan-SRUC self-assessment team (SAT) has been established.
- 11 All SRUC staff are now required to successfully complete a mandatory Equality and Diversity Compliance module. SRUC has a well-developed Equality Outcomes and Gender Action Plan and has taken steps to ensure that equality and diversity is embedded in both staff and student induction programmes.
- 12 Equality and Diversity are also principles which also underpin SRUC's shared values summarized by the acronym 'RISE':
  - **Respect** everyone's contribution towards the success of the organisation
  - **Innovate** by constructively challenging how things are done
  - **Support** each other, sharing knowledge
  - **Excel** in everything we do to develop the business
- 13 These shared values were developed in 2014 following wide staff consultation and are frequently cited and referred back to in staff communications. The RISE values have been retained and underpin the SRUC Strategy 'Shaping our Future.' They are also central to the recently approved 'People Strategy – Inspiring our people.'

- 14 The People strategy mission is to develop an environment where people are motivated, innovative and empowered at work, building an organization that's trusted, responsive and respected. The 3 key underpinning themes are:
- **People:** We maximize the effectiveness of our people and promote a positive employee experience
  - **Leadership:** We develop our people to lead, inspire and empower
  - **Culture:** We drive and develop a vibrant, engaged and empowered culture
- 15 Our detailed People Strategy has been agreed, including implementation of a new performance management framework, production of divisional business plans based on a balanced scorecard approach, and introduction of a Leadership Academy in 2019. Coaching and mentoring schemes will also be re-implemented across the organization.

### Purposes of the Codes of Practice

- 16 In addition to the general principles listed above, the Codes of Practice for REF 2021 are also required to demonstrate fairness to staff by adhering to the REF guiding principles of Transparency, Consistency, Accountability and Inclusivity.
- **Transparency:** All information governing the processes around the REF 2021 submission will be available in an easily accessible format and publicised to all academic and other relevant staff across the institution. This information will be available on the SRUC SharePoint site and drawn to the attention of those staff who are absent from work. The Code is supported by a programme of communication to explain the process, which is attached at Appendix E.
  - **Consistency:** SRUC is committed to ensuring that its Code of Practice is implemented uniformly across the organisation. The Code therefore sets out the principles and criteria that will be applied at all stages of the process where decisions will be made.
  - **Accountability:** Individuals and bodies appointed to make decisions with respect to the REF 2021 submission will have clearly defined terms of reference and responsibilities. They will receive appropriate training on our EHRI policies, the legislation on which these are based, and this Code of Practice.

Information about staff being submitted for REF 2021, including any equality considerations, will be clearly recorded. These will not be published, in the interests of confidentiality, but will be available to the individual staff members to whom the decision applies.

- **Inclusivity:** SRUC is firmly committed to fostering and promoting an inclusive environment. We fully recognise that individuals contribute to the goals of the College in different ways and, while we intend to followed the principle laid out by [Lord Stern \(July 2016\)](#), of submitting all staff with significant responsibility for research, there will be staff with a research component to their roles, or whose roles otherwise support the research carried out in SRUC, who are not submitted to REF 2021. As previously stated, non-inclusion in the REF 2021 submission will not affect the career or professional development opportunities within SRUC for those staff.

- 17 These guidelines apply to all aspects of preparing our REF 2021 submission covered by the Code of Practice including: determining who is an independent researcher; the selection of outputs, and approaches to supporting staff whose circumstances may have affected their ability to work productively during the assessment period so impacting on the volume of their work.
- 18 This Code will provide staff with clear guidance about the process through which an individual's eligibility for inclusion in the REF 2021 submission will be determined, and provide those staff involved in the decision-making processes with clear guidance and advice about how to apply the selection criteria in terms of equality and diversity. This information will be supplemented by tailored information and development for all staff involved in these processes.

### Consultation on the Code of Practice

- 19 It was decided in late 2018 that no staff consultation on the SRUC Code of Practice would be held until the final guidelines had been released and the Code had been finalised internally as far as possible.
- 20 Summaries of main REF activities and planning have been regularly communicated with both academic leadership (via standing agenda items at their regular meetings and at business briefings) and the wider staff body (via monthly staff newsletters, all staff emails and senior management blogs, and at regular staff meetings) including the processes for evaluating research outputs and the development of draft Codes of Practice.
- 21 The Codes of Practice will be commented on by the ALT with sign off from the Academic Director before circulation to all staff in May 2019.
- 22 At the time of first submission of these Codes of Practice, SRUC is undergoing transformational reorganisation involving service reviews at all levels and all areas of the business over an extended period. The co-incident timing of our financial year end, as well as major funding reporting all happening over the same relatively short period of time meant that it was agreed by ALT that running an extensive series of Code of Practice information workshops and meeting would not be conducive to encouraging staff buy-in and participation. Instead it was decided to have a single staff consultation period, at a quieter time in the SRUC calendar.
- 23 The joint Communication and Consultation on Code of Practice will explain in full the mechanisms for determining research independence and output selection within SRUC.
- 24 Once the Code has been signed off by ALT, a variety of mechanisms for communication of the Code will be implemented. These will include:
  - Email to all staff detailing the purpose and approach to Consultation, including a link to the internal SharePoint site to access the draft Code (in .pdf and .doc formats).
  - Faculty Deans to disseminate the Code (via email and other means as needed) to all academic staff within their faculty, with the expectation that the Code will be discussed at appropriate staff meetings. This will be determined by Faculty Deans to take account of different communication routes within each Faculty.
  - HR to ensure that all staff on extended leave over the consultation period have hard copies of the draft Code posted to their home address along with the same covering information as disseminated to all staff via the 'All SRUC staff' distribution list.



- Faculty Deans to identify any need for hard copy dissemination to academic staff without access to, or difficulty accessing, electronic resources.
  - Ability to contact the SRUC REF 2021 mail box ([REF2021@sruc.ac.uk](mailto:REF2021@sruc.ac.uk)) with any additional requests for further information.
  - Online anonymous feedback survey established.
  - Consultation with representatives from the recognised trade unions.
- 25 This process is summarised in the table in **Appendix E**. Once the staff consultation has been concluded and all amendments included, the Code will be shared with our joint submission partners at the University of Edinburgh.
- 26 SRUC will ensure that the criteria, policies and procedures that support the REF 2021 process will be subject to equality impact assessments (EIA) at key points throughout the submission process. The outcome of these EIAs will be made openly available to staff along with the actions taken to address any issues that arise. EIAs will be undertaken in line with SRUC policies and procedures.
- 27 Once the Code of Practice has been approved by EDAP and SFC it will be published on the SRUC external website.

### Evolution of Codes of Practice from 2014

- 28 REF2014 allowed HEIs to select which researchers should be submitted for the assessment exercise. REF 2021 in contrast, largely based on the 2016 Stern report, encourages HEIs to submit all 'eligible' staff i.e. all those with significant responsibility for research. It was recognised by the REF Team that different research disciplines, and the HEIs working within them, may have very different employment frameworks and practices. To address this, two options were offered for selecting staff for submission:
- Submitting all staff identified by the core eligibility criteria as 'Category A eligible staff' (see Section 3 below).
  - Submitting only those Category A eligible staff considered to have significant responsibility for research.
- 29 SRUC will go with the former of these options as we intend to be as inclusive as possible.
- 30 Another significant change from REF2014 is the decoupling of staff and outputs. This was a direct result of the Stern Review which found that despite efforts to make allowances for those with 'special circumstances' in REF2014, the requirement to submit four outputs to the REF disadvantaged researchers with flexible career structures.
- 31 SRUC is committed to ensuring that the REF assessment, irrespective of the outcome in relation to an individual's inclusion within it, will not be detrimental to their career aspirations and trajectory. Similarly, SRUC does not necessarily associate inputs included within REF with any individual's overall contribution to SRUC's academic mission.
- 32 Staff who wish to submit special circumstances will be invited to self-declare using a template based on the format supplied by the REF team (see **Appendix F**). This will be coordinated by our HR Team, to ensure confidentiality and separation of this process from other operational matters, with input from the Chair of the SRUC REF E&D committee. Recommendations on any action which should be taken in



response to special circumstances disclosed will be passed to the ELT for consideration.

- 33 HEIs are now encouraged to publish both their Codes of Practice and the Equality Impact Assessments (EIAs) used to monitor them, on their Intranets or websites at the earliest appropriate opportunity. In REF2014 this happened after the final submission. SRUC will seek input from staff directly, from representative staff groups including the recognised trade unions, and carry out EIAs at appropriate points in the development of our Codes to ensure that they remain fit for purpose. EIAs will provide a thorough and systematic analysis of research independence and output selection policies, in order to establish whether those policies may have a detrimental impact on particular groups. SRUC has trained staff on how to undertake EIAs, and has an established Guidance document and a template for use (see **Appendix G**).
- 34 In 2018 the General Data Protection Regulation (GDPR) and Data Protection Act (DPA) 2018 came into force, replacing the Data Protection Act 1998. Among other things, this change provided increased rights to individuals on what data organisations hold about them, how they process it and how transparent they need to be. A range of personal data will be submitted or made available to the REF Team for audit purposes in relation to the REF submission. This data will be handled in a manner which fully complies with the updated [SRUC Data Handling and Privacy Policy](#) which can be found on the [GDPR area](#) of the Staff Intranet. All staff are required to successfully complete compliance training on data and GDPR, and Information Security, and a range of approaches (including 'bite size' online training, all-staff emails and information in staff briefings has been used to raise awareness of GDPR among the staff body.
- 35 In relation to our joint submission with the University of Edinburgh, a Memorandum of Understanding (MoU) and Data Sharing Agreement are in place which include agreements on how personal data will be handled. Codes of Practice will be shared between the Institutions once they have been approved internally to ensure that they are compatible. As part of the joint submission process there will be a need to share information about the existence and extent of staff circumstances with a small number of appropriate staff at the University of Edinburgh, however no information about the specific circumstances or individuals will be shared.

#### Further information for SRUC staff

- 36 Guidance on all aspects of REF 2021 including the Codes of Practice can be found on the [REF2021 website](#). In addition, there is extensive information on all aspects of SRUC's preparations for REF 2021 on the [SRUC REF2021 SharePoint site](#).
- 37 Any comments or queries relating to SRUC's REF 2021 submission or anything else relating to the REF process should be directed to [REF2021@sruc.ac.uk](mailto:REF2021@sruc.ac.uk)

## Part 2: Identifying staff with significant responsibility for research

- 38 Staff with significant responsibility for research are those:
- Who have explicit time and resources made available – e.g., where time is allocated for research, as determined by their contract and/or annual objectives.

- Expected to engage actively in independent research. Indicators of this could include:
  - eligibility to apply for research funding as the lead or co-applicant
  - access to research leave or sabbaticals
  - For whom independent research is an expectation of their job role. Indicators of this could include:
  - current research responsibilities as indicated in, for example, career pathways or stated objectives
  - expectations of research by role as indicated in, for example, job descriptions and appraisals.
- 39 As SRUC is submitting 100% of eligible Category A staff, there are no policies or procedures presented for the identification of staff with significant responsibility for research.

### Part 3: Determining research independence

- 40 The REF 2021 Guidance on Submissions (REF 2018/01 January 2019) defines an independent researcher as 'an individual who undertakes self-directed research, rather than carrying out another individual's research programme'.
- 41 To meet the requirements of an independent researcher under REF guidelines firstly a staff member must qualify as Category A staff, so the following three criteria **must** be met:
- The researcher must hold a contract where their employment function is 'research only' or 'research and teaching'.
  - They must be on the payroll of SRUC and holding at least a 0.2 FTE contract with SRUC on the census date (31<sup>st</sup> July 2020). For anyone on a fractional contract of 0.2-0.29 FTE a statement will be required evidencing their substantive research connection to SRUC. This can be evidenced in a variety of ways e.g.
  - Contribution to the research environment e.g. research leadership activities such as supervision/ line management of staff; supervision of research students;
  - Research activities e.g. grants held or applied for;
  - Wider research activities e.g. leading a research team or area.

This process is laid out in **Appendix H**.

- 42 For those on 'research only' contracts, research independence will be tested to decide whether or not the individual will be submitted to REF. SRUC will use various indicators of research independence where meeting only one may not be sufficient to demonstrate independence, but in combination may pass a threshold of independence.
- 43 For all eligible Cat A staff the following criteria will be applied to ascertain research independence at the census date (31 July 2020). If at least one of the following criteria is met, the researcher is considered to be independent:
- Being PI (Principal Investigator) on a substantial (given disciplinary norms) external research grant
  - Holding an external grant or fellowship where independence is a criterion of award.
  - Responsible for a distinct body of research on a large external research grant (for example, a Co-Investigator (CoI) and/or work package leader)

- 44 If a researcher does not meet one of the above criteria, but does meet one of the following combinations of criteria, then they will be considered to be independent researchers for the purpose of REF 2021:
- Conducting self-directed research, rather than carrying out another individual's research; AND responsible for a distinct body of research on a smaller external research grant (for example, a Col).
  - Conducting self-directed research, rather than carrying out another individual's research; AND leading a research group/area.
  - Conducting self-directed research, rather than carrying out another individual's research; AND approved principal supervisor of a PhD student (within the REF 2021 assessment period, but not necessarily on the census date).

