Code of Practice template

Institution name: Hartpury University
Date of submission: 11/05/26

Part 1: Introduction

Hartpury University is entering its second Research Excellence Framework (REF), having transferred to the Higher Education (HE) sector and attained University status in September 2018. Hartpury has delivered higher education for over 30 years, alongside its further education (FE) provision, which is now encapsulated within the subsidiary company, Hartpury College. When using the term 'Hartpury', we are referring to the whole organisation (both the University and the College).

Hartpury has strong principles and enabling policies with respect to equality, diversity and inclusion (EDI). The current EDI policy, which applies across the whole organisation for all full-time, part-time, fixed term and temporary staff, is provided in Appendix 1. It originates from 2005, with the last update being 2024, and is approved by the Corporation, as the ultimate governing body at Hartpury.

This Code of Practice (CoP) draws on the principles of relevant Hartpury research and EDI policies (see Appendix 2.3) and is an evolution of the 2021 REF CoP. To quote from the EDI policy: "At Hartpury, we are committed to valuing diversity and promoting equality. One of our Values is 'Respectful' and this means we create an inclusive and accessible environment that enables and promotes belonging and respect for staff, students and the wider community. We create an inclusive approach for both students and staff that promotes diversity, positive behaviours, builds effective relationships, and enables all our students to develop and achieve the best possible outcomes. We value others for their contribution, irrespective of personal differences".

Hartpury' s approach is to go further than legal compliance, as articulated in this commitment from the EDI Policy:

"Hartpury' s commitment to Equality, Diversity and Inclusivity is to:

- Empower our community to embrace equality,
- Celebrate and recognise the strength of diversity,
- Promote an Inclusive Culture, and,
- Apply zero tolerance to all forms of harassment and discrimination."

Hartpury actively monitors EDI, through an annual Equality and Diversity Forum, with a biannual Equality and Diversity Report presented to the Corporation. The Forum views all EDI action plans and relevant statistics at each meeting. The policy is reviewed annually by the Chief People Officer, with any changes agreed by the Equality and Diversity Forum before approval by the Corporation.

We demonstrate our commitment to EDI further within two of the pillars in the newly approved People Strategy:

1. 'Inclusive Community': this means we are values driven, creating an inclusive, respectful and compassionate community, and,
2. 'Belonging': this means we are an employer of choice where everyone's voice and needs are heard and respected.

Over recent years, Hartpury has enhanced its approach to EDI by:

- Promoting EDI initiatives across campus using the Wellbeing and Inclusivity Calendar, celebrating and recognising events and prominent days, including the Annual Inclusivity Month,
- Conducting bi-annual staff surveys to gain a better understanding of what it is to work at Hartpury, and identify areas for improvement,

- Achieving the Students Mind's University Mental Health Charter (one of the first five universities to achieve this), signing the Association of College's Mental Health Charter, becoming members of Race Equality Matters, renewing the Disability Confident and Mindful Employer charters,
- Publishing our gender pay audit and conducting equal pay audits,
- Launching an Inclusive Teaching and Learning Guide that all HE staff are asked to utilise to standardize inclusive practice including for research students,
- Installing Inclusivity Champions in departments to promote EDI related activities and resources to teams, and,
- Allocating specific responsibility for ensuring better representation for EDI within research through a designated Professor taking on this responsibility university wide.

All staff, regardless of contract type, including fixed-term, part-time and contract research staff, are supported through Hartpury University's commitment to equality, diversity and inclusion (EDI). These staff are covered by the same institutional EDI policies and procedures as permanent staff and, where applicable, by the University's Code of Research Practice.

Fixed-term, part-time and contract research staff have equal access to EDI-related training, guidance and support. All new staff receive an overview of research governance, research integrity and research practice as part of their induction, ensuring that expectations, support mechanisms and relevant policies are communicated consistently from the outset of employment. Staff are also provided with a link to the dedicated Research and Knowledge Exchange Moodle page through the staff handbook, enabling access to key guidance, resources and recorded training materials.

To ensure inclusivity for colleagues working different patterns, EDI training sessions are recorded and made available through the Research and Knowledge Exchange Moodle page. This approach helps to ensure that staff who are unable to attend in person because of part-time working arrangements, research commitments or the nature of their contract are not disadvantaged in accessing EDI information and development opportunities.

The Professor with responsibility for EDI regularly attends meetings across Schools and Departments to provide updates on research-related EDI developments and to create opportunities for staff to raise questions, concerns or suggestions. In addition, all staff, including those on fixed-term, part-time and contract research appointments, may contact the Professor directly to seek advice or discuss EDI-related matters confidentially.

The University aims to achieve transparency in its approach to the REF by close dialogue with those involved in or affected by the processes. Given the small size of the University (currently 2550 head count (2420 FTE) HE students and 130 head count (114 FTE) HE academic staff) and the correspondingly small number of individuals involved in the REF submission, this can be achieved through direct and individual contact. The University will be submitting to two Units of Assessment: Unit 6, which involves fewer than ten members of staff and Unit 24 with fewer than 20 members of staff. The University ensures consistency of approach where eligible staff relate to more than one Unit of Assessment through the application of institutional policies, and central

oversight from the REF Steering Group. These arrangements are supported by cross-unit coordination and appropriate governance structures to ensure that eligibility criteria, workload allocation, and evidential standards are applied transparently, equitably, and in accordance with REF requirements.

Responsibility for the REF rests with the PVC Education. Research and Knowledge Exchange (ERKE), overseen by the Research and Knowledge Exchange Committee and supported by the REF Steering Group (see Appendix 2.4 and Appendix 2.5 respectively for the Terms of Reference for these committees). The University's research governance structure is outlined in Appendix 2.8: Research Governance Standard Operating Procedures. The PVC ERKE is responsible to the Deputy Vice-Chancellor, and thence to the Vice-Chancellor. The Research and Knowledge Exchange Committee reports to the Academic Board (see Appendix 2.6 for the Terms of Reference for this committee), which is responsible to the Corporation Board (see Appendix 2.7 for the Instruments and Articles of Government, by which Corporation is bound) and undergoes delegated challenge by the Corporation's Quality, Enhancement and Standards Committee (see Appendix 2.7 for the Terms of Reference for this Committee).

This Code of Practice, and any other relevant information, including any changes that are necessarily required, have been and will continue to be communicated directly to those involved or affected. This involves both electronic communication (e.g. email and website) and face-to-face dialogue (whether individually or as a group). The University is confident in its ability to ensure communication to those involved or affected given the small number of staff and will ensure that those working away from the University site, or who are otherwise unable to attend, will receive direct communication about this. Staff have been consulted about the Code of Practice (see below) and we anticipate ongoing dialogue on a regular basis, including at least 6-monthly updates. Staff are also able to raise any issues or queries related to REF through direct communication with REF Unit Leads or asking for these queries to be tabled for discussion within the REF Steering Group.

As well as communication with individuals, through the PVC ERKE and the Chief People Officer, the University will consult and communicate as appropriate with all academic teams across the University and with the Staff Forum (which acts as the representative body for staff at Hartpury).

The consultation process for this cycle's REF Code of Practice took place between 5 January 2026 and 5 March 2026. After an initial briefing consultation, events were held with each academic department in turn. The small pool of staff who will be eligible for REF 2029 (n=29) were consulted separately. Hartpury does not have a recognised union and so the Staff Forum (which is the representative staff body) was consulted on the Code of Practice. The Code of Practice was subject to an EIA (see below) before being approved by the Research and Knowledge Exchange Committee on 28th January 2026, by the Academic Board on 11th February 2026, by the Quality, Enhancement and Standards Committee on 26th February 2026 and by the Corporation on 19th March 2026. The EIA has been shared with the approving committees and this resulted in no substantive changes.

Policies and Procedures

The policies and procedures to be used are set out in this Code, under each section as relevant (please refer to Appendix 2). Existing structures, policies and processes have been used where possible, to minimise variation from normal practice. Where new policy or process has had to be developed in order to meet the specific requirements of the REF Guidelines, this has been the responsibility of the PVC ERKE, engaging with other relevant office holders as appropriate, and with the oversight of the REF Steering Group, Research and Knowledge Exchange Committee, the Academic Board and the Corporation. The University is mindful to ensure that its approach to REF is both appropriate and proportionate.

Staff, Committees and Training

The PVC ERKE has lead responsibility for the REF at the University. The PVC ERKE is responsible to the Deputy Vice-Chancellor, and thence to the Vice-Chancellor. The PVC ERKE is supported by the REF Steering Group (see Appendix 2.5), with oversight provided by the Research and Knowledge Exchange Committee. The PVC ERKE role has institutional responsibility for research and there is a formal appointment process to the role. This role has therefore been selected by the University as being the most appropriate role to have lead responsibility for the REF.

The REF Steering Group will be responsible for decisions relating to research independence and selection of outputs (there being no decisions to make as part of the REF process in relation to identification of staff with significant responsibility for research; see Part 2).

The University requires all staff to undertake training in relation to EDI as a matter of course. In the context of the REF, the PVC ERKE, Director of Research and Knowledge Exchange, and Head of Inclusivity have had specific training on EDI in the past in the context of the REF (delivered by Advance HE) and specifically for this exercise through training updates. These individuals will provide training within the University to any others, as required. This will specifically include the Deputy Vice Chancellor, the Chief People Officer and members of the REF Steering Group. The Research and Knowledge Exchange Committee will be specifically briefed, as will the Academic Board, prior to any formal decisions being made about the REF. The Committee and the Board will be reminded of REF-specific EDI responsibilities at the beginning of any REF item on their agenda.

Appeals

Appeals against decisions may be made in relation to the determination of research independence. The process for this is covered in Part 3.

Equality Impact Assessments

An Equality Impact Assessment and action plan were undertaken and reported to the Equality and Diversity Forum on March 2026 (see Appendix 1). These will be updated as necessary in light of any changes to the Code or to the processes required. The findings of the initial assessment were that the Code and the relevant processes do not introduce unequal opportunities across staff

eligible for inclusion in the REF. There were no material findings that needed to be addressed.

Updates since 2021

While no longer required for REF2029, the University has retained operation of a confidential mechanism for disclosure of personal circumstances, and the provision of training for those involved in decision-making. This process feeds into staff appraisal processes, workload modelling and Individual Research Plan Panel assessment to enable equality of treatment.

The Professor leading on research EDI has strengthened independent oversight to ensure that REF 2029-related processes are fair, transparent, and consistently applied in line with Hartpury's Code of Research Practice and REF guidance. This approach supports equity across all eligible staff by advising on the consideration of individual circumstances, monitoring the consistent application of criteria for research independence and significant responsibility for research, and supporting inclusive approaches to staff engagement, output selection and submission.

In alignment with the Strategy, People, and Research Environment (SPRE) assessment element, the Professor leading on research EDI safeguards the embedding of EDI principles across REF governance, research culture, and decision-making. These provide expert advice and constructive challenges to mitigate bias, promote inclusive research practices, and support continuous enhancement of the research environment. This approach also contributes to institutional assurance by supporting accountability, transparency, and staff confidence in REF processes, ensuring that equality considerations are integral to the delivery of a positive, inclusive, and sustainable research culture.

Part 2: Identifying Staff Contracts with Significant Responsibility for Research (SRR)

The University intends to include the research of all Category A eligible staff. There will therefore be no requirement for creation of criteria for, or identification of, staff with significant responsibility for research.

For completeness, the University confirms that the processes involved in the creation of the University and the appointment of staff to relevant contracts of employment in the University, which thus made them Category A eligible staff for the purposes of the REF, included expectations of responsibility for research. Having received award of university status in September 2018, the relevant processes of consultation and appointment took place between October 2018 and February 2019.

The University confirms that all 'teaching and research' (ACEMPFUN 3) contracts in the HESA staff record comprehensively identify all staff with significant responsibility for research.

Part 3: Determining Research Independence

In line with the REF Guidance, the University considers an independent researcher to be a "staff member who undertakes self-directed research, rather than carrying out another individual's research programme". The test of research independence only applies to staff on Research-only contracts; staff on Teaching and Research contracts are deemed by the REF to be independent researchers, subject to the other tests of eligibility. Indicators of independence are:

- Leading or acting as principal investigator or equivalent on an externally funded research project,
- Holding an independently won, competitively-awarded fellowship where research independence is a requirement,
- Leading a research group or a substantial or specialized work package,
- Being named as a Co-Investigator on an externally funded research grant/ award, or,
- Having significant input into the design, conduct and interpretation of the research.

The University notes that each indicator may not individually demonstrate independence and that appropriate multiple factors may need to be considered.

For the avoidance of doubt, the following characteristics indicate that a researcher is not independent under the rules of the REF:

- A researcher employed on a project, howsoever funded, whose work is being directed by another person, and,
- A postgraduate research student.

In addition, a member of staff is not deemed to have undertaken independent research purely on the basis that they are named on one or more research outputs.

The University currently employs a small number of part-time research assistants (all being part of a scheme that employs current Hartpury part-time taught Master's students) and a Postdoctoral Researcher who undertakes a range of research-related tasks under the direction of one or more academic members of staff. As such, they are not independent researchers as defined by the REF and hence they are not eligible to be included in the REF submission. These are the only Hartpury staff who have been currently returned to the Higher Education Statistics Agency (HESA) as 'Research only'. As and when other staff are appointed on a research-only contract, their eligibility will be tested against these criteria by the PVC ERKE and the REF Steering Group, and the individual will be informed of the outcome by the PVC ERKE.

The criteria for determining research independence are directly derived from the REF Guidance and have been communicated to and discussed with relevant members of staff as part of the consultation process for this Code.

Staff, Committees and Training

The staff and committees involved in these processes are the PVC ERKE, the REF Steering Group, the Research and Knowledge Exchange Committee and the Academic Board, as defined in Part 1.

Appeals

Relevant staff who have been considered for research independence will receive notice of the decision, normally from the PVC ERKE, or from an alternative appropriate person agreed by the PVC

ERKE. This will include a written statement, agreed by the REF Steering Group, explaining the reasons for the decision.

Staff who have been deemed not to be independent researchers may appeal. Appeals should be submitted to the Deputy Vice Chancellor within 10 working days of receiving the written statement explaining the reasons for the decision.

Appeals will be considered by an Appeals Panel consisting of the Deputy Vice Chancellor and the Chief People Officer. If a conflict of interest is identified with regard to the Deputy Vice Chancellor, the Vice-Chancellor will appoint an alternative chair for the Panel. The grounds for appeal must be clearly and succinctly stated in writing by the appellant and based upon the written statement explaining the reasons for the decision or on grounds of incorrect procedure.

The Appeals Panel will consider the written statement presented to the appellant explaining the reasons for the decision, the procedures undertaken, and written evidence supplied by the appellant. No interviews or hearing will take place as part of the REF appeals process.

The Appeals Panel will notify the appellant in writing of the outcome of their appeal within 20 working days of the same being received by the Deputy Vice-Chancellor. The outcome of the appeal will be reported to the REF Steering Group.

The appeal process will be confidential. The decision of the Appeals Panel will be final.

Equality Impact Assessment

Please see Part 1.

Part 4: Allocating Contracts to Units of Assessment

Assignment of REF-eligible Staff to Units of Assessment

REF-eligible staff have been assigned to Units of Assessment (UoAs) through a transparent and evidence-based process that takes account of subject fit, research responsibilities, and relevant HESA data, in line with REF guidance. Decisions have been informed by an individual's primary research discipline, research independence and significant responsibility for research, and the alignment of their research activity within the scope of the relevant UoA. We are utilising staff self-selection of UoA against their outputs to ensure the most accurate representative data are returned to HESA, noting that through REF 2029 decoupling, staff outputs may be entered into both or other UoA. Oversight and accountability for assignment decisions sit with the PVC ERKE advised by the REF Steering Group and Human Resources to ensure consistency and appropriate challenge across the institution. EDI guidance has been applied throughout the process to support fair and equitable decision-making, mitigate potential bias, and ensure that no individual or group is disadvantaged in the assignment of staff to specific UoAs.

Equality Impact Assessment

Equality Impact Assessment will support decisions on unit allocation, to monitor and mitigate potential differential impacts across protected and underrepresented groups. This approach ensures consistency and transparency across staff assignment processes, while embedding Equality, Diversity and Inclusion principles within REF decision-making. Refer back to Part 1.

Part 5: Selecting Outputs

Identifying a Substantive Link to Outputs

Each output being considered for selection will be checked to ensure that there is a substantive link to the University, in particular that it was first made publicly available during the output eligibility period (1 January 2021 and 31 December 2028) and that there is an eligible employment relationship with an author (or equivalent) who has made a significant research contribution to the output. This will be undertaken by the Research Office in conjunction with the Library and Human Resources, and the process will also take account of the allowable exceptions defined in the REF Guidelines. Cases of exception or dubiety will be brought to the REF Steering Group for confirmation or decision, respectively.

Outputs of Former Staff

Outputs of former staff will be considered against the same criteria as for current staff. Such outputs will be considered for selection under all leaving circumstances except where the former member of staff was made compulsorily redundant. To be clear, eligible leaving circumstances will include retirement, resignation to take up alternative employment, expiration of a fixed term contract, and voluntary redundancy or severance.

Assigning Outputs to UoA(s)

Outputs will be initially assigned to the most relevant UoA(s) by individual authors or via discussion across all authors for multi-author outputs and confirmed by the Research Office as part of the process of identifying the substantive link. The assignment will be verified by the relevant REF Unit Lead. The REF Steering Group will consider the assignment of outputs as part of their consideration of the diversity of the selection of outputs.

Diversity of Outputs

All relevant outputs, including those of former staff, are or will be in the University's research repository, which will thus provide the means to ensure all are duly considered. The University requires its staff and researchers record all forms of research output, regardless of type, in the repository.

Assessment of quality

The rating of the outputs (using the REF scale) will be undertaken by a combination of the individual (where that is a current member of staff) and the Output Panel (comprising the PVC ERKE, Director of RKE, REF Unit Leads, and an external expert for each unit) against the criteria of originality, significance and rigor. Where the author is a former member of staff, another relevant individual, e.g. Head of School, may be involved.

If it is necessary to choose between outputs considered to be of equal quality in order to reach the required number, account will be taken of equality and diversity, the maximum number of outputs per staff member, and the distribution of outputs across the subject areas of the submission. Hartpury will stay within the recommended maxima to ensure that a representative body of work is submitted.

Representative selection

Outputs will be selected based on their quality rating. An initial analysis will be presented to the REF Steering Group, showing the distribution of output quality against the subject areas in each UoA compared to the FTE volume measure for each area. The PVC ERKE with the support of the REF

Steering Group will make an initial selection of outputs, based on the quality profile, and with a maximum 25% variation of output volume to FTE volume for any given area. The permitted variation reflects the relatively small size of the University's submissions. This process will be repeated as new outputs become available.

As part of this process, the REF Steering Group will monitor and take into account the range of forms of research output to ensure that they are appropriately considered. They will also be mindful of the range of collaborations and partnerships that support the research being submitted.

Where research outputs may align with more than one UoA, decisions on assessment and submission will be based primarily on subject fit and the intellectual focus of the output, in accordance with REF guidance. Interdisciplinary research will be recognised and supported, with outputs considered by the UoA or combination of expertise best placed to assess their quality and contribution, ensuring that interdisciplinary approaches are not disadvantaged.

Research Assessment Practice

The University is committed to responsible research practice; whilst we have not formally signed up to any of the available declarations, our policies and practices align with many of their principles, and our culture is one of embracing equality and diversity. Individuals involved in output quality assessment will be supported through structured training that addresses REF 2029 requirements, use of assessment criteria, and calibration exercises, alongside EDI and bias awareness. This training underpins consistent judgements, supports confidence in decision-making, and contributes to a fair and inclusive research assessment process. The Professor leading research EDI will provide independent oversight to ensure that we support fair, responsible, and transparent research assessment practices, in line with Hartpury's Code of Research Practice and REF guidance.

Outputs in British Sign Language

Hartpury University recognises that research outputs may be produced in British Sign Language (BSL). Outputs presented in BSL will not be treated less favourably than outputs presented in written or spoken English, or in any other format, during output selection decisions. Where a BSL output is eligible for submission to REF, it will be considered against the same REF criteria and standards of quality as all other outputs. Assessment and selection decisions will focus on the originality, significance and rigour of the research, rather than the language or format of dissemination.

Where necessary, appropriate arrangements will be made to ensure that colleagues involved in output review and selection can evaluate BSL outputs fairly and consistently. The institution will take reasonable steps to provide suitable expertise and/or supporting materials to enable informed assessment and to ensure that researchers submitting outputs in BSL are not disadvantaged during the selection process.

The use of BSL as a means of research dissemination will not be a factor that adversely influences decisions regarding output eligibility, quality assessment or selection for submission. This approach is consistent with Hartpury University's commitment to equality, diversity and inclusion and its objective of ensuring that all eligible staff and outputs are considered through fair, transparent and inclusive processes

Equality Impact Assessment

Please see part 1

Part 6: Appendices

Appendix 1: Equality Impact Assessment

Appendix 2: Referenced Material in the CoP

- **Appendix 2.1: Research Code of Practice**
- **Appendix 2.2: Research Standard Operating Policy**
- **Appendix 2.3: EDI Policy**
- **Appendix 2.4: Terms of Reference for the Research and Knowledge Exchange Committee**
- **Appendix 2.5: Terms of Reference for the REF Steering Group**
- **Appendix 2.6: Terms of Reference for Academic Board**
- **Appendix 2.7: Terms of Reference for the Quality, Enhancement and Standards Committee**
- **Appendix 2.8: Instruments and Articles of Government**
- **Appendix 2.9: Form for the Declaration of Individual Circumstances**

Appendix 1: Equality Impact Assessment

HARTPURY UNIVERSITY REF 2029 – EQUALITY IMPACT ASSESSMENT MARCH 2026

Since REF 2021, under the University's Code of Practice, Hartpury University has committed to producing an equality profile in relation to ethnicity, disability, gender, age and employment status, for all academic staff who were eligible for inclusion in the REF on the census date together with the same analysis for those not eligible. The equality profile was presented to both the Equality Diversity and Inclusivity (EDI) Forum and the Research Knowledge Exchange Committee (RKEC), and thereafter to the Senior Management Team (SMT) together with recommendations arising from the review of information by prior committees. This assessment sets out a summary of the relevant information that have been considered in relation to the University's decision-making on its REF 2029 submission.