## The decision-making process

- 45 In the first instance the criteria above will be extracted from SRUC's information systems. The source of each item is listed in **Table 1** below.

**Table 1:** Sources of staff data

Criterion	Source of information
Staff contract type	CBS – HR record
FTE	CBS – HR record
Contract length/ start and end dates	CBS – HR record
<i>Contribution to research environment:</i>	
Research leadership roles	CBS/Pure
Postgraduate research student supervision	Postgraduate Office (PGO)
<i>Research Activities:</i>	
Grant applications	CBS
Grants won/Role (PI or Co-I)*	CBS/Pure
Conducting self-directed research, rather than carrying out another individual's research	Recorded in Performance Management Objectives
Responsible for a distinct body of research on a large external research grant (for example, a Co-Investigator (Col) and/or work package leader)	CBS or confirmed in writing by grant holder
Supervisor of a PhD student (within the REF 2021 assessment period, but not necessarily on the census date)	PGO supervisors records
Responsible for a distinct body of research on a smaller external research grant (for example, a Col)	CBS or confirmed in writing by grant holder**
Leading a research group	As defined by job description or confirmed by Head of Research and/or Academic Director.
Research as a job objective	Online PMR system (via HR)

\* PI role on Scottish Government funded Strategic Research Programme not included

\*\* "small" may be determined by Head of Research and Academic Director to ensure it reflects the disciplinary norms within SRUC

- 46 Researcher independence will be determined centrally via REF Delivery Team, utilising the common decision matrix/ flowchart detailed above and in **Appendix H**. The process for research independence determination will commence in June 2019, ongoing until the census date, as appropriate.
- 47 Once the initial process for research independence determination has been carried out, Deans (or academic line managers) will be responsible for confirming, based on the criteria, whether the staff they manage are independent researchers. Once confirmation is received by the REF Core Team, staff will be individually notified by email (or other means, as appropriate) to their work email address, whether or not they have been identified as independent researchers for the purpose of REF 2021 (i.e. whether or not they will be included in the REF 2021 submission).
- 48 In the interests of consistency and in order to monitor the process for identifying individuals who meet the definition of an independent researcher effectively, evidence in support of decisions/ actions will be collated and logged centrally.

## Appeals

- 49 While every effort has been made to ensure that the REF process is implemented fairly and consistently across the organization, SRUC recognizes that some staff may feel dissatisfied with the outcome, and therefore an appeals process is in place to consider any such complaints.
- 50 There will be a general announcement to all staff about the appeals process for independent researcher determination. All communications related to this will make clear that this classification is purely for REF 2021 purposes, and will have no impact on their future career with SRUC.
- 51 SRUC will utilize its Grievance Policy (**Appendix I**) as the framework for handling any appeals. This policy has been in place for a number of years, and is recognized and understood as the means of addressing issues. A number of staff have been trained as Investigating Officers, and are supported by HR staff throughout the process. Furthermore, managers across various disciplines, including the Core REF Team, have undertaken complaints handling training, which is similar to the process undertaken within the Grievance Policy.
- 52 Any staff member who is dissatisfied with the decision regarding their research independence status will be able to lodge a grievance with the Human Resources representative on the REF E&D team. Two senior members of staff, who have no direct connection to the individual and no other input to the REF decision-making process, will undertake the role of Investigating Officers (IO) as described within the Grievance Policy. The IOs will be appointed to review the basis of the appeal, and having thoroughly considered the circumstances, make a recommendation to the ELT for a final decision to be reached. The ELT decision will be final and will be passed to the REF Core Team for action. It is noted that the aim, as outlined within the Grievance policy, will be to conclude any appeals within three weeks of receipt.
- 53 The REF Team are also developing an additional formal complaints process for any staff who feel that their institute is not following its agreed processes and have not been able to resolve their complaint through the institutional grievance process.
- 54 Details of this have not yet been finalized however when they are (expected to be autumn 2019), information will be added to this section of the Code of Practice.

## Staff, committees and training

- 55 The SRUC REF teams involved in the submission and processes for REF are listed in **Appendix D**. As a small and specialist organisation the groups are relatively small in size but remit and activity is defined.
- 56 There is also a wider panel of output and impact reviewers to aid in decision making on selection of outputs (detailed later).
- 57 Members of SRUC groups (both academic and professional services) involved in the compilation of the SRUC REF 2021 submission will be offered REF-focused development and training opportunities designed to meet their needs with regard to equality and diversity and which enable them to understand their respective responsibilities in the process. The training will be mandatory for individuals involved in any decision-making.
- 58 Following release of the final versions of the REF 2021 publications (31 January 2019), and further expert advice from REF and AdvanceHE in spring/summer 2019, SRUC will ensure that all staff undertaking functions around REF have access to, and complete training on, REF 2021 process including modules on unconscious bias, staff circumstances, legal context and equality impact assessments. The REF E&D team will actively input to this development.
- 59 SRUC unconscious bias training will be a requirement for all individuals involved in any REF 2021 advisory or decision-making processes, including the determination of independent researchers and the selection of outputs.
- 60 Staff circumstances information as applied to SRUC REF 2021 submission will be provided to all individuals involved in the processes of requesting, processing, reviewing and evaluating the voluntary declaration of individual staff circumstances. In addition, staff who will be in receipt of the associated staff circumstances metadata (excluding details of the circumstances), will also be required to complete the staff circumstances training.
- 61 These training activities are in addition to wider SRUC training modules available on a range of issues related to E&D and fairness in decision making.
- 62 More detailed information about the training package will be made available to staff via the REF 2021 SharePoint site. Completion of training will be monitored by the HR Representative on the REF E&D Team.

## Equality impact assessment

- 63 SRUC will conduct equality impact assessments (EIAs) at critical points over the course of the REF 2021 submission preparation period. In acknowledgement of the REF 2021 preparations being already underway, the processes adopted to date will be reviewed, including via EIAs, once this Code is published and adjustments will be made, as necessary. The REF E&D Team will undertake the EIA following established SRUC EIA systems.
- 64 These will provide a thorough and systematic analysis of the research independence and output selection policies to determine whether these may have a differential impact on particular groups. The analysis will cover all eligible staff and will, where possible, engage and involve staff from protected groups to inform an EIA. The EIAs will analyse data on all the protected characteristics for which sufficient/ reliable data

are available. The findings from these assessments will be used to inform this Code of Practice to ensure that it is improved and enhanced, if required, through the course of the preparations for the REF 2021 submission.

- 65 All EIA outcomes will be reviewed during the submission preparation period to ensure that decision-making processes are fair, transparent and equitable.
- 66 EIAs will be presented to the SRUC EHRI Committee highlighting areas of potential discrimination and examples of good practice. Where there is potential discrimination, this will be drawn to the attention of the local areas affected. Good practice will be promoted more widely across other areas of REF effort, or the business as a whole, where these have demonstrated a positive impact on equality and diversity.
- 67 SRUC will publish the final EIA conducted as part of this exercise after the submissions have been made, in keeping with good practice.

## Part 4: Selection of outputs

- 68 SRUC aims to take a broad approach to the scoring of all potential research outputs conforming to REF open access policies to support the aim of decoupling outputs from people. The average number of outputs required per FTE will be 2.5. A minimum of one output will be required for each staff member with significant responsibility for research employed on the census date. A maximum of five outputs may be attributed to individual staff members (including staff who have left).
- 69 There has been regular communication to academic staff in relation to research outputs deposition requirements to comply with REF2021 open access policy. During the preparation period for REF 2021 we have implemented PURE, a Current Research Information System (CRIS), which will benefit SRUC and facilitate our REF submission in a variety of ways including cross-SRUC scoring of outputs on an ongoing basis.
- 70 The scoring system for outputs will be across discipline areas and faculties, supported by the establishment of an output review group with a small core group (primarily Professors in non-managerial roles; n=12-15) who will effectively 'calibrate' scores across outputs types and disciplines. This Core Reviewing Team will be supplemented by a larger Wider Review Team (n=20-30). The objective is, going forward, to have each paper scored by 3-4 people – 2 Core and 1-2 Wider reviewers, and balancing expert and non-expert skills.
- 71 In line with the roll-out of Pure, the scoring profile will be updated each quarter.
- 72 It is the objective to score all eligible research outputs meeting the REF 2021 submission requirements in this manner. There will also be some cross validation of scores with the University of Edinburgh output selection Codes of Practice for co-authored outputs.
- 73 The Core REF Team, in collaboration with our joint submission partners in the University of Edinburgh, will use these scores to select a portfolio of outputs to meet the output submission guidelines (an average of 2.5 outputs per Category A FTE, with a minimum of 1 and maximum 5 per FTE).

## Staff, committees and training



- 74 See earlier sections. In addition, all academic staff have access to guidance on REF scoring and cited panel requirements for the different star scores. Output reviewers are reminded of the scoring protocols on receipt of new outputs to score.

### Staff circumstances

- 75 SRUC prides itself on being a family-friendly and supportive employer offering a range of well-established flexible working options including career breaks, shared parental leave and secondments. These are widely used by staff across the business, and are considered a worthwhile investment in the long-term employment and development of our staff. It is fully recognized that these may have some short-term impacts on individual productivity however that is not considered as a criteria in whether a flexible-working request is approved or not.
- 76 Expectations around staff performance are agreed between SRUC staff and their line managers as part of our Performance Appraisal system, which requires that face-to-face meetings take place at least twice a year at which staff discuss their progress with their manager, against personal objectives which are set and agreed annually.
- 77 There is no formal expectation at an institutional level of how many outputs any individual will contribute to the REF output pool. Targets are set based on a holistic review of workload, as well as any individual factors which the individual has disclosed to their manager. Any declaration of circumstances in a REF context is completely separate to this process.
- 78 It is anticipated that in the majority of cases where individual staff members do choose to declare personal circumstances formally for the purposes of REF, they will already have discussed these with their line manager and any additional support or adjustments to tasks or workload put in place, whether that be by reduction of the agreed targets for that individual, by the temporary or permanent reallocation of tasks or responsibilities to other staff, or some other mechanism. If this is not the case and providing that the staff member has agreed (by ticking the relevant box on the declaration form - see **Appendix K**), the HR partner who is dealing with the voluntary declaration of circumstances will contact them to discuss their circumstances, options for adjustments available within SRUC and support them if they wish to discuss these with their manager.

### Unit vs. Individual reductions

- 79 REF require that a minimum of 1 and a maximum of 5 outputs must be attributed to each Category A member of staff, with an average of 2.5 outputs per FTE included in the REF submission.
- 80 The decoupling of staff and outputs in REF 2021 allows the potential for flexibility in the number of outputs submitted by any individual researcher and the REF team have stated that when the results are published in 2021, the names of individuals submitted will not be listed, so it will not be possible to identify from this data, how many outputs are associated with any submitted Category A staff member.
- 81 This flexibility in number of outputs submitted should also make it less likely that institutes will have a requirement to request a Unit reduction against the overall requirement for an average of 2.5 outputs per submitted Category A staff member, though there is still a mechanism, as in REF 2014, to apply for this where Units have



been disproportionately affected by high numbers of staff with individual circumstances.

- 82 The other scenario where individual circumstances may be relevant is if a Unit wishes to request a waiver of the minimum of one output for a Category A staff member being submitted where their circumstances over the REF period (1st January 2014 – 31st July 2020) are such that they have been unable to produce any outputs in that time. The quality of any outputs produced is not considered relevant in this situation.

#### Circumstances which are defined vs. those requiring a judgement on reduction in outputs

- 83 There are 2 types of applicable circumstances: **clearly-defined** circumstances; and circumstances requiring a **judgement**.
- 84 A table of the defined and self-declared staff circumstances showing the reductions without penalty which may be considered by the REF Team for particular circumstances is given in **Appendix J**. The type of clearly-defined circumstances likely to be applicable in SRUC include:
- Qualifying as an early career researcher (ECR)
  - Absence from work due to secondments or career breaks
  - Qualifying periods of family-related leave
- 85 Other circumstances which may also have impacted on staff productivity during the REF period, but that require a **judgement** about the appropriate reduction in outputs will also be considered. These include but are not restricted to:
- Disability
  - Ill health, injury, or mental health conditions.
  - Constraints relating to pregnancy, maternity, paternity, adoption or childcare that fall outside of – or justify the reduction of further outputs in addition to – the allowances set out in **Appendix J**.
  - Other caring responsibilities (such as caring for an elderly or disabled family member).
  - Gender reassignment.
  - Other circumstances relating to the protected characteristics listed previously.
- 86 Any other more complex staff circumstances out with the REF guidance on reduction of outputs which could be deemed exceptional circumstances will also be considered via the process described below.