As a starting point, the University reviewed its previous Equality Impact Assessment (EIA) and produced a new action plan with specific tasks to be undertaken in order to ensure the promotion of equality, fostering good relations and the elimination of possible discrimination in relation to decision-making on the University's REF 2029 submission.

Hartpury has retained several actions from REF 2021 as good practice. To support our emerging research culture, we considered it important to continuously monitor our staff with significant responsibility for research (SRR) profile. This has included the reporting of SRR staff characteristics as a separate category in the annual Hartpury EDI self-assessment report which is reported to relevant committees. Monitoring any noticeable imbalances or anomalies in the above equality categories within both SRR and the wider HE staff began in May 2019 and is continually monitored. Comparative data are presented within this EIA for the period 2022-23 to 2024-25 (Table 1).

Table 1. Year-on-year comparison of the proportion of staff in both role categories with protected characteristics. SSR: staff with significant responsibility for research.

	2022-23		2023-24		2024-25	
	SSR	Teaching only	SSR	Teaching only	SSR	Teaching only
Disclosed disability	19%	15%	23%	16%	17%	13%
Global majority	0	2%	0	2%	0	2%
Heterosexual	88%	80%	73%	86%	75%	84%
No religion	63%	53%	55%	55%	57%	55%
≥45yro	53%	30%	41%	32%	46%	37%
Female	58%	67%	59%	66%	64%	67%

The data presented suggest that REF preparations to date and the REF code have resulted in equal opportunities across the characteristics of SRR staff. Despite moves to completely decouple staff from REF 2029, we have maintained the self-declaration processes as general good practice to support fair treatment of staff in assessment (including the evaluation of research targets in annual appraisal and other research evaluation exercises) and to identify whether there is a need for specific types of support or adjustment; if these become apparent appropriate training will be provided. We will continue to utilise this through this REF cycle and beyond

A summary of the equality profile of staff eligible to REF 2029 is set out below:

- The pool of staff that are currently eligible for REF has more than trebled since our last submission (n=29; 25.8 FTE) however this number still makes statistical comparisons limited.
- The proportion of male staff eligible was slightly higher in REF2021, and since 2023 the majority of SSR staff have been female, which is representative of the profile of the 'Teaching, Learning and Scholarship strand' (T&L) staff population.
- The difference in the proportion of staff sharing information about disability is consistently higher by 4% or more for SSR staff.
- The proportion of part-time staff eligible for REF (34%, n=10) is slightly higher than seen in the wider University academic staff (31%, n=40).
- The proportion of SSR staff over 45 years old has decreased.
- Hartpury University has a low proportion of BME academic staff, which is reflected in SSR staff profiles, but it is something we will continue to monitor.
- Hartpury University employs very few academic staff on fixed term contracts; none of the SSR eligible for REF are on fixed term contracts.

New Policies / Proposals

Equality Analysis - Staff

1. Give the name of the policy/proposals being analysed and a brief description of its/their aim or purpose.

Impact of REF2029 Code of Practice on submission to Research Excellence Framework

2. Give the person or group with authority to make changes to the policy/proposals

Senior Management Team (SMT)

3. Who is affected by or associated with the policy/proposals, and in what ways?

Staff with SRR

4. What are the equality **risks** (possible negative impacts) and **opportunities** (to promote equality/foster good relations) associated with this policy/proposals?

	Risks	**Opportunities**
Age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex and sexual orientation.	Impact of protected characteristics on potential opportunities to engage in research work and eligibility for SRR across all HE staff, post-doctoral researchers and PGR students, and support services. Selection of work conducted by SSR staff might be impacted, if variations in their research productivity is a consequence of their protected characteristics, potentially impacting the distribution of selected SSR staff work.	Opportunity to raise awareness of and promote equality issues during the REF process, through training/ self-disclosure to all HE Academic staff, post-doctoral researchers and PGR students, and support services.

5. How will the risks and opportunities that have been identified impact on the **development/ implementation** of this policy/ proposals?

1. REF2029 Code of Practice to be drawn up and implemented.
2. Fair, transparent and consistent selection of outputs and case studies for REF2029 to be applied, in accord with the REF2029 Code of Practice and University Equality, Diversity and Inclusivity Policy.
3. Staff involved in making recommendations and/or decisions for REF2029 will need to be appropriately trained to ensure they are equality aware.
4. Despite REF2029 decoupling research performance from individual staff, the good practice we have in place to help people disclose changes to individual circumstances will be retrained. All HE staff will receive appropriate training, and active engagement will be maintained with SSR staff to support those with different circumstances, to support their personal, and the overall, research performance of Hartpury. All staff to declare personal circumstances for appraisal and other research evaluation exercises, were relevant.

6. What **evidence** will be required to establish the **actual impact** of this policy / proposals?

1. Statistics of all HE Academic staff will continue to be monitored and compared with SSR staff and those SSR staff whose work is submitted to REF, including protected characteristics and contract status by full time equivalent and headcount, as noted in Table 1. 2. Statistics of staff (SRR compared to all HE staff) from the appeals process (applications and outcomes) will be monitored by the protected characteristics and contract status by full time equivalent and headcount appearing in Table 1.

7. How will members of equality target groups be able to be involved in this equality analysis?

The CoP and EIA have been and will continue to be communicated directly to those involved e.g., all HE staff including those with SRR, post-doctoral researchers, PGR students and research support staff. As well as communication with individuals, through the PVC ERKE, the Chief People Officer, and Head of Inclusivity, the University has and will continue to consult and communicate as appropriate with all academic teams across the University via the Staff Forum (as Hartpury does not have a union, the Staff Forum is the representative staff body), Research and Knowledge Exchange Committee (RKEC), EDI Committee and Academic Board (AB).

8. This equality analysis was carried out by:

Head of Inclusivity and Professor assigned as REF EDI Lead

9. This equality analysis was approved by:

PVC Research and Knowledge Exchange

Date: March 2026

Action Plan

Action Plan developed from the EIA	Responsibility	Status
1. Finalise REF Code of Practice and submit to Research England, to include a confidential disclosure procedure for individual or special circumstances.	PVC ERKE	Approved by RKEC, AB and Corporation. Submitted to Research England.
2. Continue supporting the self-disclosure of protected characteristics in SSR staff and monitoring this proportion within the larger HE Academic staff body.	Head of Inclusivity, REF EDI Lead, PVC ERKE	Documents completed and timetable to be completed.
3. Continue to provide equality training to Deputy Vice-Chancellor, the Chief People Officer, and members of the REF Steering Group. Provide EDI briefing to members of Research and Knowledge Exchange Committee and Academic Board.	Head of Inclusivity	Head of Inclusivity, PVC ERKE and Director of RKE have completed Advance HE training and will provide training to these groups.
4. Carry out internal equality training session for all SSR staff.	Head of Inclusivity, REF EDI Lead	Head of Inclusivity, PVC ERKE and Director of RKE have completed Advance HE training and will provide training to all eligible staff.
5. Maintain and update a list of SSR staff denoting contract status, propose unit of assessment, which is most appropriate for work conducted and planned, and early career status.	Human Resources Advisor/ RKE Administrator	Initial list completed and will be reviewed at regular intervals.
6. Maintain a confidential list of SSR staff on sick leave, maternity leave etc. for communication purposes.	Human Resources Advisor/ RKE Administrator	Initial list completed (currently no staff) Will be reviewed at regular intervals.

7. Ensure new SSR staff are aware of the self-disclosure process, and other SSR are reminded that they can make a confidential disclosure for consideration by the PCV ERKE and Chief People Officer, with support from Human Resources, in relation to individual or special circumstances.	PCV ERKE	Ongoing.
8. Prepare and review equality profile of all authors of selected work and/or outputs from within the SSR staff body for comparison with SSR staff cohort and wider to all HE academic staff.	Head of Inclusivity	Ongoing.
9. Revise action plan throughout process.	PVC ERKE, Head of Inclusivity	Ongoing.

Appendix 2: Referenced Material in the CoP

Appendix 2.1: Research Code of Practice

HARTPURY

Code of Research Practice

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SCOPE

The mission of Hartpury is to be a specialist niche provider delivering relevant, effective and high-quality education, training for employment and applied research in sport, equine, animal and agricultural industries; locally, regionally, nationally and internationally.

Hartpury University is committed to undertaking high quality research, undertaken in an environment of high standards of research integrity, governance and good practice. We seek to operate an open research environment, enabling access to, and sharing and replication of our research.

Whilst seeking excellence and applicability in what we do, we are also conscious of the need to enable and encourage good practice in research, as embodied in this Code of Research Practice. We seek to ensure that our research vision, strategy, operational plans, resource deployment and performance monitoring all take account of our commitment to research integrity and do not introduce inappropriate or perverse incentives.

The University uses the Frascati definition of research (OECD, 2015), as employed across the sector and internationally:

Research and experimental development (R&D) comprise creative and systematic work undertaken in order to increase the stock of knowledge – including knowledge of humankind, culture and society – and to devise new applications of available knowledge.

To qualify as R&D, an activity must be all of the following: novel; creative; uncertain; systematic; transferable and/or reproducible. The term R&D covers the following three activities:

Basic research: experimental or theoretical work undertaken primarily to acquire new knowledge of the underlying foundation of phenomena and observable facts, without any particular application or use in view.

Applied research: original investigation undertaken in order to acquire new knowledge. It is, however, directed primarily towards a specific practical aim or objective.

Experimental development: systematic work, drawing on knowledge gained from research and practical experience and producing additional knowledge, which is directed to producing new products or processes, or to improving existing products or processes.

The Frascati Manual lists situations where certain activities are to be excluded from R&D except when carried out solely or primarily for the purposes of an R&D project. These include:

i) routine testing and analysis of materials, components, products, processes, etc.;

ii) feasibility studies; iii) routine software development;

iv) general purpose data collection.

The Research Excellence Framework (REF) was and remains based on the Frascati definition, where research is defined as:

A process of investigation leading to new insights, effectively shared.

It includes work of direct relevance to the needs of commerce, industry, culture, society, and to the public and voluntary sectors; scholarship (defined as the creation, development and

maintenance of the intellectual infrastructure of subjects and disciplines, in forms such as dictionaries, scholarly editions, catalogues and contributions to major research databases); the invention and generation of ideas, images, performances, artefacts including design, where these lead to new or substantially improved insights; and the use of existing knowledge in experimental development to produce new or substantially improved materials, devices, products and processes, including design and construction. It excludes routine testing and routine analysis of materials, components and processes such as for the maintenance of national standards, as distinct from the development of new analytical techniques. It also excludes the development of teaching materials that do not embody original research.

It includes research that is published, disseminated or made publicly available in the form of assessable research outputs, and confidential reports (as defined in paragraph 261).

Activities that do not meet the Frascati definition, but which involve the collection of human or animal data, or which require ethical or similar approval are also subject to the requirements of this Code. All other activities are also subject to any relevant legal, regulatory and professional or subject good practice requirements.

The University seeks to meet the requirements of the Concordat to Support Research Integrity (Universities UK, 2019) and draws on other relevant Concordats, guidance and professional standards, as appropriate (see Section F for details of policies, legislation, standards and other relevant references and materials). This Code of Research Practice sets out the standards for conduct expected of all staff, students and others associated with the University (i.e. including visiting researchers, emeritus staff, associates, honorary or clinical contract holders, contractors and consultants) who are engaged in or who support our research ('researchers') in and/or for the University.

Researchers should always:

i) Demonstrate integrity, professionalism, honesty, rigour, transparency and open communication.

ii) Observe fairness and equity.

iii) Avoid, or declare and manage, actual or potential conflicts of interest.

iv) Show care and respect for all participants in, subjects, users and beneficiaries of research including humans, animals, the environment and cultural objects (those associated with or involved in the research).

v) Observe all legal, regulatory and ethical requirements laid down by the University or other statutory bodies.

Research methods, results, outputs and data should, subject to appropriate confidentiality in relation to personal or commercially protected information, be open to scrutiny, debate, sharing, further analysis and re-use. It is the expectation that those data arising from research will be managed well and archived to allow prompt sharing.

Researchers should ensure that they understand and comply with this Code, including the declaration of interests (see Section D.12). Researchers should also ensure that they are aware of and abide by other relevant Hartpury or University policies, such as those relating to equality, diversity and inclusivity, harassment, health and safety and ethics. Any breach of this Code or of related policies as applied to research will be investigated on a case-by-

case basis under the University's Procedure for the Investigation of Allegations of Misconduct in Research (see Sections C and E).

The University will:

i) Maintain a research environment that develops good research practice and embeds a culture of research integrity, enabling researchers to act according to the expected standards, values and behaviours.

ii) Provide training on research ethics and research integrity with suitable learning, training and mentoring opportunities to support the development of researchers' skills throughout their careers.

iii) Seek to ensure sustainability of its research, be that economic, environmental, academic, human, animal, physical or digital, in line with its commitment to the climate commission[1].

iv) Publish an annual statement on research integrity.

v) Periodically review research practice and culture to ensure that practice remains fit for purpose.

RESPONSIBILITIES ORGANISATIONAL BODIES

Corporation, as the governing body of the University, monitors institutional effectiveness including the application of the Code and its principles, primarily through the Annual Research Integrity Statement. It also receives updates and advice from the Hartpury Executive Team, as appropriate.

The Academic Board is responsible for the academic direction of the University and for the conduct of academic activities. It promotes good practice and innovation in scholarship, research, and learning, teaching and assessment.

The Research and Knowledge Exchange Committee develops and invigorates research and knowledge exchange activities at the University, encouraging cultures and activities that are consistent with the University's mission. It acts to promote and exchange good practice in relation to the development of researchers.

The Research and Knowledge Exchange Committee is responsible for policy on and oversight of all areas of research governance and integrity, including good practice, risk management, human and animal ethics, and handling of misconduct. It receives reports from the Hartpury Ethics Committee and provides reports, including the Annual Research Integrity Statement, to Academic Board and thence to Corporation.

INDVIDUALS

The Pro Vice Chancellor, Education, Research and Knowledge Exchange is the University's officer with lead responsibility for research and knowledge exchange and its conduct. The Pro Vice Chancellor, Education, Research and Knowledge Exchange chairs the Research and Knowledge Exchange Committee and seeks to promote and foster a culture of professional integrity in research practice.

All research projects, including internally funded projects, must have a designated individual identified as having responsibility to the University for the project. This will typically be the

[1] THE 17 GOALS | Sustainable Development

member of staff who is the Principal Investigator of the project or the lead supervisor of a student undertaking research.

The University has a confidential process for individual researchers to declare personal circumstances that may affect or have affected their ability to undertake research. Details of this process can be found in the Staff Handbook as part of the Appraisal Process. Line managers and supervisors should treat these declarations accordingly, and take them into account when overseeing, advising and supporting the researcher.

All researchers have a personal responsibility to undertake research to the highest standards of integrity, governance and ethical practice, in compliance with this Code. All researchers should seek to work in an open and professional manner. Students registered for a Research Degree are subject to the Regulations of the University of the West of England, with whom they are registered for their degree as well as all relevant Hartpury regulations. Students must therefore be aware of and abide by those Regulations.

Heads of School (and other line managers, as relevant) have a responsibility to ensure that staff and student researchers in their departments pursue the highest standards of research integrity, governance and ethics in compliance with the Code whilst seeking to foster a culture of openness and professional integrity in research practice. Departments will draw attention to the Code in their induction processes for newly appointed staff and for students at an appropriate point in their studies. Heads of School should actively ensure that researchers receive adequate management, guidance, and training to ensure compliance with the Code. Dedicated mentoring should be offered on any particular area where the researcher requires support.

Senior research staff have some responsibilities in common with Heads of School, in creating and maintaining an environment that encourages and supports high standards of research integrity. They should ensure that staff and student researchers act in compliance with the Code, and provide advice, guidance and training as appropriate.

Principal Investigators and others with a designated research leadership or management role, have a responsibility to ensure that the highest standards of research integrity, governance and ethical practice are met, that research activities are undertaken in compliance with the Code by staff and students under their supervision, and to seek to foster a culture of openness and professional integrity in research practice. Principal Investigators are responsible for creating and maintaining a safe, open and collaborative working environment, which should include being clear about processes in place that allow people to raise issues of concern, notably in relation to bullying and harassment or research misconduct. Principal Investigators should actively ensure that Early Career Researchers (Academic Staff Development Guidance) receive adequate management, guidance, and training to ensure compliance with the Code. Dedicated mentoring should be offered on any particular area where the researcher requires support.

Supervisors of students engaged in research have a responsibility to ensure that students under their supervision meet the highest standards of research integrity, governance and ethical practice in compliance with the Code, and seek to foster a culture of openness and professional integrity. Supervisors of students have a special responsibility for ensuring that they provide guidance on the ethical principles that underpin research and that they provide appropriate support to their supervisees in submitting ethical review applications of a standard necessary to commence research. Supervisors shall ensure that their students receive on-going support (including training) to conduct research in compliance with the

Code and will direct students to any additional training or support that may be required. Supervisors of PhD students need to meet the criteria and training requirements of the Regulations of Hartpury University and the University of the West of England, and to be aware of and abide by those Regulations.

The Concordat to Support the Career Development of Researchers emphasises that researchers should take a proactive role in their own personal development. Researchers must ensure that they undertake appropriate training to enable them to meet these requirements. As well as taking advantage of the range of training and development opportunities provided across the University, research students are required to attend workshops in core skills, including research integrity and ethics.

OPERATION OF THE CODE OF RESEARCH PRACTICE

It is a condition of conducting research under the auspices of the University that practice conforms to this Code. Failure by a researcher to comply with the provisions of the Code will be grounds for action to be taken under the University's Procedure for the Investigation of Allegations of Misconduct in Research ('the Procedure'). Alleged misconduct in research relating to doctoral level research or to a thesis that has been submitted for examination will normally also be investigated under the Procedure.

Unless considered significant, allegations of breaches of the Code in taught postgraduate and undergraduate programmes will normally be considered under the University's Academic Regulations.

This Code must be implemented alongside all other relevant policies and standards published by the University, as revised from time to time.

Where a researcher is in doubt about the applicability of the provisions of the Code, or about the appropriate course of action to be adopted in relation to it, advice should be sought from the Pro Vice Chancellor Education, Research and Knowledge Exchange or Director of Research and Knowledge Exchange. Students should, in the first instance, seek advice from their designated academic supervisor.

DETAILS OF THE CODE OF RESEARCH PRACTICE PRINCIPLES OF RESEARCH INTEGRITY

The core elements of research integrity are reflected in the expectations laid out at the bottom of page 2, and apply to all aspects of research throughout its lifecycle, including:

i) Fundamentals of research work such as: upholding rigour aligned to accepted disciplinary norms and standards; maintaining professional standards; documenting methods and outcomes; questioning one's own findings; attributing and acknowledging honestly the contribution of others.
ii) Leadership and co-operation in research groups.
iii) Undertaking research with the highest standards of ethical practice and research integrity.
iv) Taking special account of the needs of early career researchers.
v) Sourcing, using, managing, storing and archiving data for research effectively and in compliance with relevant standards and policies.

vi) Sharing research outputs and data effectively and in line with the University's policies on Open Access.

vii) Undertaking research in line with University policies, legal and regulatory requirements, and the relevant professional codes of practice.

Researchers must be able to exercise freedom in their academic choices and must therefore also accept responsibility for the decisions that they make. Thus, the primary responsibility for ensuring that they act in accordance with these principles in all aspects of their research work, including peer review, lies with the individual.

It is important that a culture of honesty and integrity in research is fostered and maintained in the University. At the heart of all research, regardless of discipline, is the need for researchers to be honest in respect of their own actions and in their responses to the actions of other researchers. This applies to the whole range of research work, including methodological and experimental design, conduct, generating and analysing data, publishing results, acknowledging appropriately the direct and indirect contributions of colleagues, collaborators and others, and the translation and use of the results.

LEGAL, REGULATORY AND ETHICAL FRAMEWORKS

All research undertaken in, under the auspices of or for the University must abide by the relevant legal, regulatory, ethical and professional frameworks. Any special standards of work performance and ethical conduct imposed by law or by the University in relation to particular categories of research are deemed to be included in this Code.

Researchers must take responsibility for ensuring their on-going awareness of and compliance with relevant legislation (national and international where relevant) together with the ethical frameworks and standards of research set by the funders, scientific and professional bodies, and other relevant stakeholders.

In addition to receiving approvals to commence research through internal processes, researchers are required to follow any local regulations, Codes of Practice and Standard Operating Procedures pertaining to their work.

RESEARCH WITH HUMAN PARTICIPANTS

In accordance with the University Ethical Review process, approval from an appropriate research ethics committee or delegated officer (e.g. for taught student programmes) must be sought for all research that involves human participants, their tissue or data before the start of work.

In research where human beings are the subject of physical tests or physical intervention, the Principal Investigator must submit protocols on ethical, health and safety procedures for approval by the relevant Research Ethics Committee. Research meeting specific criteria may also be subject to the approval of an appropriate national body, e.g. the Health Research Authority, after securing University Sponsorship.

Research using healthy volunteers as participants that requires medically-qualified supervision to ensure the safety of participants will be subject to the review and scrutiny prescribed in the University's Research Governance Standard Operating Procedures.

The University expects that research with children, young people and vulnerable (or potentially vulnerable) adults will be planned and executed recognising requirements for awareness of safeguarding mechanisms supported by appropriate training wherever required.

RESEARCH WITH ANIMALS

All research involving animals should have approval through the University Ethical Review process, regardless of its status in relation to the Animals (Scientific Procedures) Act 1986 or the location of the research activity. Research undertaken by collaborative partners or on a contractual basis for the University is not exempt from these requirements.

Researchers should consider at an early stage in the design of any research involving animals the opportunities for reduction, replacement and refinement of any animal involvement.