#### Submission, processing and calculations of reductions to account for circumstances

- 87 The declaration of individual circumstances is entirely voluntary and no pressure will be applied to any staff member to disclose this information. Data which could be used as evidence of individual circumstances requiring a judgment will not be collected from internal systems or by any other method. However, SRUC would hope that staff would feel confident that any declaration would remain confidential.
- 88 These cases will be identified and processed through a confidential system of disclosure by relevant individuals to the HR Department, who will in turn collate and validate the requests, and refer them (anonymised) to the REF E&D Team for consideration and decision.

- 89 The staff circumstances template will be circulated to Category A eligible staff, with the request that any staff member wishing to make such a disclosure should forward a completed form to Human Resources.
- 90 A standard template for the declaration of circumstances is attached in **Appendix K** and will be re-circulated to staff in September 2019.
- 91 The internal process will be as follows:
- early Sept 2019: circulate staff voluntary declaration form.
  - End Nov 2019: deadline for submitting voluntary circumstances declarations (deadline 30/11/2019).
  - Dec-Jan 2019/20: processing of declarations will be undertaken; REF E&D Team review clearly defined circumstances requests and request more information from staff if needed.
  - End Jan 2020: REF E&D Team to advise REF Delivery Team on reduction requests;
  - Early Feb 2020: Core REF Team, in discussion with University of Edinburgh partners, decide on unit reduction requests.
  - Early Mar 2020: request individual and unit reductions from REF Team (deadline 06/03/2020).
  - Mar-July 2020: learn outcomes of circumstances requests from the REF team and advise staff and REF Delivery Team.
  - Aug 2020: final review of reduction requests e.g. relating to new or former staff.
  - Final REF2021 submission (expected to be 31 March 2021) submit revisions of reduction requests.

### UOA output pool reductions

- 92 SRUC as a small and specialist institution planning to submit to only 1 Unit of Assessment (UOA), jointly with the University of Edinburgh, does not anticipate making a request for UOA output pool reduction. We hope that our combined contribution to the joint submission will be able meet the output requirements through managing any adverse effects of staff circumstances on the overall productivity of the unit within the flexibility of the REF 2021 output rules (average 2.5 outputs per FTE; minimum of 1 output/maximum of 5 outputs per individual).
- 93 If required for the joint submission, SRUC and the University for Edinburgh may apply to REF for a UOA output pool reduction. At present the potential relevant factors that will be considered when assessing UOA reduction include:
- Incidence of staff circumstance disclosures (number of affected staff, as well as the associated total reduction tariff) relative to UOA size.
  - The ratio of FTE to headcount.
- 94 The potentially complex interplay of the above factors, as well as the joint submission, mean that a threshold will not be set for the factors, but each case will be assessed, with all factors taken into consideration, in combination with a supporting reduction request statement made by the REF Delivery Team, before any final judgement is made.

### Equality impact assessment

- 95 See earlier section

## Joint submissions

- 96 SRUC will share its final Code of Practice with University of Edinburgh with whom we are making a joint submission and will ensure that joint decision-making across institutions does not compromise adherence to the terms of this Code and its overriding principles.
- 97 In addition, the joint submission is underpinned by a Memorandum of Understanding and Data Sharing Agreement.
- 98 Selection of outputs and impact case studies for the joint submission will be made in the context of the entire submission.
- 99 As part of the submission preparation process, appropriate members of staff from our joint submission partner may be made aware of the existence of individual staff circumstances and our internal assessment of any output reductions to be applied to the UOA without penalty, but they will not have access to any information about the specific circumstances or individual.

## Part 5: Appendices

### APPENDIX A: SRUC Equal Opportunities and Diversity Policy



## **EQUAL OPPORTUNITIES AND DIVERSITY POLICY**

### **1 PURPOSE AND SCOPE**

- 1.1 SRUC recognises that the training and development of staff is key to the continual success of the organisation.
- 1.2 The aim of the learning and development policy will be to equip employees with the knowledge, skills and attitudes required to meet job objectives, and to enable staff to develop to their full potential, thus ensuring that SRUC can fulfil the objectives of the divisional business plans.
- 1.3 SRUC will enable as far as it is practicable, adequate resources are available to provide a continuous programme of development for all employees, ensuring that development is designed to meet high standards of quality, in line with the HR Concordat, Athena SWAN and the Investors in People standard.
- 1.4 SRUC strives to be an inclusive organisation that embraces the principle of equal opportunities, and is committed to the provision of a working environment free from any discrimination and victimisation and a culture that respects diversity.
- 1.5 This policy recognises the value and contribution of every individual, and seeks to enable them to achieve their full potential and career aspirations without suffering discrimination of any kind. The policy will help to ensure that SRUC meets its obligations within the Equality Act 2010 and through the Public Sector Equality Duty.
- 1.6 The terms of this policy document apply to all SRUC employees. It should be considered in conjunction with the SRUC Performance Management Policy.

### **2 UNDERLYING PRINCIPLES**

- 2.1 Within the working environment, SRUC will challenge and address any attitudes and biases that hinder the progress of individuals or groups to ensure we work together with mutual respect and tolerance.
- 2.2 SRUC is committed to the development and implementation of employment procedures and practices which do not discriminate and which provide genuine equality of opportunity for all its employees.

- 2.3 SRUC believes that excellence will be achieved through recognising the value of every individual, and their right to access learning and development opportunities.
- 2.4 Staff and students alike should benefit from their association with SRUC, which is committed to adopting flexible strategies and working practices that cater for all and take into account individuals' circumstances and varying needs and expectations.
- 2.5 SRUC recognises the importance and role of a diverse community in enriching the experience of students and staff alike.
- 2.6 Harassment, discrimination or victimisation of any kind will not be tolerated, and if identified steps will be taken to eradicate this without delay (See the Dignity at Work Policy).

### **3 ROLES AND RESPONSIBILITIES**

#### **3.1 Individuals**

- 3.1.1 Be familiar with the terms of the Equal Opportunities and Diversity Policy, and apply its underlying principles in their day to day work.
- 3.1.2 Report any incidents which fall out with the standards expected, and respond sensitively to incidents which fall within that category.
- 3.1.3 Co-operate fully with any measures taken to ensure equality of opportunity within SRUC.

#### **3.2 Line Managers**

- 3.2.1 Lead by example, ensuring the Policy is applied in its entirety within designated areas of responsibility, and take steps to increase awareness of the standards expected.
- 3.2.2 Take all steps to ensure that their actions and decisions do not contravene the policy in any way.
- 3.2.3 Take a lead role in positive action by way of ensuring equal opportunity is fostered, developed, maintained and enhanced in all areas of work activity.
- 3.2.4 Identify and address any incidents whereby a failure to adopt the expected standards is evident.
- 3.2.5 Review all processes and procedures within designated areas of responsibility to ensure they adopt good practice in the provision and promotion of equality.

#### **3.3 Human Resources**

- 3.3.1 Actively encourage staff to participate in staff development programmes that include the promotion of effective equal opportunities and diversity practice.
- 3.3.2 Ensure that all legislative requirements are embedded within SRUC policies and procedures as required.

- 3.3.3 Ensure that all SRUC staff receive appropriate equal opportunity training.
- 3.3.4 Provide guidance and support to managers and staff where issues of concern are reported, assuming a lead role in any related investigations.
- 3.4 Trade Unions
- 3.4.1 Working in conjunction with HR, to develop policies and working practices which reflect the specific requirements and spirit of this Equal Opportunity and Diversity Policy.
- 3.4.2 Represent their members in respect of potential breaches of this Policy.
- 3.5 Diversity and Equality Steering Group
- 3.5.1 Oversee the development of policies and procedures, proactively encouraging the development of a culture of equality and diversity, and networking and liaison with external bodies and interest groups which will help facilitate a culture of best practice and inclusivity.
- 3.5.2 Review this policy as appropriate to reflect legislative changes.

#### **4 SINGLE EQUALITY SCHEME**

- 4.1 In accordance with the Equality Act 2010, SRUC has developed a Single Equality Scheme with the express aim of eliminating any form of discrimination, harassment or victimisation in relation to the identified Protected Characteristics, and promoting equality across the organisation. Through the development, implementation and monitoring of the Scheme, SRUC seeks to ensure that all people involved in business on behalf of the organisation can do so in an appropriate environment and shall be aware of the culture and behaviour expected of everyone.
- 4.2 The Equality Act 2010 introduced a number of 'Protected Characteristics': Age, Disability, Gender Reassignment, Marriage and Civil Partnership, Pregnancy and Maternity, Ethnicity, Religion or Belief, Gender and Sexual Orientation.
- 4.3 The Act provides protection of the Protected Characteristics from the following prohibited conduct:
- Direct Discrimination
  - Indirect Discrimination
  - Victimisation
  - Harassment (including third party harassment)

Definitions can be found within the Dignity at Work policy.

- 4.4 There also now exists the possibility of making a complaint in relation to 'combined discrimination' on the basis of a combination of two or more of the Protected Characteristics.
- 4.5 Where the Characteristics were protected separately by different legislation, the Act created a Single Equality Duty.
- 4.6 The Single Equality Scheme underpins this Equal Opportunities and Diversity Policy.

## **5 RECRUITMENT**

- 5.1 SRUC will ensure that all recruitment activities are conducted in accordance with the terms of this policy, and that all selection decisions are taken in accordance with specific pre-defined criteria for the position. The criteria used will be that which is deemed to be necessary and justifiable for the effective performance of the job, and shall be consistently applied to all applicants. Remuneration will be applied within equal pay principles.
- 5.2 This principle will apply to new entrants to SRUC, as well as internal transfers and promotions.
- 5.3 Salaries will be monitored on an ongoing basis (See section 5.2 of the Recruitment Policy).

## **6 STAFF TRAINING AND DEVELOPMENT**

- 6.1 SRUC is committed to ensuring that appropriate training is delivered to enable its staff to perform their jobs to the best of their ability. All development initiatives will be delivered in such a way that it is accessible and appropriate to allow staff access to training.
- 6.2 All career paths within SRUC are valued equally, and therefore opportunities for career development will be made available to all staff within the organisation. This will be closely monitored by HR within the context of the Performance Management procedures.
- 6.3 Equal Opportunities and Diversity issues will be a standing item within all Induction programmes.

## **7 FACILITIES AND SERVICES**

- 7.1 SRUC facilities will be regularly reviewed and adapted where appropriate to ensure that the needs of all staff, students and visitors are considered and accommodated where possible and practical.

## **8 REPORTING A BREACH OF THE EQUAL OPPORTUNITIES AND DIVERSITY POLICY**

- 8.1 All complaints in respect of this policy will be treated seriously and progressed quickly with confidentiality, sensitivity and discretion.
- 8.2 Where any member of staff feels that there has been a breach of this policy, he/she should report the matter to their line manager in the first instance. Where this is not appropriate for any particular reason, it can be reported to a more senior manager, or to a member of the HR department.
- 8.3 In the first instance, an informal approach may represent the most effective way of addressing a complaint. However, where this is unsuccessful in achieving a resolution, it may be necessary to progress to a formal process due to the seriousness of the issue. This may require a complaint to be submitted in accordance with the SRUC Grievance Policy and Procedure.



- 8.4 Definitions and examples of harassment, discrimination and other unacceptable behavior can be found within the SRUC Dignity at Work Policy.

## **9 STUDENTS**

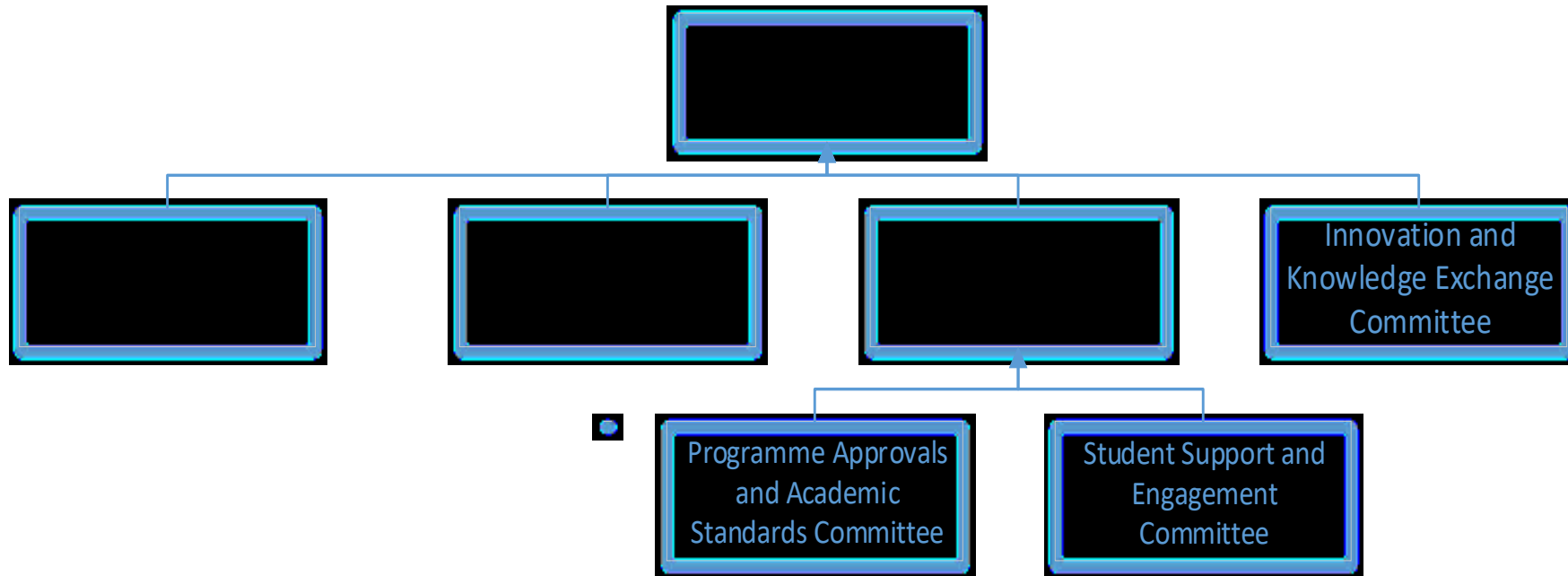
- 9.1 Students should expect to be treated and act in accordance within the principles of this policy, including learning and teaching and all student services. Similarly, SRUC expects that its students will behave in a responsible manner, and be considerate to others at all times. Details can be found within the relevant section of the students' handbook.
- 9.2 Any student who feels that he/she is not being treated fairly according to the equal opportunities and diversity policy should raise the matter with their Course Tutor in the first instance.