The University expects that research involving animals, including by observation of normal activity, will be planned and executed recognising requirements for awareness of animal welfare and consideration of the animal's owner or keeper. Where the owner or keeper is a child, a young person or a vulnerable (or potentially vulnerable) adult appropriate safeguarding arrangements should be put in place.

RESEARCH USING GENETIC RESOURCES AND TRADITIONAL KNOWLEDGE

Any work that involves genetic resources or the use of traditional knowledge must comply with the Nagoya Protocol, a supplement to the Convention on Biological Diversity, which promotes the fair and equitable sharing of the benefits of research that uses genetic resources. The Protocol includes obligations related to access, benefit-sharing and compliance. Adherence to the Protocol must be flagged and addressed in the ethical approval process.

GOOD CLINICAL PRACTICE

Research Integrity in veterinary clinical research involves compliance with Good Clinical Practice (GCP) (EMA, 2000).

Good Clinical Practice is intended to be an international ethical and scientific quality standard for designing, conducting, monitoring, recording, auditing, analysing and reporting clinical studies evaluating veterinary medicinal products.

Guidance has been developed under the principles of the International Cooperation on Harmonization of Technical Requirements for Registration of Veterinary Medicinal Products (VICH) and provides a unified standard for the European Union (EU), Japan and the United States of America to facilitate the mutual acceptance of clinical data by regulatory authorities – VICH-GL9 (GCP).[2]

All clinical studies evaluating veterinary medicinal products must be conducted to VICHGCP standards.

LEADERSHIP OF RESEARCH

Principal Investigators and group leaders must ensure that the appropriate direction of research and the supervision of researchers (including training) is provided.

The creation of an environment where everyone is treated fairly and with respect is essential to facilitating good research. Within a research group (where one exists) and Communities of Practice, responsibility for creating such a climate lies with the group leader or convener.

[2] https://vichsec.org/

Group leaders are responsible for creating and maintaining a safe, open and collaborative working environment which should include being clear about processes in place that permit raising issues of concern, notably in relation to bullying and harassment, and research misconduct.

LEADERSHIP OF EARLY CAREER RESEARCHERS

Heads of Schools, Heads of Department, senior research staff, Principal Investigators, and any individual with line management or supervision responsibilities for researchers, should actively ensure that Early Career Researchers receive adequate management, guidance, and training to ensure compliance with the Code. Dedicated mentoring should be offered on any particular area where the researcher requires support. Early Career Researchers should be signposted to relevant training and development opportunities.

DATA MANAGEMENT

Research data are all data arising as a result of a research project. This includes raw data, analysed data, and also data that arise during the course of research that are later translated into another form or destroyed, such as audio and video recordings. Data can take many forms, including paper and electronic records, recordings or products arising from the research.

Research data management refers to all aspects of data management concerned with research, from developing a data management plan at the inception, through the life of the project, to archiving of and making available, where appropriate, research data.

Inadequate attention to research data management can result in serious research misconduct, including breaches of confidentiality, or errors in reported data. For this reason, the University regards research data management as an important aspect of good research practice, and requires a data management plan to be created for all research and for the plan to be submitted alongside the application for ethical approval and for institutional approval. Such plans should include arrangements for long-term storage, curation and access in a place accessible by the University, independent of the future location of the researcher.

The University processes personal data for research purposes in relation to its public tasks and its legitimate interests. These legal bases for processing are regularly reviewed and balanced against individual rights and freedoms. Informed consent is relied on as a legal basis for processing data from participants of research. The form of consent that is needed from them will depend on the type of personal data gathered and the context in which the data collection and use is taking place.

Responsibility for research data management within any research project, programme or activity lies primarily with the relevant Principal Investigator. If a Principal Investigator is not formally identified, the responsibility applies to the most senior researcher involved with the work.

Researchers should ensure that the following principles and standards are fully integrated into their normal practice as researchers, and applied to research undertaken, irrespective of whether it is externally funded or not.

i) Research data must be managed to appropriate standards throughout the research lifecycle. Researchers should not misrepresent or make inappropriate use of their data, or encourage others to do so.

ii) Research data should be made available to other researchers and to the public in an appropriate and accessible form and in a timely way wherever such publication is practical, legal, ethical, and commercially viable. Research data may be deposited in an appropriate national or international data service or domain repository, and / or the University repository. Metadata relating to the data set should always be deposited in the University repository.

iii) The University expects researchers to ensure that data of long-term value (for example, data that underpin a publication or thesis, or that will form the basis of a future funding application) will be securely held in a place accessible by the University for a period of ten years after the completion of a research project, or for longer if specified by the research funder or sponsor. This applies whether or not the researcher leaves the University.

iv) Ownership or exclusive rights to reuse or publish research data should not be granted to commercial publishers, agents or others without retaining the rights to make the data openly available for re-use, unless this is a condition of funding.

v) All substantive research proposals that include the collection and/or analysis of data must include research data management plans explicitly addressing data capture, management, integrity, confidentiality, storage, retention, and transportation, sharing and publication. The plans should be in line with relevant standards and good practice within the disciplinary community and proportionate to the type of data intended to be collected.

vi) Secure and appropriate safeguards relating to digital and physical storage should be used for all data, and data should be accessed only in appropriate locations where it is not vulnerable to loss or illegitimate access. Researchers working offsite should undertake risk assessments and plan accordingly. Data relating to human participants which are identifiable, pseudonymised/coded or traceable and commercially sensitive data must be encrypted to an appropriate standard. Researchers are responsible for reporting actual or suspected data breaches of data security to the University's Data Protection Officer at the earliest possible opportunity who will then assess whether the Information Commissioner's Office will need to be notified.

vii) For data collection involving human participants or animals, explicit participant or owner / keeper consent respectively must always be secured at the outset, and the data must only be used in accordance within the letter and spirit of that consent unless there is the explicit approval of an ethics committee to do otherwise.

viii) Non-anonymised personal data must be held, and ultimately destroyed, in compliance with data protection legislation and the University's data protection policies. Accordingly, the extent of non-anonymised personal data stored must be adequate, relevant, and not excessive.

ix) Research data should be available for access by other researchers and to the public in appropriate forms, except where confidentiality provisions prevail, in accordance with the University's Policy on Open Access and Open Data. In general, academic enquiry and debate require openness, but confidentiality provisions relating to publication may apply in circumstances where the University or the researcher has made or given confidentiality undertakings to third parties or confidentiality is required to protect intellectual property rights, or where confidentiality is a funder requirement.

x) Published research outputs should normally include a statement, or appropriate referencing, to advise how and on what terms any supporting research data may be accessed.

xi) Researchers do not have the authority to sign data sharing agreements or enter into legally binding arrangements or reassurances for the management of data on behalf of the University; this rests with the Chief Operating Officer. Pro Vice Chancellor Education, Research and Knowledge Exchange should be approached in the first instance to advise on the most appropriate course of action.

PUBLICATION OF RESULTS AND OTHER RESEARCH OUTPUTS

The following provisions apply to publications and other research outputs.

i) All publications and research outputs must report research and research findings accurately and with integrity.

ii) A publication that is substantially similar to another publication derived from the same research or data must contain appropriate reference to the other publication.

iii) A researcher who submits substantially similar work to more than one publisher should disclose that fact to the publisher at the time of submission.

iv) All publications and research outputs must be made available to other researchers and to the public in accordance with the University's policies on Open Access, and researchers are encouraged to meet standards for Open Access required by funders or by government bodies wherever practically possible.

v) It is each researcher's responsibility to ensure that every publication or other research output produced by that researcher whilst at the University has a record created in the University's research repository except in very rare cases where creation of such a record would pose a security risk or is prohibited for other legitimate reasons connected to the nature of the research. Wherever possible, the output record will also include deposit of a manuscript or equivalent materials.

AUTHORSHIP

The following provisions apply to authorship.

i) A publication (and as far as practically possible, any other kind of research output) must contain reference to the contributions of all participants who have made a significant contribution to the relevant research. Referencing and related aspects of research outputs should be compliant with the guidelines of the Committee on Publication Ethics (COPE)[3].

ii) Any person who has participated in a substantial way in conceiving, executing or interpreting at least part of the relevant research should be given the opportunity to be included as an author of an output derived from that research. The ordering of the authors' names should take account of the contribution of each individual to the output, not their organisational position.

iii) Any person who has not participated in a substantial way in conceiving, executing or interpreting at least part of the relevant research should not be included as an author of an output derived from that research, but may be appropriately acknowledged.

[3] *Welcome to COPE*

iv) In addition to meeting the requirements detailed above, an author must ensure that the work of research students, research staff, and technical and support staff is recognised in a publication derived from research to which they have made a significant contribution. Authors must also ensure that funders of the research are appropriately acknowledged.

DECLARATION AND MANAGEMENT OF CONFLICTS OF INTEREST

Researchers must act at all times with integrity, in the best interests of the University. Conflicts or perceived conflicts of interest may arise as a consequence of undertaking research, in particular with third parties. All University staff and research students are required to recognise and disclose activities that might give rise to such conflicts, and to ensure that such conflicts are seen to be properly managed or avoided.

Conflicts of interest refer to situations in which financial or other personal considerations may compromise, or have the appearance of compromising, professional judgement and integrity. These might relate to financial matters and personal or family gain, personal relationships, organisational and professional commitments or obligations, career progression, and commercial arrangements. Conflicts of interest also relate to the use of time and resources, and can occur where personal interests or non-University activities harm or interfere with the productivity and involvement of a researcher.

Disclosure of a conflict or potential conflict in relation to research should be made at the time the conflict is first recognised. The disclosure should be made to Pro Vice Chancellor Education, Research and Knowledge Exchange with whom agreement should be reached as to how the conflict should be managed. Any future institutional requirement for declaration of interests would take precedence over and replace this requirement.

In addition, researchers should declare any relevant conflicts or potential conflicts of interest as part of their request for ethical and institutional approval of each research project. This will ensure compliance with external funder requirements as well as with this Code.

Members of staff have a responsibility to declare the following areas of activity.

I. All directorships registered under the Companies Act, whether or not they are remunerated.
II. Employment, office or profession or other activity apart from employment by the University.
III. Other interests, for example: clients or business relationships which they know to have a direct connection with the University and its associated companies or which might affect their business; any significant shareholdings in organisations which they know to have business with the University or its associated companies; unremunerated posts, honorary positions and other connections which may give rise to a conflict of interest or of commitment or of trust.
IV. Financial conflict of interest includes, but is not restricted to, personal or close family affiliation to, or financial involvement with, any organisation sponsoring or providing financial support for a project undertaken by a researcher. The following provisions apply to situations of actual or potential financial conflict of interest.
V. Financial involvement includes direct personal financial interest, receipt of personal benefits (such as travel and accommodation) and receipt of material or facilities for personal use. (For the avoidance of doubt, the provision of sponsored studentships or elements of travel/accommodation for students or researchers in connection with

the research should be excluded from this definition.) Researchers should act in full accordance with the normal principles of financial accountability.

VI. Where it is unavoidable that a purchase is made from a company in which a researcher has a direct financial interest, i.e. he/she or a member of their family stands to gain financially, the researcher is required to disclose this interest. This would include, but is not restricted to, cases where the researcher or a member of their family is an employee, director or partner, has a shareholding of greater than 25% or acts as a consultant to the company. The researcher will be barred from authorising the purchase and should seek advice from the Pro Vice Chancellor Education, Research and Knowledge Exchange regarding how to proceed.

VII. A researcher must comply with a direction made by their Head of School or line manager in relation to a personal conflict of interest in research. The Head of School may seek advice from the Pro Vice-Chancellor in cases of doubt.

VIII. Members of staff must not participate in committees or other groups acting on behalf of the University or its associated companies where there is a clear possibility that a conflict of interest will regularly arise.

PURCHASING AND EXPENDITURE FOR RESEARCH

Purchasing and expenditure of funds should take place in accordance with the terms and conditions of any grant or contract held for the research, with the University's Financial Regulations, and with the University's Conditions of Purchasing Policy.

Financial reimbursement or incentives for research participants must be considered appropriate and proportionate to the proposed research activity. Volunteers participating in research may be compensated financially for reasonable travel expenses, inconvenience and for time given to contribute to the research. Payments made to individuals must not be so large as to induce individuals to risk harm beyond that which they would usually accept or to distort their contribution to the research.

SUBMITTING APPLICATIONS FOR FUNDING

Principal Investigators should take all reasonable measures to ensure the accuracy of information contained in applications for funding and must ensure that it has been reviewed and approved by the necessary internal signatories. All research funding applications must be approved by the Pro Vice Chancellor Education, Research and Knowledge Exchange and the Chief Operating Officer, or their delegates, prior to their submission. Researchers do not have the authority to sign agreements or enter into legally-binding arrangements on behalf of the University; this rests with the Chief Operating Officer or their delegates.

Principal Investigators shall ensure that they understand the terms of research funding and be aware of their responsibilities for reporting and other conditions before submitting the application for funding.

A researcher who submits substantially similar work to more than one funder should disclose that fact to the funder at the time of submission.

As outlined in the Ethical Business Development and Fundraising Policy, there may be circumstances in which ethical issues arise when considering whether or not to apply for or accept funding for research from particular sources. It is important that the interests of all staff and the interests and the reputation of the University as a whole are safeguarded when

seeking and accepting external funding. While it is outside the scope of this guidance to provide an exhaustive list of specific examples of what may or may not be acceptable sources of funding, circumstances where the following may occur would cause concern and further advice should be sought from the Pro Vice Chancellor Education, Research and Knowledge Exchange.

i) A third party is involved and the original source of the funding is unknown or cannot be identified.
ii) A funding organisation wishes to place inappropriate restrictions on publication and exploitation of research.
iii) A funding organisation is attempting to exert pressure to suppress or alter the results of the research which do not further, or may damage, its interests, commercial or otherwise.
iv) A member of staff may have an interest in a funding organisation.
v) Where accepting funds from one source may compromise the ability of the University to apply for or accept funds from another source.
vi) The practices of a potential sponsor or their motives in commissioning the research may conflict with the mission, aims and objectives of the University. vii) The ethical and political implications of undertaking research or accepting research funding from a particular source could result in negative publicity and/or may seriously damage the reputation of the University.
viii) The conduct of research may harm or place at undue risk members of the public, participants, staff or students.
ix) The case might generate any mandatory or voluntary reporting requirement under the National Security and Investment Act.

In addition to these circumstances, there may also be instances in which the University's insurance does not adequately cover the circumstances of the proposed research. In such cases, the research must not take place unless or until appropriate insurance has been put in place (at the expense of the relevant project).

SPONSORSHIP OF POSTGRADUATE RESEARCH STUDENTS

Postgraduate research students might be funded by a range of different organisations, including Hartpury, or be self-funded. Supervisors and principal investigators should ensure that any sponsor is an appropriate body for the University to have a relationship. Whilst the primary responsibility is to Hartpury, consideration should also be given to the University of the West of England as the degree-awarding body for the University's research students. Similar circumstances apply as to those listed in the previous section on receipt of external research funding.

In addition, supervisors and principal investigators should ensure that there is no conflict of interest between the sponsor and the student's ability to complete their thesis as required by the University's Academic Regulations and by the Academic Regulations of the University of the West of England.

INTELLECTUAL PROPERTY, RESEARCH AND COMMERCIAL INTERACTIONS

Researchers should be aware of, and take appropriate steps to protect, any intellectual property (IP) arising from their work. The University wishes to encourage the development

and exploitation of its intellectual property, through whichever means is most appropriate, to the benefit of the University, its staff and as part of its contribution to society.

Researchers, including students and their supervisors, should be aware of the University's Intellectual Property Policy, which includes details of rights to any IP, and any income generated from their work.

The translation of the results of research into beneficial outcomes typically involves engagement with other organisations and individuals, both commercial and non-commercial. Researchers should be alert to the nature and interests of those third parties, taking into consideration the reputation and interests of the University as well as of themselves.

The University negotiates each contractual and commercial agreement based on its needs and its merits. In doing so, it has a set of significant elements in relation to research agreements that act as a reference point (not an absolute position) for such negotiations. Researchers should not seek to undermine this position. The key desirable contractual elements are:

i) Ability to publish the results of the work, with limited restrictions on time scale (with respect to notice periods and total elapsed time) to enable the protection of the results or for the funder to publish the formal report first.
ii) Ability to continue research in the area, working with other relevant organisations.
iii) Time-limited mutual confidentiality of the information.
iv) No warranty for the results of the work nor their uses.
v) Funder to indemnify the University for loss, liability or damage, except for University negligence or wilful misconduct.
vi) Pricing that reflects the conditions applied in a regulated market or that takes account of the full economic cost, the market value of the activity to the customer and the academic value to the University in unregulated markets.
vii) Full or partial payments in advance, or against key milestones.
viii) Termination by 90 days' notice on either side, with payment for all outstanding and non-cancellable costs.
ix) Either:

a. Funder ownership of the foreground intellectual property (IP), with a royalty-free, world-wide, perpetual licence to the University for educational and research purposes and for exploitation outside the funder's field of interest, an expectation / obligation that the funder makes positive use of the IP, and agreement that lump sum or royalty payments will be reasonably negotiated in the event of successful exploitation by the funder;

Or

b. University ownership of IP generated from the activity, with an option (exclusive for a defined period) for the funder to license in relevant fields where appropriate.

In both cases, use of University background IP is additional and subject to negotiation and terms. It is recognised that approaches to IP management necessarily differ between industrial sectors, and the form of the IP.

When undertaking contractual negotiations, the University is cognisant of its responsibilities under the Charities Act 2006, which requires public benefit to be shown for activities that require support from public funds, and under the National Security and Investments Act 2021. Researchers also need to be aware of these responsibilities.

MISCONDUCT AND ALLEGATIONS OR COMPLAINTS OF MISCONDUCT

Misconduct in research is defined as any breach of the University's Code of Research Practice, or other practices that seriously deviate from those that are commonly accepted within the academic and research communities for proposing, conducting, reporting, translating or using research. It specifically encompasses, but is not restricted to:

i) Fabrication, including the creation of false data or other aspects of research, including documentation and participant consent.
ii) Falsification, including the inappropriate manipulation and/or selection of data, imagery and/or consents. iii) Misrepresentation of data and/or interests and/or involvement and/or qualifications, experience or credentials and/or publication history.
iv) Plagiarism, including the general misappropriation or use of others' ideas, intellectual property or work (written or otherwise), without acknowledgement or permission.
v) Failure to follow required legal, regulatory or professional obligations or processes.
vi) Failure to declare actual or potential conflicts of interest to line manager or others as required.
vii) Failure to follow accepted procedures or to exercise due care in carrying out responsibilities for avoiding unreasonable risk or harm to humans, animals used in research or the environment.
viii) Any breach of data protection legislation or failure to follow accepted procedures or to exercise due care in carrying out responsibilities for the proper handling of privileged or private information on individuals or organisations collected during the research.
ix) Improper conduct in peer review (or equivalent) of research proposals, results, manuscripts or other processes.
x) Intentional damage to, or removal of, the research-related property of another.
xi) Improper dealing with allegations of misconduct.
xii) Intentional non-compliance with: the terms and conditions governing the award of external funding for research; the University's policies and procedures relating to research, including accounting requirements, ethics, and health and safety regulations; or any other legal or ethical requirements for the conduct of research.

Misconduct in research does not include unintentional error or professional differences in interpretation or judgment of data.

For the avoidance of doubt, misconduct in research includes acts of omission as well as acts of commission.

Staff and students have a duty to report misconduct in the prosecution of research, where they have good reason to believe it is occurring, to the Deputy Vice-Chancellor. The University will investigate allegations or complaints about misconduct in research or about scientific or scholarly fraud.

Failure by a researcher to comply with the provisions of this Code will be grounds for action to be taken under the University's Procedure for the Investigation of Allegations of Misconduct in Research (the Procedure). In particular, any allegation or complaint of

misconduct will be investigated and dealt with under the Procedure and may be subject to action under the University's disciplinary procedures. Alleged misconduct in research relating to a PhD student's research or to a thesis that has been submitted for examination will normally be investigated under the Procedure.

Any complainant who can be shown to have acted maliciously may also be subject to action under the University's disciplinary procedures.

Researchers who wish to submit their work to a formal process of internal scrutiny (in the event of retraction of published work or similar) are required to initiate the Procedure for the Investigation of Allegations of Misconduct in Research.

REFERENCE TO OTHER POLICIES APPENDIX I: UNIVERSITY POLICIES, LEGISLATION AND STANDARDS OF GOOD PRACTICE UNIVERSITY POLICIES

Note: in some cases, these policies are currently styled as being of the College, but apply to Hartpury as a whole and hence to the University.