## **10 EQUALITY IMPACT ASSESSMENTS**

- 10.1 All SRUC Policies and Practices will be examined through the EIA process in a structured way to ensure that disproportionately adverse effects on any particular groups are avoided. This policy has been reviewed within the EIA process.

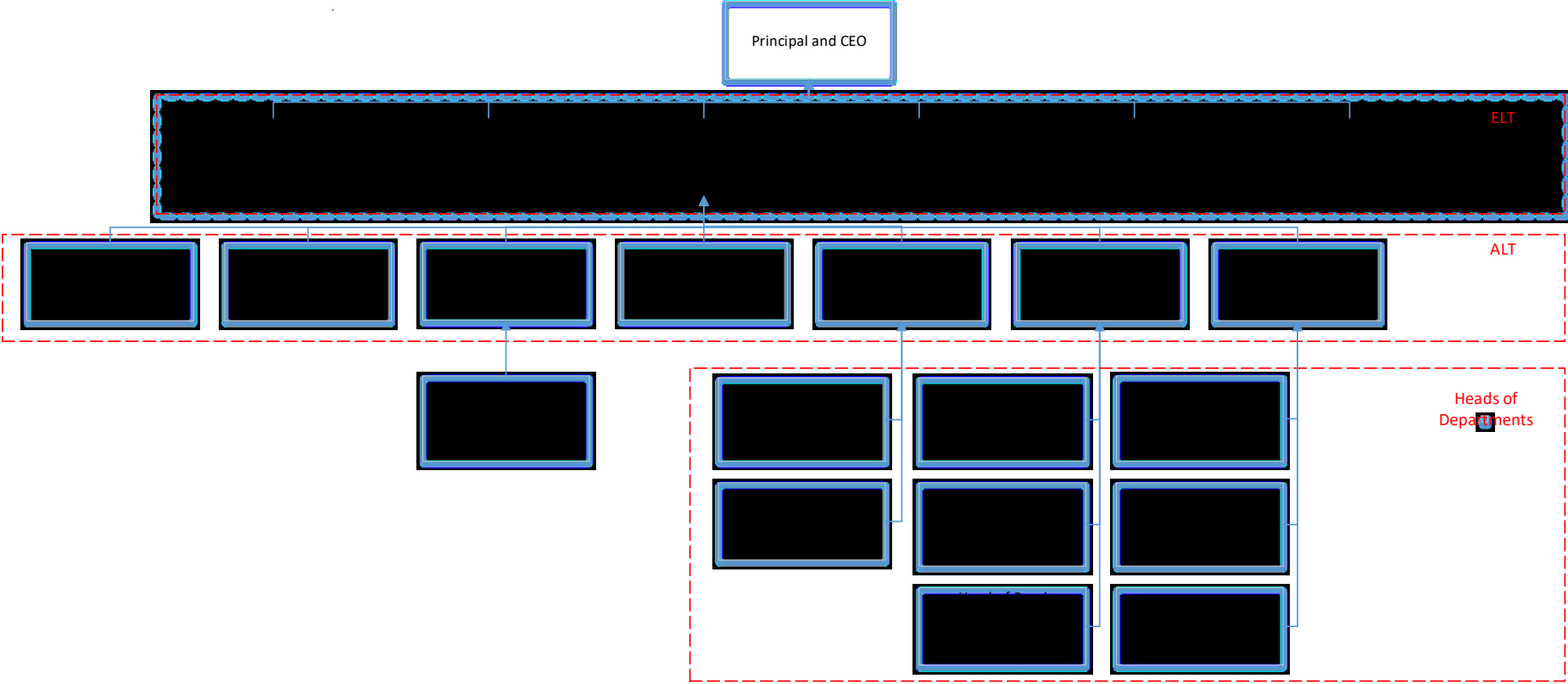
## APPENDIX B: Relevant SRUC Structures

### i. High level overview of SRUC Academic Governance<sup>1</sup>



<sup>1</sup> Committees not directly involved with REF 2021 are indicated by blue text. The remit and membership of these committees is not reported in this document. Arrows reflect reporting lines.

ii. SRUC Academic Operational Management Structure



## Academic Governance

Academic Governance is separate and distinct from corporate governance. The Scottish Code of Good Higher Education Governance ("The Code") states that the Governing Body (in this case the SRUC Board) must ensure that the Academic Board is appropriately constituted in accordance with relevant legislation and SRUC's own constitutional instruments. In addition, it is expected under the terms of the Code (a) that the Governing Body will receive reviews of the Academic Board's effectiveness and (b) that there will be clear division of the different responsibilities of the two bodies. Accordingly, the Academic Board is responsible for the academic governance of SRUC and this Handbook sets out the terms of reference and the remits for the Academic Board and its committees. The memberships provided are interim, based on current divisional structures and will be updated following completion of the current academic restructuring project.

### i. Academic Board

The SRUC Board is required to establish an Academic Board which shall be constituted and regulated in a manner specified by the Board from time to time on recommendation from the Principal and in accordance with the provisions of the Higher Education Governance (Scotland) Act 2016 ("the Act") and the Code.

Academic Board is the governing and executive body responsible for the academic work and standards of SRUC, with a strong strategic focus on academic matters. Its role is to maintain academic standards, promote, oversee and regulate the education and research work of SRUC. It also has an important role as a forum for academic dialogue focussing on key academic issues - both internal and external.

### Remit

Academic Board's role includes:

- Providing academic governance, guidance and strategic direction and promoting education and research in SRUC inter alia;
- Recommending education awards including degrees, diplomas, certificates and other awards, including honorary awards;
- Setting the high-level academic strategy on the advice and recommendation of the Academic Board committees and in accordance with the SRUC Strategic Plan and its underlying strategies, all as approved by the SRUC Board;
- To promote the linkage between teaching research and SRUC's commercial activities, including consultancy, to ensure that such activities feed into SRUC's academic function and that that SRUC's academic function drives rapid and effective change within the sector;
- Reporting to the SRUC Board on any matter referred to it by the Board and on any other relevant academic matter. The Academic Board will formally report to the SRUC Board on an annual basis

The Academic Board has the power to appoint such committees as it considers necessary to carry out its functions and responsibilities.

The Academic Board will normally meet three times in each academic year. As far as practicable, the meetings will rotate between Faculties with one meeting being held at each Faculty during the academic year.

## Membership

The membership of the Academic Board is as follows:

### *Ex officio:*

Principal and Chief Executive (Chair)\*  
Academic Director (Deputy Chair)  
Faculty Deans  
Head of Research  
Head of Veterinary Services  
Head of Learning and Teaching  
Heads of Department  
Head of Knowledge Exchange (Connect for Impact; C4i)  
Registrar

### *Elected:*

Academic staff members elected by academic staff\*  
Student members elected by students\*

### *In Attendance:*

*Representatives of the validating Universities*

In accordance with SRUC policy, the aim of the Academic Board is to have an elected membership which attracts a wide, diverse range of academic staff truly representative of the academic team at SRUC. Accordingly, procedures, timings and processes will seek to support full participation from academic staff and in particular will try to avoid, where possible, creating barriers for such participation.

\* These members are mandatory in terms of the Act based on the required percentages of elected staff and student appointments set out in section 15.

Elections for Academic Staff members and Student members are to take place in accordance with rules set out by the SRUC Board. These may include rules on the number of appointments and provisions for different vacancies. Elected members must comprise more than 50% of the Academic Board and at least 10% of members must be students as required by the Act.

## ii. **Executive Leadership Team (ELT)**

### **Remit**

The remit of the ELT is to assist the Principal and Chief Executive in the performance of her/his duties, including:

- leadership and management of the organisation;
- the development and implementation of strategy, operational plans, policies, procedures and budgets;
- the monitoring of operating and financial performance;
- the assessment and control of risk;
- the prioritisation and allocation of resources;
- monitoring competitive forces in each area of operation; and
- attending Board Committee meetings as and when necessary.

The **duties** of the ELT include:

- recommending objectives and strategy for SRUC in the development of its business, having regard to the interests of its shareholders, customers, employees and other stakeholders;
- agreeing policy guidelines for the divisions based on group strategy which has been approved by the SRUC Board;
- the successful execution of strategy;
- the presentation of the group's budgets and corporate plan to the SRUC Board and, following their adoption, the achievement of budgets and plans;
- developing and reviewing divisional objectives and budgets to ensure that they fall within the agreed group targets;
- ensuring appropriate levels of authority are delegated to group managers;
- reviewing the organisational structure and making recommendations for change;
- ensuring the co-ordination and monitoring within the group of risk and implementation of appropriate internal controls;
- ensuring compliance with relevant legislation and regulations;
- safeguarding the integrity of management information and financial reporting systems;
- identifying and executing new business opportunities outside the current core activities, including geographic diversification;
- examining all investments, divestments and major capital expenditure proposals and the recommendation to the board of those which, in a group context, are material either by nature or cost;
- approving all strategic or material variances of the group's resources;
- ensuring the provision of adequate management development and succession and recommendation and implementation of appropriate remuneration structures within business divisions;
- developing and implementing group policies, including:
  - codes of ethics and business practice,
  - risk management policies,
  - health and safety policy,
  - communications policy,
  - corporate social responsibility policy (including environmental, employee communications and equality and diversity);
- ensuring the active liaison, co-ordination and co-operation between divisions; and
- any other matters that may arise from time to time and when necessary.

### **Membership**

See diagram (ii) in Appendix B

**Frequency of Meetings** normally monthly.

### **iii. Academic Leadership Team (ALT)**

#### **Remit**

The remit of the ALT is to assist the Academic Director in the performance of her/his duties, including:

- leadership and management of the teaching research and veterinary services within the organisation;
- the development and implementation of strategy, operational plans, policies, procedures and budgets;

- the monitoring of operating and financial performance;
- the assessment and control of risk;
- the prioritisation and allocation of resources;
- monitoring competitive forces in each area of operation

The **duties** of the ALT in relation to REF are limited to promotion of best practise around all aspects of REF and communication and dissemination of information about REF.

### **Membership**

See diagram (ii) in Appendix B

**Frequency of Meetings** normally monthly.

## **iv. Research Committee**

### **Terms of Reference**

The Research Strategy Committee is established by SRUC Academic Board to recommend and review strategies, policies and procedures that support and enhance the research programmes, is responsible for advising on strategic direction and planning of research activity, including postgraduate research students of SRUC.

### **Remit**

- Prioritise research activity and funding;
- Develop research postgraduate strategy for SRUC;
- Advise on policies for the admission of postgraduate research students;
- Encourage and support trans- and inter-disciplinary research activities where deemed appropriate;
- Maintain an overview of procedures for the management of collaborative provision, highlighting areas for further development as required;
- Share and promote best practice in the fields of collaborative and international provision;
- Receive and monitor collaborative research arrangements with other institutions;
- Monitor and evaluate the quality and quantity of research outputs and outcomes (impact) of SRUC, including effective communication;
- Make recommendations with respect to SRUC policies and procedures;
- Submit Committee minutes to the Academic Board.

### **Membership**

Head of Research (Chair)

Heads of Department

Head of Knowledge Exchange (C4i)

Head of Research Support Office

Head of Veterinary Services

Student Representative

**Frequency of meetings:** normally four times per year

## **v. Ethics Committee**

### **Terms of Reference**



The Ethics Committee will be responsible for advising the Academic Board on the development, implementation and review of the institutional procedures and guidelines relating to the ethical issues arising from teaching, research, consulting, knowledge exchange and other related institutional activities. The role of the Ethics Committee is to be proactive in relation to emerging issues of institutional, national or international significance.