Academic Regulations of Hartpury University
Policies, regulation, and information | Hartpury University & Hartpury College

Academic Regulations of the University of the West of England
Academic regulations and procedures - Academic information | UWE Bristol

Code of Professional Conduct
Code of Professional Conduct- Staff

Conditions of Purchasing Policy
N/A

Data Protection and Information Governance Policy
Data Protection and Information Governance Policy 2024

Equality, Diversity & Inclusivity Policy
Equality, Diversity & Inclusivity Policy 2024

Ethical Business Development and Fundraising Policy
Ethical Business Development and Fundraising Policy 2025

Financial Regulations (incorporating Anti-Bribery, Fraud, Expenses, International Travel and Treasury policies)
Financial Regulations 2025

Harassment Policy
Bullying & Harassment Policy - Students 2025

Health, & Safety Policy
Health and Safety Policy 2024

Health & Wellbeing Policy
N/A

Policy on Open Access and Open Data
N/A

Intellectual Property Policy
Hartpury Policies- Research & Knowledge Exchange (RKE)

Procedure for the Investigation of Allegations of Misconduct in Research
Hartpury Policies- Research & Knowledge Exchange (RKE)

Public Interest Disclosure Procedure ('Whistle Blowing')
Public Interest Disclosure Procedure ('Whistle Blowing') 2024

REF2021 Code of Practice
https://www.hartpury.ac.uk/media/1doaccsa/hartpury-ref-code-of-practice.pdf

Research Governance Standard Operating Procedures
Research governance | Hartpury University | Standard Operating Procedures

Slavery and Human Trafficking Statement
Slavery and Human Trafficking Statement 2025

RELEVANT LEGISLATION

Animals (Scientific Procedures) Act 1986 (ASPA)
Animals (Scientific Procedures) Act 1986

Care Act 2014
Care Act 2014

Copyright, Designs and Patents Act 1988 (as updated)
Copyright, Designs and Patents Act 1988

Data Protection Act 2018
Data Protection Act 2018

Human Tissue Act 2004
Human Tissue Act 2004

Higher Education (Freedom of Speech) Act 2023
Higher Education (Freedom of Speech) Act 2023

Medicines for Human Use (Clinical Trials) Regulations 2004
The Medicines for Human Use (Clinical Trials) Regulations 2004

Mental Capacity Act 2005
Mental Capacity Act 2005

National Security & Investment Act 2021
National Security and Investment Act: guidance for the higher education and research-intensive sectors - GOV.UK (www.gov.uk)

Patents Act 1977 (as updated)
Patents Act 1977

Safeguarding Vulnerable Groups Act 2006
Safeguarding Vulnerable Groups Act 2006

POLICIES AND STANDARDS OF RESEARCH INTEGRITY

Committee on Publication Ethics
Welcome to Committee on Publication Ethics

International Council for Harmonisation of Technical Requirements for Pharmaceuticals for Human Use (ICH) (including GCP)
International Council for Harmonisation of Technical Requirements for Pharmaceuticals for Human Use (ICH) (including GCP)

Nagoya Protocol, Convention on Biological Diversity (CBD), October 2010,
About the Nagoya Protocol

Research Councils UK (2013). *Policy and Guidelines on Governance of Good Research Conduct.* Swindon: Research Councils UK.
UKRI Policy and Guidelines on Governance of Good Research

UK Policy Framework for Health and Social Care Research (2017)
UK Policy Framework for Health and Social Care Research - Health Research Authority

UK Research Integrity Office (2009). *Code of Practice for Research: Promoting good practice and preventing misconduct.* London: UKRIO.
UK Research Integrity Office: Code of Practice for Research

UK Research and Innovation. Research Integrity
UK Research and Innovation. Research Integrity

Universities UK (2025), The Concordat to Support Research Integrity, Universities UK, 2025
The Concordat to Support Research Integrity

Vitae (The Concordat to Support the Career Development of Researchers, Vitae, September)
Policy - Vitae

OTHER MATERIALS

Concordat for the Advancement of Knowledge Exchange in Higher Education in England (Draft), Universities UK
The concordat for the advancement of knowledge exchange in higher education

Concordat for Engaging the Public with Research
Concordat for Engaging the Public with Research

Concordat on the Openness of Animal Research (COAR)
Concordat on Openness on Animal Research in the UK | Openness in animal research communications

Understanding Animal Research

EAUC (2019), Climate Commission for UK Higher and Further Education Students and Leaders, EAUC, October 2019
Climate Commission for UK Higher and Further Education | EAUChttps://www.eauc.org.uk/climate_commission

EMA VICH GL9 Good clinical practices, European Medicines Agency
VICH GL9 Good clinical practices - Scientific guideline | European Medicines Agency (EMA)https://www.vichsec.org/en/about/what-is-vich.htmlhttps://www.vichsec.org/en/about/what-is-vich.html

National Centre for the Replacement, Refinement & Reduction of Animals in Research (NC3Rs)
National Centre for the Replacement, Refinement & Reduction of Animals in Research

OECD (2015), Frascati Manual 2015, OECD, 2015
Frascati Manual 2015 | OECD

FREEDOM OF SPEECH

As part of this policy, Hartpury reaffirms its commitment to the principles of freedom of speech and academic freedom, in accordance with the Higher Education (Freedom of Speech) Act 2023 and guidance from the Office for Students (OfS). Hartpury will take all reasonably practicable steps to secure the right to express lawful views and engage in open debate without fear of censorship or institutional discipline for staff, students, and visiting speakers. In addition, this policy prohibits the use of non-disclosure agreements (NDAs) in any situation that would prevent staff from speaking out about misconduct, harassment, or other matters of public interest.

EQUALITY, DIVERSITY AND INCLUSION

As with all Hartpury policies and procedures, due care has been taken to ensure that this policy is appropriate to all members of staff and students regardless of their age, disability, ethnicity, gender, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sexual orientation and transgender status.

The policy will be applied fairly and consistently whilst upholding Hartpury's commitment to providing equality to all. If any employee or student feels that this or any other policy does not meet this aim, please contact the HR Department (staff) or an academic tutor (student).

Hartpury is committed towards promoting positive mental health by working towards the MINDFUL EMPLOYER Charter, holds the Student Minds University Mental Health accreditation and has signed the AoC Mental Charter. Hartpury aims to create a culture of support within the workplace where employees can talk about mental health problems without the fear of stigma or discrimination.

APPROVAL & REVIEW CYCLE		
Policy Owner/Reviewer	Pro Vice Chancellor Education and Research and Knowledge Exchange	October 2025
Approved By	SMT	October 2025
	Academic Board	October 2025
Interim-Review	No	N/A
Next Review Date		October 2027

Appendix 2.2: Research Standard Operating Policy

HARTPURY

Research Governance Standard Operating Procedures

TABLE OF CONTENTS

INTRODUCTION

The University has set out its expectations and standards for the conduct of research in its Code of Research Practice and through that Code seeks to implement the Concordat to Support Research Integrity. Breaches of these standards are dealt with through the Procedure for the Investigation of Allegations of Misconduct in Research.

To support the Code, the University has developed research governance and ethics policies and procedures that recognise the importance of addressing ethical matters while supporting the achievement of its collective research objectives.

Oversight of research governance is the responsibility of the Pro Vice Chancellor, Education and Research and Knowledge Exchange, within the framework shown in Figure 1.

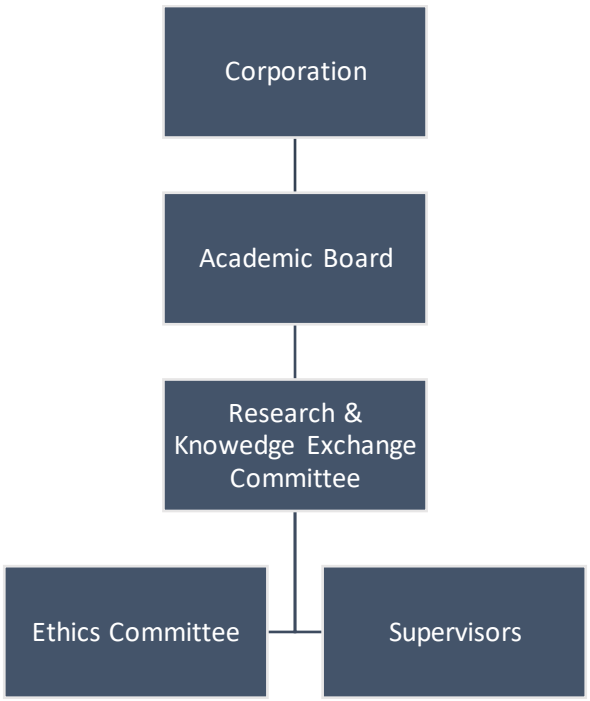

Figure 1: Hartpury Research Governance Framework

Each person involved in research has individual responsibilities, as set out in the Code of Research Practice. This is supplemented by the investigator responsibilities set out by the UK Policy Framework for Health and Social Care (see Annexes).

These standard operating procedures set out the procedural requirements for research governance, including ethical review, health and safety, and monitoring and audit. All procedures should take into account the level of risk associated with any activity or project in order to ensure that the process is proportionate. These procedures are owned by the Research and Knowledge Exchange Committee, will be reviewed every three years, and may be updated from time to time between reviews. The Code of Research Practice and these Procedures take precedence over all other policies and procedures in regard to matters relating to research governance.

ETHICAL REVIEW PROCESS

Ethical review is required for all research projects. Particular consideration is taken where there are human or animal participants. It is the responsibility of the person proposing the research to obtain ethical approval before any activity takes place. Details of the current process are available in the Hartpury University Ethics Committee Process document for the current year (Hartpury Moodle page)

Activities that do not meet the Frascati definition of research (see the Code of Research Practice) but which involve the collection of human or animal data are required to undergo ethical review through the process described here. The use of animals as part of other normal Hartpury business (e.g. teaching or practice) is also subject to appropriate ethical review as part of its approval process. Any other activities that require ethical review (i.e. as required by a funder or other regulatory process) should also use this process.

The ethical review process is not a substitute for any other relevant legal, regulatory and professional or subject good practice requirements.

APPLICATIONS

Applications for ethical review are undertaken using standard forms for staff and PGR student research, and undergraduate and postgraduate taught student research (Hartpury Moodle page: Ethics). The forms indicate the documents that are required to be submitted alongside the form.

REVIEW

The review of low-risk undergraduate and postgraduate taught student research is undertaken by the student's supervisor. If a supervisor has any doubts, they should contact the Chair of the University Ethics Committee. Review of staff, PGR student and high-risk undergraduate and postgraduate taught student research is undertaken by the Ethics Committee, which exists to safeguard the rights, safety, dignity and wellbeing of research participants – people and animals. The Committee will review research proposals and decide whether the research is ethical and therefore can be undertaken. If a proposal does not meet relevant requirements, they will suggest amendments if possible. The pool of reviewers available to the Committee includes all staff with a responsibility for research.

All applications must include a suitable risk assessment and supporting evidence. The Ethics Committee will wish to be assured that the activity is included within the University's insurance cover, with any additional premium being met by the project funding. The Committee may request further documents and proofs as required to understand the study and to gain assurance on its safety and the ethics that underpin it.

Research involving human participants must ensure the protection of the participants and their rights, including the right to withdraw. Informed consent is a central tenet of ethical research involving human participation and must be built into the design of the project unless the research question actively requires undisclosed observation. Particular care is required where the research involves children or vulnerable adults. Incentives, additional payments and rewards paid to participants require approval by the Ethics Committee.

Research involving animals must ensure the protection of the animals and their owners or keepers. Informed consent applies to the owners or keepers of animals whether or not the owner or keeper is also a participant in the research.

If research is to be conducted in an institutional setting other than the University, e.g. NHS organisations, care homes, schools, prisons, etc, researchers must follow any ethics standards, procedures and regulatory guidelines of that institution. This will include obtaining

approval from the local ethics committee, if required, and may necessitate obtaining a Disclosure and Barring Service (DBS) check.

STUDIES REQUIRING MEDICAL OR VETERINARY SUPERVISION

Studies that involve physical intervention (e.g. the administration of dietary supplements, prescription or controlled drugs, herbal supplements with significant side-effects or large amounts of alcohol) or therapies for injured humans or animals may require medical or veterinary supervision. All such studies will be subject to full review by the University Ethics Committee and may have additional conditions applied as part of the approval. Studies of this type are likely to incur additional insurance costs, to be covered by the project.

LEGAL ISSUES

The role of the University Ethics Review process is to ensure that proposed research projects meet ethical standards, and not to vet them for legality. However, if a reviewer conducting a low-risk review, or the Ethics Committee as a whole, has reason to believe that a proposed research project, although ethically acceptable in other respects, may involve either a risk of a breach of the law, or may uncover breaches of law by participants in the study then the reviewer or the Chair respectively should seek legal advice on the issues through the Chief Operating Officer in the first instance.