### **Remit**

- Advise the Academic Board on the development of institutional policies, procedures and guidelines relating to ethical issues arising from teaching, research, consulting, knowledge exchange and other related institutional activities;
- Advise the Academic Board on the development, publication and review of criteria to be applied to research sponsorship;
- Contribute to the promotion of good practice within SRUC;
- Provide advice on ethical issues arising from teaching, research and institutional practice;
- Undertake periodic review of standard operating procedures related to good practice for all ethically related issues and professional conduct;
- Formulate institutional responses to national and international developments relating to ethical issues;
- Act and advise on other issues remitted to it by SRUC Academic Board, SRUC Board or any other relevant committee;
- Monitor ethical practice within SRUC and the operation of the sub-committees (Animal Ethics and Social Science Ethics Committees).

### **Membership**

Head of Veterinary Services (Chair)

Head of Learning and Teaching

Head of Research

Four members (ex-officio or elected) members of Academic Board

Student Representative

**Frequency of Meetings:** normally twice per year

### **Sub-committees**

- (i) Animal Ethics Committee
- (ii) Social Science Ethics Committee

### **vi. Learning and Teaching Committee**

### **Terms of Reference**

The Learning and Teaching Committee is established by SRUC Academic Board to recommend and review strategies, policies and procedures that support and enhance the student learning experience that secure academic standards, and promote best practice in curricula, learning and teaching and in the support of students

### **Remit**

- Maintain a strategic focus on SRUC portfolio of programmes of study, their objectives, outcomes, academic standards, quality assurance and quality enhancement, advising Academic Board on the development of the portfolio to

best meet future needs, adjusting educational practice accordingly in line with the highest standards appropriate;

- Receive and monitor reports on student satisfaction. Receive feedback from other stakeholders, including applicants and alumni and to approve resulting action;
- Receive and approve the recommendations of the Programme Approvals and Academic Standards Committee for both validation of proposed new programmes and revalidation of existing programmes through subject review. Agree revisions to existing programmes;
- Maintain an overview of procedures for the management of collaborative provision, highlighting areas for further development as required;
- Share and promote best practice in the fields of collaborative and international provision;
- Maintain oversight of the size and shape of the academic portfolio and, where appropriate, to advise on the suspension (temporary) or withdrawal (permanent) of programmes;
- Review metrics and themes around student academic misconduct and appeals, including Postgraduate research;
- Monitor the adequacy and effectiveness of mechanisms to assure and enhance service delivery across identified resources and services that support or influence the student learning experience;
- Maintain Institutional oversight of policies and procedures within the SRUC Education Manual to ensure these continue to meet the needs of SRUC and the expectations of the QAA UK Quality Code for Higher Education and Education Scotland's Quality Framework;
- Receive and monitor SRUC's Student Recruitment strategy, critically evaluating trends in student admissions,
- Determine criteria for the admission of students and approval of the Admissions Policy, including progression and articulation rules and agreements;
- Provide academic guidance on learning and teaching elements of the Strategic Plan and the annual Corporate Planning Statement;
- Provide guidance on staff development and training requirements for academic (teaching) staff;
- Ensure that the resource implications of learning and teaching planning and policy making are fully considered;
- Remit particular issues for discussion and/or review to sub-committees of Learning and Teaching Committee;
- Approve SRUC's academic calendar;
- Make recommendations for Honorary Awards to the SRUC Executive Leadership Team (ELT) and Meritorious Committee;
- Act and advise on other issues remitted to it by SRUC Academic Board and SRUC Board;
- Submit Committee minutes to the SRUC Academic Board.

## **Membership**

Head of Learning and Teaching (Chair)

Head of Research

Heads of Department or their nominees

Registrar

Head of Quality

Student Representatives

**Frequency of meetings:** normally four times a year

## APPENDIX D: SRUC REF 2021 Operational structure and roles

**Core REF team:** The Core REF team will be responsible for strategic oversight and management of the entire REF submission process. This will include developing processes and monitoring progress on the delivery of each REF element. This group will also undertake the strategic development and oversight of improving quality of the submission and managing discussions with partner(s) in the submission. This group will provide update regular reports on progress to the Academic Leadership Team (ALT) and/or Executive Leadership team (ELT) (and/or SRUC Board as necessary).

Member	Role
Academic Director (Chair)	ELT Lead
Head of Research	REF Academic Lead
Head of Research Support Office	REF Operations Manager

**REF Delivery Team:** The REF Delivery team will be responsible for ensuring the delivery of the elements of REF including the management of outputs (and scoring), impact case study development, ensuring implementation of the Codes of Practice and routine provision of key performance metrics (REF readiness) for internal and partner reporting. Confidential “people” elements (other than special circumstances which will be managed by Human Resources with general recommendations made to this team as defined in the Codes of Practice) will be monitored by those members of the delivery team identified with (p), with summary reporting to the wider group. The Outputs role is supported by the Core and Wider Output Reviewing Team. The core review team (primarily Professors in non-managerial roles; n=12-15) who will effectively ‘calibrate’ scores across outputs types and disciplines. This Core Reviewing Team will be supplemented by a larger Wider Review Team (n=20-30) of academic staff. The impact lead is supported by a small group of disciplinary Impact leads as well as Impact Case Study leads. This group is expected to meeting on average every 3 months.

Member	Role
Head of Research (Chair)	REF Academic Lead (p)
Head of Research Support Office	REF Operations Manager (p)
HR Data Manager	HR data management
Research Information Officer	PURE data management
Research Outputs Administrator	Management of Research Outputs and compliance with Open Access requirements
Co-opted roles as required including:	Impact Case Study Leads and Impact Champions
	Environment Statement writing teams
	REF E&D Team

**REF E&D Team:** The role of this team is to undertake Equality Impact Assessment of the various stages of implementing and delivering REF, particularly the elements defined in the Codes of Practice. This will follow the guidelines of EIA for SRUC and report to the Equality, Human Rights and Inclusivity Committee (EHRI).

Member	Role
Co-Chair of Athena Swan Self-Assessment (SAT) team (Chair)	Athena Swan Representative (p)
Chair of EHRI Committee	Equality and Diversity Representative (p)
HR Research Business Partner	HR Representative (p)
Head of Learning and Teaching	EIA lead (p)

## APPENDIX E: Timelines and Communication Plan relating to Code of Practice

Date	Event	Relevant staff
January 2019	Final guidance on Codes of Practice published	REF Team
April 2019	Completion of Code of Practice final draft and consultation with HR	REF Delivery Team, HR
Early May 2019	Sign off of final draft of Code of Practice by ALT and ELT	SRUC Core REF Team, senior management
Last 2 weeks of May 2019	Staff consultation – Code made available to all staff via SRUC Intranet or via post/email for any relevant staff on extended absence; staff representative groups including Unions consulted; information provided to staff via Faculty Dean's communications. <a href="mailto:REF2021@sruc.ac.uk">REF2021@sruc.ac.uk</a> mailbox will also deal with email queries from staff.	All Research staff; staff representative groups; REF Delivery Team
1 <sup>st</sup> week of June 2019	Any amendments to the Code arising from consultation made and revised code re-submitted to Academic Director (and ELT for significant changes)/ representative staff groups for approval.	SRUC Delivery Team, SRUC Core REF Team, senior management; representative groups
By 1200 7 <sup>th</sup> June 2019	Submission of Code of Practice. Each Code of Practice will be read by at least 2 members of the Equality and Diversity Panel (EDAP), plus the EDAP Chair, who will provide recommendations to the funding body (SFC) on approval of the Code.	SRUC Core REF Team
Summer 2019	<ul style="list-style-type: none"> <li>i. EIA on Code of Practice carried out</li> <li>ii. Training for staff involved in the decision-making and appeals processes around the Code will be provided</li> </ul>	SRUC Core REF Team, HR, All Research staff
Summer 2019	Audit requirements for Code will be published	REF Team
By 16 <sup>th</sup> August 2019	Funding bodies notify institutions that code of practice meets REF requirements; or request resubmission of the code of practice	REF Team
September 2019	<ul style="list-style-type: none"> <li>i. Research Staff will be informed whether they are currently considered to be Category A staff eligible for submission to REF and the process and timeline for any appeals against this decision and outcomes will be re-iterated.</li> </ul>	SRUC Core REF Team, HR, All Research staff

Date	Event	Relevant staff
	ii. Research staff will be reminded of the process and options available to them relating to the declaration of individual circumstances. Any relevant staff absent from work for an extended period will be sent this information by post/ email as appropriate.	
Autumn 2019	i. Proposed date for invitation to institutes to submit reduction requests ii. Formal complaint process to be announced	REF Team
By 20 <sup>th</sup> September 2019	If required, resubmission of code of practice to funding body	SRUC Core REF Team
By 8 <sup>th</sup> November 2019	Funding bodies notify institutions that code of practice meets REF requirements; or request a second resubmission of the code of practice	REF Team
By 16 <sup>th</sup> November 2019	If required, resubmission of code of practice to funding body	SRUC Core REF Team
By 29 <sup>th</sup> November 2019	Funding body notifies institution whether or not code of practice meets REF requirements	REF Team
December 2019	Publication of approved Codes of Practice on REF website	REF Team

### EQUALITY IMPACT ASSESSMENT - GUIDANCE

#### **WHAT IS EQUALITY IMPACT ASSESSMENT?**

Equality Impact Assessment (EIA) is the process by which organisations examine their activities in order to minimise the potential for discrimination. The process is also used to monitor interventions designed to have a positive impact on a particular group.

EIAs are required by law and there are two levels; a rapid impact assessment where a small group go through the proposal looking for any unintended barriers and a full Equality Impact Assessment which involves a wider audience. This guidance has been produced to assist you with rapid impact assessments only, which in most cases will be sufficient.

Should a full or detailed Equality Impact Assessment be necessary (normally only with strategy documents or major changes to the way a service is delivered) please seek assistance from Human Resources.

In an HEI setting, it is important to recognise that impact assessments are as relevant to areas such as teaching practices, course design and client engagement as they are to policies and procedures at an organisational level.

#### **WHAT ARE THE AIMS OF AN EIA?**

Discrimination can occur due to unforeseen reasons. It is also often the case that service-providers sometimes unintentionally overlook or exclude certain groups by not specifically considering their needs. By undertaking formal EIAs overall quality is improved, the potential for discrimination is reduced and awareness among staff who may have little or no experience is raised. Most importantly, SRUC will be complying with legislation by identifying and designing-out discrimination.

#### **WHICH POLICIES OR PRACTICES SHOULD I CONSIDER?**

Policy, procedure, relevant practise or decisions exist at many levels. There are organisation-wide policies, but in addition, Divisions or Groups may have their own policies and practices which will be equally relevant and these should be impact assessed whenever they are revised or new ones introduced.

For each policy or practice, a rigorous process of assessment should be followed using all the available evidence and gathering more if it is needed. There are several stages to the process and you should consult as widely as possible.

#### **WHICH GROUPS SHOULD I CONSIDER?**

The Equality Act 2010 legally protects people from discrimination in the workplace and in wider society.

It replaced previous anti-discrimination laws with a single Act, making the law easier to understand and strengthening protection in some situations. It sets out the different ways in which it's unlawful to treat someone.

It is against the law to discriminate against anyone because of

- age
- being or becoming a transsexual person
- being married or in a civil partnership
- being pregnant or having a child
- disability
- race including colour, nationality, ethnic or national origin
- religion, belief or lack of religion/belief

- sex
- sexual orientation

These are called 'protected characteristics'.

SRUC is committed to eradicating where possible disadvantage and fostering inclusivity across all of its campuses and functions.

### **WHO IS RESPONSIBLE FOR DOING AN EIA?**

The group responsible for developing a policy, plan or strategy is also responsible for undertaking the EIA.

Support is available from Human Resources and the SRUC Equality and Diversity Team who will offer advice on completing the EIA.

### **HOW DO I DO A RAPID EIA?**

A rapid EIA is intended to be a relatively quick assessment. It involves a 1-2 hour group exercise, with the completion of the template thereafter. The steps to go through are detailed below. The first stage is to get the group together and use the Equality Impact Assessment template to identify and discuss the issues.

### **WHO SHOULD BE PRESENT AT AN EIA?**

It is important that key members of the group that have developed the proposal are present at an EIA. A sound understanding of the proposed policy, plan or strategy is essential to enable it to be assessed effectively.

In some cases it is appropriate also to have external stakeholders present. This will help to ensure that an independent (external) perspective is taken into account. Doing an EIA does not need specialist knowledge or expertise, although sometimes you may want to invite people with specialist expertise to the assessment.

Involving students or members of the public from a range of groups during the development of plans and strategies will also help to ensure that the proposal has taken account of a wide range of views.

### **HOW SHOULD THE GROUP GO THROUGH THE CHECKLIST?**

The template is intended to help you think about potential impacts, then suggest recommendations to improve the impact and identify where further evidence may be required. It assumes background knowledge and understanding of the proposal.

## **UNDERTAKING THE EQUALITY IMPACT ASSESSMENT**

### **STEP 1. IDENTIFY POPULATION GROUPS**

The group should identify the different population groups who may be affected by the proposal. These may include:

- The intended target group(s)
- Other groups who may receive the intervention
- Groups who may be affected unintentionally (positively or negatively)
- People who are excluded from benefiting from the proposal

It is essential to formally consider the 'protected characteristics'.

Not all of these groups will be relevant for every proposal. Group members should jointly define the relevant groups for the specific proposal and write them on the checklist as a reminder.

In addition, you must also consider other excluded groups such as:



- people with mental health problems
- homeless people
- people involved in criminal justice system
- staff
- carers

This is not an exhaustive list. You may also consider groups of people not mentioned above but that you think may be particularly affected. It is possible that you may be proposing something that is aimed at a particular group and therefore will be excluding others (e.g. you may be proposing to set up a disabled women's-only health promotion class). This is permissible in certain limited exceptions and if you are in doubt seek advice from Human Resources.

## **STEP 2. IMPACTS**

Using its knowledge of the proposal, the group should then consider possible impacts. The checklist is intended to help you think broadly about the indirect and unintended effects of the proposal as well as the direct intended ones. Impacts do not have to be limited to the examples shown, but these should stimulate discussion. Identify both positive and negative impacts.

Usually group members should work individually for 10 minutes or so to make a note of what sort of impact they think the proposal will have and can use the spaces to write their ideas. Then the group should discuss these ideas collectively. Some proposals will have impacts on the whole population and you should note these when you find them. The group should try to specify whether the impact will be positive or negative or whether you are uncertain and want to investigate further. The group should also identify which population groups will bear each impact.

In addition, further issues may be relevant for particular excluded groups. It is important not to make assumptions about people's needs, but equally important to ensure that common needs are addressed. It would be impossible to note all the issues in detail and the following should act as key prompts to stimulate more intensive discussion.

### **Key Issues to consider**

For all groups, whether covered by legislation or otherwise, inclusive and effective communication is paramount. It is particularly important in order to arrive at informed decisions and should not simply be viewed as the giving and receiving of information between two or more individuals. It should also not be restricted to focussing on the language needs of minority ethnic or disabled groups. It has been estimated that around 20% of Scotland's population have difficulties understanding complex language, both written and spoken.

Plain English therefore is the key. It will aid communication even where English is the first language of all parties.

Other issues you may consider (where appropriate and relevant) include the following:

#### **Race and religion**

- Have you made appropriate arrangements for ensuring that interpreters and translations can be arranged without undue delay?
- Do staff know about the availability of halal, vegetarian and kosher meals?
- Is running water provided wherever possible?
- Do staff know about burial and death rites of specific cultural/religious groups?
- Are the language and images used in promotional material inclusive and representative?

### Disability

- Are the premises where the service is delivered accessible to wheelchair users?
- Are communication aids such as induction loops installed at reception areas?
- Is written information available in alternative formats such as Braille or on audio cd?
- Are staff aware of the multitude of hidden disabilities and the importance of not making assumptions?
- Are the language and images used in promotional material inclusive and representative?

### Gender

- Have arrangements been made to ensure that the needs of carers, usually but not exclusively women, are not overlooked?
- Are the language and images used in promotional material inclusive and representative?
- Have you considered changing appointment times to accommodate the particular needs of those with childcare responsibilities, both male and female?
- Have you considered the needs of transgendered people?

### Sexual Orientation

- Are the needs of gay, lesbian and bisexual people accounted for?
- Is the language employed in the proposal assuming heterosexism?
- Are the language and images used in promotional material inclusive and representative?
- Could you do more to make the proposal more inclusive?

### Age

- Have the needs of younger people been taken into account?
- Have the needs of older people been taken into account?
- Are the language and images used in promotional material inclusive and representative?
- Could you do more to make the proposal more inclusive?

This is not an exhaustive list and is provided as an aid to stimulating discussion.

## STEP 3. FURTHER EVIDENCE

Having identified impacts, the group should identify any uncertainties that may affect the recommendations. What else do you need to know about the impacts, or to monitor impacts that arise after the proposal is implemented? If you need to know more, note this and consider the evidence to be gathered and questions to be answered.

### *Is a more detailed assessment required?*

Further assessment may be needed if there are possible significant impacts *and* uncertainty about which impacts are most significant and how, or if, the proposal should be adjusted. Not all proposals can be subjected to detailed assessment.

If you think your policy, plan or strategy should be subjected to further assessment of its equality and diversity impacts, please discuss this with Human Resources.

## STEP 4. RECOMMENDATIONS

Having identified the impacts, the group should identify ways in which the proposal should be amended, or other action taken, to maximise positive and minimise negative impacts. The group should agree these suggestions or recommendations.

*How should I report the EIA findings?*

- The template should be completed.
- We are legally obliged to demonstrate that we have undertaken impact assessments so completed templates will be published by SRUC and monitored in Q-Pulse. The template is in Word format to allow increased flexibility.
- The final copy of the template should be formally reviewed and agreed by the group. It is good practice to do this immediately and also to review at 6 months that recommendations are implemented.

## EQUALITY IMPACT ASSESSMENT

<b>PROPOSAL TO BE ASSESSED:</b>	< insert name of policy / procedure / process >
<b>IS THIS A NEW OR EXISTING PROPOSAL?</b>	New / Existing
<b>WHO IS RESPONSIBLE FOR THE PROPOSAL?</b>	
<b>ASSESSED BY:</b>	Assessment group included: < include all persons involved >
<b>DATE OF ASSESSMENT:</b>	<a href="#">Click here to enter a date.</a>

Who is likely to benefit from this policy, procedure, relevant practise or decision?			
Who is intended to benefit from the proposal and in what way?			
1. What outcomes are wanted from this proposal?	The outcomes expected are that:		
2. <u>Could</u> the proposal have a positive or negative impact on minority ethnic groups?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Please explain:
3. Is it likely that the proposal <u>could</u> have a positive or negative impact due to gender?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Please explain:
4. Is it likely that the proposal <u>could</u> have a positive or negative impact due to disability?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Please explain:
5. Is it likely that the proposal <u>could</u> have a positive or negative impact due to sexual orientation?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Please explain:
6. Is it likely that the proposal <u>could</u> have a positive or negative impact due to age?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Please explain:
7. Is it likely that the proposal <u>could</u> have a positive or negative impact due to religion, faith or belief?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Please explain:
8. <u>Could</u> the proposal have a positive or negative impact due on people with dependants/caring responsibilities?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Please explain:

9. Is it likely that the proposal <u>could</u> have a positive or negative impact due to transgender or transsexual?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Please explain:
10. Will the positive or negative impact identified in sections 3-10 have a potentially adverse effect on this proposal?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Please explain:
11. Can this adverse impact be justified on the grounds of promoting equality of opportunity for one group?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Please explain:
12. Does the policy, procedure or relevant practise advance equality of opportunity	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
13. If 'yes' to 13 then how does the policy advance inclusivity?			
14. If 'no' to 13, could the policy, procedure or relevant practise be changed or revised to advance equality of opportunity and if so then how?			
Could this policy, procedure, relevant practise or decision result in a negative impact on people who share protected characteristics (Age, Disability, Gender reassignment, Marriage and civil partnership, Pregnancy and maternity, Race, Religion and belief, Sex and Sexual orientation) giving due regard to the Public Sector Equality Duty (PSED)? If YES or NOT KNOWN, what kind of evidence gathering and analysis is needed to improve this policy?	Yes / No / Not know (delete as appropriate)		

**Recommendation:**

No action required – no potential adverse impact ☐

Amendments or changes required to remove barriers ☐

To be undertaken by [Click here to enter a date.](#)

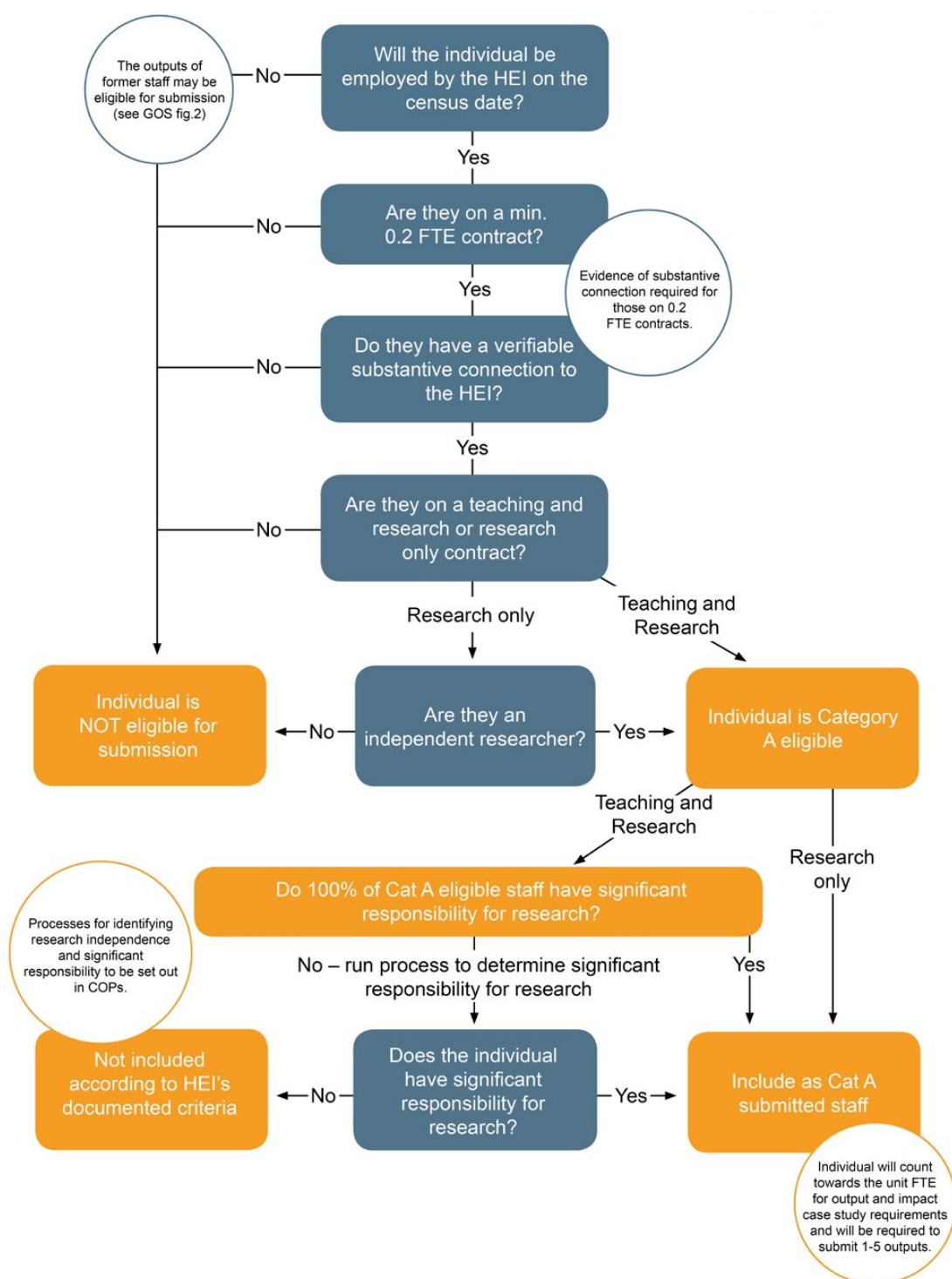
Proceed with awareness of adverse impacts ☐

Further evidence and analysis required ☐

To be undertaken by [Click here to enter a date.](#)

Signed:	
Name:	
Job Title:	

## APPENDIX H: Staff eligibility in REF 2021



## **GRIEVANCE POLICY**

### **1 PURPOSE AND SCOPE**

- 1.1 SRUC believes that the provision of a positive and supportive working environment is important in helping to underpin its aim of ensuring its continued business continuity and success. To that end, every effort will be made to resolve issues as they arise within the workplace.
- 1.2 This Grievance Policy and procedure provides a structured framework as a means of achieving that objective. A grievance is a complaint concerning an actual or supposed circumstance regarded by a member of staff as just cause for complaint. SRUC recognises that formal grievances can have a detrimental effect on employees and relationships within the workplace, and will take all reasonable steps to minimise the adverse impact this can have through the provision of support to those involved.
- 1.3 Whilst SRUC realises that effective communication at work should ensure that daily working issues are resolved, it is recognised that the Grievance Policy may require to be invoked on occasion with a view to resolving problems.
- 1.4 The Grievance Policy operates in conjunction with the principles and key aims as outlined within SRUC Dignity at Work Policy. It should not, however, be utilised as a means of challenging decisions made within the terms of other policies (i.e. disciplinary action, capability warnings, etc.), which have appeals processes in place in each case for that purpose.

### **2 UNDERLYING PRINCIPLES**

- 2.1 SRUC will endeavour to ensure that all grievances are handled sensitively, fairly and, as far as possible, within defined timescales.
- 2.2 No employee who raises a formal grievance will be victimised in any way as a consequence. (This also applies to any employee against whom a grievance is raised).
- 2.3 All stages of a grievance procedure will be treated confidentially, including the outcome of the grievance, which should only be communicated to those staff directly involved.
- 2.4 All grievance investigations will be undertaken comprehensively, so that outcomes can be based on the full facts and circumstances in relation to the grievance submission.
- 2.5 Where deemed appropriate, Mediation will be considered as a means of resolving disputes prior to the formal grievance process being implemented, during the formal grievance process or following the conclusion of the grievance process.
- 2.6 Whilst a standard pro-forma exists for the submission of a grievance, other written communications may, on occasion, be deemed to constitute a grievance (i.e. Email).

- 2.7 It may be appropriate to suspend a disciplinary or capability procedure where a genuine grievance is identified, and will require to be investigated prior to a final decision under the disciplinary or capability procedure being taken.
- 2.8 It is recognised that a grievance process can be stressful for all parties concerned, and every effort will be made to provide support to those who require it both during and immediately following the process.

### **3 ROLES AND RESPONSIBILITIES**

#### **3.1. Employees**

- Participate as required in actions associated with the aim of resolving a grievance, including the provision of a written statement where necessary.
- Show willing to find a resolution to any grievance arising from a dispute within the workplace.
- Attend grievance hearings where requested to do so by the manager dealing with the grievance.
- Be open and honest when providing information to the Investigation Officer in connection with events and issues concerning a grievance situation.

#### **3.2 Line Managers**

- Take appropriate steps to identify and address workplace difficulties as soon as possible, in order to avoid issues becoming more problematic.
- Treat all grievance submissions seriously, and make every attempt to resolve issues in a fair and consistent manner, particularly at the informal stage.
- Ensure that confidentiality is maintained throughout the procedure.

#### **3.3 Human Resources**

- Provide advice and guidance to line managers on the correct procedure to be followed throughout.
- Provide advice in relation to associated policies and procedures, including Equality and Diversity issues.
- Attend grievance hearings, and take a record of the proceedings.
- Provide advice to (and, on occasion, undertake the role of) the Investigation Officer.
- Co-ordination of training activities for line managers and staff in relation to the application of this policy.

#### **3.4 Investigation Officer**

- Undertake investigations to a high standard, and within the terms of this policy document.
- Collate evidence as required in order to enable an informed decision to be made as part of the grievance resolution.
- Take witness statements regarding the grievance.

### **4 PROCEDURE**

#### **4.1 Informal procedure**

4.1.1. It is anticipated that any employee who feels aggrieved about any aspect of their work will initially attempt to resolve the matter through an informal route. This would normally involve a discussion with their line manager (or other manager if the issue relates to a complaint against the line manager), with a view to finding an acceptable resolution.

4.1.2 The employee and manager should conduct an informal meeting, with the aim of reaching agreement on how to take matters forward.



4.1.3 Where appropriate (for example, where working relationships have become difficult), consideration should be given to seeking a resolution through a mediation process at this stage. Mediation can be considered at any stage of the grievance procedure, however, advanced, although it is generally accepted that it is more likely to be successful where it is utilised as early as possible as part of an attempt to resolve workplace difficulties.

4.1.4 Where the issue is not resolved through a concerted attempt via the informal approach, the formal grievance procedure, as outlined, may require to be invoked.

#### **4.2 Formal procedure - Stage 1 – Submission of grievance**

4.2.1 When an employee remains dissatisfied following attempts pursued within an informal approach, he/she should submit the grievance in writing to either their line manager, or a member of the HR team. The written submission should include details of:

- The basis of/background to the grievance.
- The parties to the grievance (i.e. who or what it is against?).
- What attempts, if any, have been made to resolve the problem?
- The expected or desired outcome if possible.

4.2.2 The grievance will be acknowledged in writing by the HR department within two working days of receipt, including an outline of how the grievance will be taken forward.

#### **4.3 Formal procedure - Stage 2 – Grievance Investigation**

4.3.1 An investigation officer will be appointed to conduct the grievance process, along with a nominated support from within the HR department. This will include – in addition to any documentation supplied by the employee raising the grievance – the collation of background information, including witness statements as appropriate.

4.3.2 The investigation is likely to require the investigation officer to meet with the employee to clarify any issues pertaining to the grievance submission, particularly where the facts or circumstances surrounding the submission are unclear.

#### **4.4 Formal procedure - Stage 3 – Grievance Hearing**

4.4.1 The investigation officer, along with the nominated HR representative, will conduct a grievance hearing. The hearing will normally be held within 3 (calendar) weeks of the date of receipt of the grievance submission. It is expected that the employee will attend the hearing, in order to outline relevant details concerning the grievance submission, and answer questions.

4.4.2 The investigation officer may call witnesses to the hearing where considered necessary. (Statements may already have been taken, but it may be appropriate to invite witnesses to the hearing). The employee may also call witnesses to the hearing where considered necessary.

4.4.3 The HR representative will take a record of the meeting, a copy of which will be made available to all parties along with the outcome.

4.4.4 Following the hearing, the investigation officer must determine whether further information is required (including the questioning of further witnesses) before a

conclusion can be drawn. Once this has been completed, the findings must be documented in a written report, a copy of which should be forwarded to the employee who raised the grievance, normally within 3 weeks of the hearing.

4.4.5 The findings must be clearly set out, including the rationale for the decision, and the specific outcome(s) identified. Options include:

- That the grievance is upheld. In this case, action to be taken as a consequence must be outlined (although no specific detail should be given where the action is against a particular individual).
- That the grievance is upheld in part(s), and rejected in other part(s). In this case, action to be taken as a consequence of the grievance being upheld in part(s) must be outlined, although no specific detail should be given where the action is against a particular individual.
- That the grievance is dismissed, and no further action will be taken.

4.4.6 The employee must also be advised of their right of appeal against the outcome if they are not satisfied.

## **5 APPEALS PROCESS**

5.1 Where an employee is dissatisfied with the outcome of the grievance hearing, they may appeal against the decision within ten working days of receipt of the written outcome. The appeal must be notified in writing to the Head of HR, and should state the grounds for appeal, which will normally be one or more of the following:

- That the outcome is unfair / inconsistent in the circumstances.
- New evidence has arisen which was not considered at the original hearing, and may be relevant to the matter at hand (this will require to be identified and submitted at least 5 days in advance of any appeal hearing).
- The grievance procedure was not applied correctly.

5.2 In the absence of any grounds for appeal, the Head of HR will write to the employee requesting details. This must be supplied within ten days of the request for details in relation to the grounds of appeal. Where details of the grounds for appeal are not received within this timescale, the appeal hearing may not be progressed, and the employee will be advised in writing of that decision.

5.3 An appeal hearing will be convened, normally within three weeks of receipt of the written appeal (provided grounds of appeal have also been submitted by the employee). This will be conducted by a senior manager who has had no previous knowledge of, or involvement in, the case, and who holds a more senior role within SRUC than the investigation officer. A member of the HR team will also be present at the appeal hearing who also will have had no involvement in the matter.

5.4 Depending on the nature of the appeal submission, the panel may require to obtain further information, including witness statements, prior to the appeal hearing.

5.5 The employee and his/her representative will be expected to attend the appeal hearing, and provide an outline of the basis of the appeal. A record will be taken of the hearing, which will be provided to the employee with the written outcome, which will normally be within five working days of the appeal hearing.

5.6 The options for the findings are as set out within the previous section. The decision taken at this stage will be deemed to be final.

## **6 TIMESCALES**

- 6.1 SRUC is committed to ensuring that the timescales outlined within this Grievance Policy are adhered to, and very effort will be made to ensure compliance in that regard. However, it is recognised that this may not be possible on all occasions, for a variety of legitimate reasons, including periods of annual and sick leave of key participants, and/or an investigation that is very complex and involves the need to take statements from a large numbers of individuals.
- 6.2 The need for a thorough investigation is of paramount importance, and therefore additional time will be acceptable in such circumstances. Nevertheless, where the timescales cannot be met, the employee will be advised of the reason for this in writing, along with an estimation of the likely revised timescales. Similarly, other parties as appropriate, including any employee against whom the grievance has been raised, will be notified accordingly.
- 6.3 Grievances (from the informal stage) should be raised by employees within 3 months of the issue giving rise to the complaint.

## **7 REPRESENTATION**

- 7.1 Any employee raising a grievance will be entitled to be accompanied at meetings by a representative from a Trade Union, or colleague within SRUC.
- 7.2 The representative will be entitled to present the employee's case at the hearing, and seek clarification in relation to pertinent issues, including the challenge of specific statement of fact and/or views expressed during the hearing. The representative, however, will not be entitled to respond to any questions that are put directly to the employee during the course of the hearing or prevent SRUC from explaining its findings.
- 7.3 The representative may request a temporary adjournment to the hearing to consult with the employee in private. The investigation officer may also request an adjournment where this is considered necessary.

## **8 VEXACIOUS GRIEVANCES**

- 8.1 The purpose of this Grievance Policy is to ensure that the appropriate channels are available through which employees can raise genuine concerns.
- 8.2 However, where a grievance is found to be vexatious or malicious, or where there is a continued pattern of unfounded complaints by an employee, that employee may be subject to the Disciplinary Policy.

## **APPENDIX 1: GUIDANCE FOR MANAGERS**

- 1 Resolving a grievance informally
  - 1.1 Any employee who has a concern or complaint in relation to any aspect of their work is entitled to raise the issue under this Grievance procedure. Ideally, this will take the form of a discussion with the line manager, although it must be acknowledged that, where the complaint involves the line manager, it may be appropriate to take the matter to a more senior manager, or member of the HR department in the first instance.
  - 1.2 During the discussion, the employee and line manager should explore the issues, and seek to reach agreement on any actions that may be taken to address the

concern(s). It may also be appropriate to agree a further meeting to discuss whether the matter has been resolved to the employee's satisfaction.

- 1.3 Line managers should take a note of the issues discussed, including any agreed actions and changes made. This will enable the manager to check whether the issues raised have been dealt with, and, in the event that the matter is progressed to the formal stages of the Grievance procedure, demonstrate that efforts were made to resolve the complaint at the earliest stage. (See paragraph 6, 'Maintaining records.').  
Such notes should not be kept on the employee's file, nor recorded in any official capacity.
- 1.4 Where the complaint is resolved at the informal stage, the line manager should monitor the situation to ensure that no further related difficulties arise.

## **2 The Grievance Investigation**

- 2.1 The role of the Investigating Officer (IO) is critical to the effective application of this policy. The IO must not have had any involvement in the case previously, and therefore must be seen to be independent and impartial.
- 2.2 The IO will normally meet with the employee who raised the grievance, to ascertain the precise reasons for the grievance submission, and clarify any issues as appropriate. The IO will also outline the procedure to be followed, including associated timescales.
- 2.3 Where a grievance is submitted against another employee of SRUC, (the respondent) that employee will be advised of the nature of the grievance as soon as possible. The respondent will also be advised of the procedure to be followed, including timescales, and given the opportunity to respond to the issues raised in the form of a written statement. When providing a statement, the respondent should be permitted to be represented by a trade union representative or colleague should they so wish.
- 2.4 Thereafter, the IO may wish to interview other individuals considered to be important in terms of seeking to establish the circumstances surrounding the grievance submission. It is likely that this will take the form of written statements, which will be used at the grievance hearing.
- 2.5 Written statements will normally be signed by the individual. In certain circumstances, (i.e. in the interest of safety, security) SRUC may withhold the names of signatories to statements or otherwise take steps to preserve the anonymity of the signatory or parties mentioned in the statement. This decision will be at the discretion of the IO.  
Whilst the identity of an individual may be withheld as outlined, details of any allegations or opinions expressed would still be provided where appropriate. It should also be borne in mind that no complete guarantee of confidentiality can be provided, as if subsequent proceedings are initiated (for example, employment tribunal proceedings) it is possible to seek disclosure of witness statements which will identify witnesses.  
Written statements taken as part of the investigation will be made available to the employee who raised the grievance at least 3 days in advance of the hearing.
- 2.6 SRUC expects that no employee will unreasonably refuse to provide a statement in connection with a grievance investigation where requested by the IO.

- 2.7 SRUC recognises that a grievance investigation can be stressful for all those involved, and therefore will act with due sensitivity throughout the procedure. Where appropriate, it may be opportune to ensure the provision of support to staff. Depending on the nature of the issues surrounding a grievance investigation, it may be appropriate to take action to mitigate any potential difficulties, including a change of work environment and/or line manager until the matter is resolved. Any such action should not be regarded as punitive in nature, and will normally be applied with the agreement of all parties concerned.

### **3 Conducting a Grievance hearing**

- 3.1 The IO will chair the grievance hearing, along with a member of the HR department. The employee who raised the grievance will be in attendance, along with his/her representative. He/she will be asked to outline the basis of the grievance, and the IO and HR representative will clarify salient points as appropriate.
- 3.2 It may be appropriate to ask any witnesses to attend the hearing where considered helpful. For example, someone with a specific area of technical knowledge may be helpful in clarifying points of work-related procedure or practice. In certain circumstances, (for example, where the matter is particularly sensitive, and attendance would be unduly uncomfortable for the parties involved), it may be prudent to speak with the witness out with the hearing. In such cases a witness statement will be prepared.
- 3.3 Respondents will be requested to attend the hearing to enable him/her to comment on the issues raised within the grievance submission.
- 3.4 Whilst representation (see section 7 of the policy) is restricted to a Trade Union, or colleague within SRUC, in certain circumstances a helper of carer may be allowed to attend subject to an employee's requirements.
- 3.5 Any reasonable adjustments required by any attendee(s) should be considered and implemented prior to the hearing.

### **4 Confirming the outcome**

- 4.1 Following the grievance hearing, the IO must summarise their findings within a written report. The report will outline the procedure adopted during the investigation, including observations and recommendations where appropriate.
- 4.2 The IO should confirm the findings to the employee who raised the grievance within two weeks of the hearing. Where this timescale cannot be met, the employee will be advised of the reason, including when he/she can expect to confirmation of the outcome, including the right to appeal against the decision.
- 4.3 Where the grievance was submitted against another SRUC employee, the respondent will be advised of the outcome either via a face to face meeting, or in writing within two weeks of the hearing. Where this timescale cannot be met, the respondent will be advised of the reason, including when he/she can expect confirmation of the outcome.
- 4.4 The IO may elect to make specific recommendations in relation to matters arising from the grievance investigation, including counselling and/or mediation, individual development activities, or action in accordance with SRUC's Disciplinary and Capability policies.

- 4.5 Those employees who contributed to the grievance investigation (out with the employee who raised the grievance and the respondent) will be advised when the process has been brought to an end.

5 **Mediation**

- 5.1 SRUC recognises that mediation can be a useful means of addressing disputes within the workplace. As a voluntary and confidential process, it normally involves an independent and impartial individual, who will seek to help two or more employees to reach a solution that is acceptable to everyone.
- 5.2 Workplace mediators do not make judgements or determine outcomes – their role is to restore and maintain the employment relationship where possible.
- 5.3 Mediation should be considered at the earliest stages of the grievance process, but may also be considered at any later stage, including outcome recommendations. Arrangements for workplace mediation will be the responsibility of the HR department.

6 **Maintaining records**

- 6.1 Every effort should be made to ensure that a record of informal discussions is kept. Whilst there is no defined format for such records, relevant details – date, issues discussed, agreed actions, etc. – should be recorded in the event that the issue progresses to a formal investigation and hearing.

A record of the issues covered during the grievance hearing will be taken by the HR representative, a copy of which will be issued to the employee who raised the grievance along with the written outcome.

- 6.2 Written notes may be taken by the employee and/or his/her representative during the hearing. However, no electronic recording of hearings is permitted.

7 **Correspondence**

- 7.1 It is recommended that all correspondence being sent to employees who are subject to this Grievance Policy should be sent by Recorded Delivery.

## APPENDIX J: Reductions for defined staff circumstances

Staff Circumstance	Definition/criteria	Details	Potential reduction	Additional information
Early career researcher (ECR)	Members of staff who meet the definition of Category A eligible on the census date, and who started their careers as independent researchers on or after 1 August 2016.	<b>Date at which the individual first met the REF definition of an ECR:</b>  On or before 31 July 2016 Between 1 August 2016 and 31 July 2017 inclusive  Between 1 August 2017 and 31 July 2018 inclusive  On or after 1 August 2018	<b>Output pool may be reduced by up to:</b>  0 0.5  1  1.5	Definition of research independence can be found in Part 3 of the Code.
Absence due to secondment or career break	Absence from work due to secondments or career breaks outside of the HE sector, and in which the individual did not undertake academic research.	<b>Total months absent between 1 January 2014 and 31 July 2020 due to a staff member's secondment or career break:</b>  Fewer than 12 calendar months At least 12 calendar months but less than 28 At least 28 calendar months but less than 46 46 calendar months or more	<b>Output pool may be reduced by up to:</b>  0 0.5 1 1.5	Reduction is based on the length of the individual's absence or time away from working in HE.
part-time working	This is taken into consideration in the overall FTE-based calculation of the number of outputs required, therefore this should only be used as a reason for a reduction in exceptional circumstances e.g. where the FTE at census does not reflect the level which it has been over the majority of the REF period.	variable	variable	
family-related leave	Where a new child arrives in the family	<b>For each discrete period of:</b>	<b>Output pool may be reduced by up to:</b>	These reductions may be increased in

		Statutory maternity leave or statutory adoption leave taken substantially during the period 1 January 2014 to 31 July 2020, regardless of the length of the leave.	0.5	exceptional circumstances, up to a maximum reduction of 1.5 outputs, in line with those outlined above for secondment or career break. These should be detailed in the request.
		Additional paternity or adoption leave, <sup>2</sup> or shared parental leave <sup>3</sup> <b>lasting for four months or more</b> , taken substantially during the period 1 January 2014 to 31 July 2020.	0.5	
		<b>Shorter periods of leave may qualify for a reduction where:</b>  These are combined with other factors such as existing childcare commitments or other staff circumstances.	variable	

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<sup>2</sup> 'Additional paternity or adoption leave' refers to leave of up to 26 weeks which is taken to care for a child where the person's spouse, partner or civil partner was entitled to statutory maternity leave or statutory adoption leave, and has since returned to work.

<sup>3</sup> 'Shared parental leave' refers to leave of up to 50 weeks which can be shared by parents having a baby or adopting a child. This can be taken in blocks, or all in one go.



## Declaration of Individual Staff Circumstances template

This document is being sent to all staff whose outputs are eligible for submission to REF 2021 (see [‘Guidance on submissions’](#), paragraphs 117-122). As part of SRUC’s commitment to supporting equality and diversity in REF, we have put in place safe and supportive structures for staff to declare information about any equality-related circumstances that may have affected their ability to research productively during the assessment period (1 January 2014 – 31 July 2020), and particularly their ability to produce research outputs at the same rate as staff not affected by circumstances. The purpose of collecting this information is threefold:

- To enable staff who have not been able to produce a REF-eligible output during the assessment period to be entered into REF where they have;
  - circumstances that have resulted in an overall period of 46 months or more absence from research during the assessment period, due to equality-related circumstances (see below)
  - circumstances *equivalent* to 46 months or more absence from research due to equality-related circumstances
  - two or more qualifying periods of family-related leave.
- To recognise the effect that equality-related circumstances can have on an individual’s ability to research productively, and to adjust expectations in terms of expected workload / production of research outputs.
- To establish whether there are any Units of Assessment where the proportion of declared circumstances is sufficiently high to warrant a request to the higher education funding bodies for a reduced required number of outputs to be submitted.

### Applicable circumstances

- Qualifying as an ECR (started career as an independent researcher on or after 1 August 2016)
- Absence from work due to secondments or career breaks outside the HE sector
- Qualifying periods of family-related leave
- Disability (including chronic conditions)
- Ill health, injury or mental health conditions
- Constraints relating to family leave that fall outside of the standard allowances
- Caring responsibilities
- Gender reassignment

If your ability to research productively during the assessment period has been constrained due to one or more of the following circumstances, you are requested to complete the attached form. Further information can be found in paragraph 160 of the [Guidance on Submissions](#) (REF 2019/01). Completion and return of the form is voluntary, and individuals who do not choose to return it will not be put under any pressure to declare information if they do not wish to do so. This form is the only means by which SRUC will be gathering this information; we will not be consulting HR records,

contract start dates, etc. You should therefore complete and return the form if any of the above circumstances apply and you are willing to provide the associated information.

## **Ensuring Confidentiality**

### **SRUC**

If the institution decides to apply to the funding bodies for either form of reduction of outputs (removal of 'minimum of one' requirement for unit circumstances), we will need to provide UKRI with data that you have disclosed about your individual circumstances, to show that the criteria have been met for reducing the number of outputs. Please see the '[Guidance on submissions](#)' document (paragraphs 151-201) for more detail about reductions in outputs and what information needs to be submitted.

Within SRUC the circumstances forms will be received by the HR Representative on the SRUC REF E&D Team and handled and analysed to produce key statistics which the E&D Team will use to consider individual and pooled (i.e., Unit of Assessment) reductions that may need to be applied. Recommendations will be made from the E&D Team to the REF Delivery Team as to the potential quantum of reductions that could be sought. Only information relating to any reduction we may seek to apply will be held confidentially by the HR representative so that it is available should any audit be carried out by the REF team. Any other information relating to circumstances not declared in the final REF submission will be securely disposed of.

### **REF Team**

Submitted data will be kept confidential to the REF team, the REF Equality and Diversity Advisory Panel, and main panel chairs. All these bodies are subject to confidentiality arrangements. The REF team will destroy the submitted data about individuals' circumstances on completion of the assessment phase.

## **Changes in circumstances**

SRUC recognises that staff circumstances may change between completion of the declaration form and the census date (31 July 2020). If this is the case, then staff should contact their HR business partner to provide the updated information.

To submit this form you should complete and send it via email to [REF2021Circumstances@sruc.ac.uk](mailto:REF2021Circumstances@sruc.ac.uk) or via internal mail to REF 2021 Circumstances, REF 2021 HR Rep. c/o Human Resources, SRUC Kings Buildings. Please mark confidential.

**Name:** [Click here to insert text.](#)

**Department:** [Click here to insert text.](#)

Do you have a REF-eligible output published between 1 January 2014 and 31 July 2020?

Yes ☐

No ☐

Please complete this form if you have one or more applicable equality-related circumstance (see above) which you are willing to declare. Please provide requested information in relevant box (es).

Circumstance	Time period affected
<b>Early Career Researcher (started career as an independent researcher on or after 1 August 2016).</b>  <i>Date you became an early career researcher.</i>	<a href="#">Click here to enter a date.</a>
<b>Career break or secondment outside of the HE sector.</b>  <i>Dates and durations in months.</i>	<a href="#">Click here to enter dates and durations.</a>
<b>Family-related leave;</b> <ul style="list-style-type: none"><li>• statutory maternity leave</li><li>• statutory adoption leave</li><li>• Additional paternity or adoption leave or shared parental leave lasting for four months or more.</li></ul> <i>For each period of leave, state the nature of the leave taken and the dates and durations in months.</i>	<a href="#">Click here to enter dates and durations.</a>
<b>Disability (including chronic conditions)</b> <i>To include: Nature / name of condition, periods of absence from work, and periods at work when unable to research productively. Total duration in months.</i>	<a href="#">Click here to enter text.</a>
<b>Mental health condition</b> <i>To include: Nature / name of condition, periods of absence from work, and periods at work when unable to research productively. Total duration in months.</i>	<a href="#">Click here to enter text.</a>
<b>Ill health or injury</b> <i>To include: Nature / name of condition, periods of absence from work, and periods at work when unable to research productively. Total duration in months.</i>	<a href="#">Click here to enter text.</a>
<b>Constraints relating to family leave that fall outside of standard allowance</b>	<a href="#">Click here to enter text.</a>

<p><i>To include: Type of leave taken and brief description of additional constraints, periods of absence from work, and periods at work when unable to research productively. Total duration in months.</i></p>	
<p><b>Caring responsibilities</b>  <i>To include: Nature of responsibility, periods of absence from work, and periods at work when unable to research productively. Total duration in months.</i></p>	Click here to enter text.
<p><b>Gender reassignment</b>  <i>To include: periods of absence from work, and periods at work when unable to research productively. Total duration in months.</i></p>	Click here to enter text.
<p><b>Any other exceptional reasons e.g. bereavement.</b>  <i>To include: brief explanation of reason, periods of absence from work, and periods at work when unable to research productively. Total duration in months.</i></p>	Click here to enter text.

Please confirm, by ticking the box provided, that:

- The above information provided is a true and accurate description of my circumstances as of the date below
- I realise that the above information will be used for REF purposes only and will be seen by the SRUC REF E&D sub team and those on the REF delivery team required to have access to apply any required reductions to output selection as listed in SRUC REF Codes of Practice.
- I realise it may be necessary to share the information with the REF team, the REF Equality and Diversity Advisory Panel, and main panel chairs.

I agree ☐

**Name:** Print name here

**Signed:** Sign or initial here

**Date:** Insert date here

☐ I give my permission for an HR partner to contact me to discuss my circumstances, and my requirements in relation this these.

☐ I give my permission for the details of this form to be passed on to the relevant contact within my department/faculty/centre. (Please note, if you do not give permission your department may be unable to adjust expectations and put in place appropriate support for you).

I would like to be contacted by:

Email ☐ Insert email address

Phone ☐ Insert contact telephone number