COLLABORATIVE RESEARCH

Where research is undertaken in collaboration with another organisation, the University would normally expect the lead organisation to be responsible for ethical review, subject to assurance that the organisation operates to similar standards. Proof of the outcome of the ethical review must be provided to the Ethics Committee.

AMENDMENTS

Any substantive changes to a project (e.g. study design, consent forms, procedures, co-investigators, funding, questionnaires, etc.) must be notified to the approver of the original application (i.e. supervisor or the University Ethics Committee) for their review and approval. Changes should not be implemented until re-approval has been granted. Amendments to studies should be changes within the scope of the original study, not new studies that are simply related to the original study.

STUDIES NOT STARTING AND STUDIES THAT ARE TERMINATED

Studies that do not commence having been given approval or that are suspended or terminated early should be formally recorded as such. The reason for suspension or not starting should be recorded, however trivial. The study cannot start or recommence without a new approval, which will take into account the reasons for the non-commencement or suspension.

If a suspension happens as a consequence of a harm or a suspected harm (a Serious Adverse Event (SAE) or Suspected Unexpected Serious Adverse Reaction (SUSAR)), there should be a review by a small independent panel, with involvement of the Principal Investigator and team or student and supervisor, to understand if the protocol was followed or not, whether the SUSAR was caused by the study or by some other cause, and what lessons might be learnt for this study or for others of a similar nature. The findings should be documented in a short report. Such a review is not looking to find blame, but if it were to find possible research misconduct, that would trigger an allegation to be investigated.

REPORTING OF ADVERSE OR UNEXPECTED EVENTS

Principal Investigators and supervisors must report any adverse (undesirable and unintended) and unexpected events arising out of the research to the Chair of the University Ethics Committee within five days. In the case of a serious adverse event, the research must be halted immediately, and the Principal Investigator or supervisor must inform the Chair of the University Ethics Committee within 24 hours.

The primary goal of recording adverse and unexpected events during research is to provide a learning exercise for both researchers and the Ethics Committee, and departments are asked to encourage reporting of problems during research.

MONITORING AND AUDIT

The University Ethics Committee will report annually to the Research and Knowledge Exchange Committee on the portfolio of applications, including reporting on any suspensions, terminations and adverse or unexpected events. The Ethics Committee may request that a random sample of researchers who have received ethical approval undertake a self-audit to report on any deviations or unexpected events. The Ethics Committee select a small random sample of projects to audit annually, to understand how ethical aspects of research are being considered throughout the life cycle of studies. The results of self-audits and Committee audits will be included in the Committee's annual report.

HEALTH AND SAFETY IN RESEARCH

The University's Health and Safety Policy 2024 applies to our research in order to ensure that activities take place without detriment to staff, student, visitors and animals. Good practice in health and safety is part of strong research integrity and high quality.

All significant risks should be assessed using the risk assessment form (Hartpury Moodle page: Ethics). Advice is available from the Health, Safety & Logistics Manager.

OVERSEAS RESEARCH, TRAVEL AND INSURANCE

Researchers undertaking studies overseas should seek to understand the ethical and research governance requirements of the countries that they will be visiting. This may include licences and permissions to use certain equipment, visit specific areas or obtain ethical review from local ethics committees if researching government departments (or similar) that need 'gate-keeper' permissions. Due diligence should be undertaken to make sure that all local legal and regulatory requirements are met and that ethical issues are understood and acknowledged.

If a research project involves overseas travel, applicants must complete an International Travel Application form (Hartpury staff pages: International Travel Application form taking account of the International Travel Policy (Hartpury staff pages: International Travel Policy) Researchers are required to check and understand Foreign, Commonwealth & Development Office (FCDO) travel advice before completion of the form, and identify any safety or security risks in their risk assessment.

Plans to travel to countries with significant risks (as identified by the FCDO's travel advice) will require clear justification, planning and risk mitigation.

Researchers who are visiting countries that the FCDO identify as having significant risks may benefit from taking advice from other researchers or organisations with recent practical experience of the travel to the area. The requirement for completing and submitting an International Travel Application form and associated risk assessment does not exclude

nationals who are students or staff at Hartpury who are returning to their home country to undertake research.

The University Ethics Committee may withhold ethical approval if it is not satisfied that matters relating to researcher safety have been sufficiently considered.

EXTERNAL QUALITY OR OPERATING STANDARDS

Some of the University's research is or will be subject to external quality or operating standards, such as GxP (Good Practice) or ISO standards. Good Practice requirements may include clinical, laboratory, manufacturing and veterinary clinical settings, amongst others. Relevant ISO Standards include 9001 (Quality Management) and 27001 (Information Security Management). External standards may particularly apply in collaborative work or where a University researcher is undertaking some aspect of their research at another organisation's premises. In such circumstances, researchers should work to those regulatory or local standards.

ANNEXES

TORS AND ROLE DESCRIPTIONS

- Ethics Committee ToRs (Hartpury Moodle page: Ethics)
- Ethics Committee Chair's Role Description (Hartpury Moodle page: Ethics)

RESPONSIBILITIES OF INVESTIGATORS AND THE CHIEF INVESTIGATOR OF SPONSORED STUDIES (FROM THE UK POLICY FRAMEWORK FOR HEALTH AND SOCIAL CARE)

(Note that the terminology Chief Investigator as used in the Framework and related regulation is synonymous with the terminology of Principal Investigator used in academic research.)

The following material is an extract from the UK Policy Framework for Health and Social Care (UK Policy Framework for Health and Social Care Research - Health Research Authority)

9.2 The chief investigator is the overall lead researcher for a research project. In addition to their responsibilities if they are members of a research team, chief investigators are responsible for the overall conduct of a research project, including:

a) satisfying themselves that the research proposal or protocol takes into account any relevant systematic reviews, other research evidence and research in progress, that it makes effective use of patient, service user and public involvement where appropriate and that it is scientifically sound, safe, ethical, legal and feasible and remains so for the duration of the research, taking account of developments while the research is ongoing;
b) satisfying themselves that the research proposal or protocol has been submitted for appropriate independent expert ('peer') review and revised in light of that review;
c) satisfying themselves that, if expected or required, the proposal has been submitted for review by and obtained approval from a research ethics committee and any other relevant approval bodies;
d) satisfying themselves that everyone involved in the conduct of the research is qualified by education, training and experience, or otherwise competent, to discharge their roles in the project;
e) satisfying themselves that the information given to potential participants is in a suitable format and is clear and relevant to their participation in the research and, where consent is required, to their decision-making about taking part in the research;
f) adhering to the agreed arrangements for making information about the research publicly available before it starts (unless a deferral is agreed by or on behalf of the research ethics committee);

g) adhering to the agreed arrangements for making data and tissue accessible, with adequate consent and privacy safeguards, in a timely manner after the research has finished;
h) starting the research only once the sponsor has confirmed that everything is ready for it to begin;
i) adhering to the agreed procedures and arrangements for reporting (e.g. progress reports, safety reports) and for monitoring the research, including its conduct, the participants' safety and well-being and the ongoing suitability of the approved proposal or protocol in light of adverse events or other developments; and
j) adhering to the agreed arrangements for making information about the findings of the research available, including, where appropriate, to participants.

9.3 Students should not normally take the role of chief investigator at any level of study, as this function should be undertaken by supervisors or course leaders.

a) Relevant supervisors (or course leaders, where different) should be encouraged to develop and lead research projects that individual students at Masters level and below can contribute to at different stages. Undergraduate students should only conduct research projects in isolation that involve direct contact with patients, service users or the public in a health or social care setting if on-site supervision arrangements mitigate any risks.
b) A research culture should be fostered amongst relevant undergraduate students by encouraging an awareness of health and social care research, research ethics and public involvement, and enabling them to develop skills in research methods. Students from courses that are not primarily related to health and social care, such as business studies or IT, who wish to undertake research involving patients or service users, their data or tissue, or the public in a health or social care setting should have a co-supervisor with relevant experience that will help them understand the care context and the associated research process.
c) The contribution of students to the development, conduct and reporting of the research should be appropriately acknowledged like that of other contributors, e.g. in accordance with journal editors' authorship criteria.

9.4 Research should be conducted in accordance with a research proposal or protocol – a document that describes clearly what will be done in the research. This is important so that the researchers can all understand consistently what they are supposed to do and so that the research can be properly analysed and, if necessary, reproduced. Public involvement plays an important role in research design and planning. Well-planned and well-written research proposals, protocols and procedures are key to carrying out research successfully. They help avoid subsequent amendments, which are time-consuming and costly for the funder, the researchers and the approval bodies. However, high-quality research proposals, protocols and procedures are only effective if they are followed. Not adhering to the research proposal or protocol has the potential for adverse impact and reputational risk to all parties involved. For research participants, this compromises any informed consent given; for the researcher, it creates a scientific risk that the research data (or their credibility) may be compromised; and for sponsors, there is often a financial and resource implication, particularly where a suspension to recruitment or extensive investigation are involved.

9.5 Research proposals, protocols and procedures should be clear, comprehensive and easily accessible to the research team. Good document management and version control are essential so that, for instance, the same single version of the research proposal or protocol is being followed in the same way by everyone involved. Otherwise, the data collected could not be reliably compared, undermining the findings of the research. There is often an expectation or requirement for documents to be revised and updated during the lifespan of studies and these expectations and requirements may come from various organisations. It is important to ensure that changes to the research proposal or protocol are submitted for review, if expected

or required, by a research ethics committee and any other relevant approval bodies and, if approved, that they are introduced uniformly across all relevant research sites.

FREEDOM OF SPEECH

As part of this policy, Hartpury reaffirms its commitment to the principles of freedom of speech and academic freedom, in accordance with the Higher Education (Freedom of Speech) Act 2023 and guidance from the Office for Students (OfS). Hartpury will take all reasonably practicable steps to secure the right to express lawful views and engage in open debate without fear of censorship or institutional discipline for staff, students, and visiting speakers. In addition, this policy prohibits the use of non-disclosure agreements (NDAs) in any situation that would prevent staff from speaking out about misconduct, harassment, or other matters of public interest.

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APPROVAL & REVIEW CYCLE		
Policy Owner/Reviewer	Pro Vice Chancellor Education, Research and Knowledge Exchange	October 2025
Approved By	SMT	October 2025
	Academic Board	October 2025
Interim-Review	No	N/A
Next Review Date		October 2027

Appendix 2.3: EDI Policy

EQUALITY, DIVERSITY & INCLUSIVITY POLICY 2024

HARTPURY

Introduction

Introduction Hartpury is committed to achieving universal acceptance and application of a working and learning environment free from harassment, intimidation and unlawful discrimination. It is also committed to taking positive action to promote such equality & diversity of opportunity in relation to recruitment (staff and students), promotion, training, learning, benefits, procedures and all terms and conditions of employment and all requirements that govern student regulations.

At Hartpury, we are committed to valuing diversity and promoting equality. One of our Values is 'Respectful' and this means we create an inclusive and accessible environment that enables and promotes belonging and respect for staff, students and the wider community. We create an inclusive approach for both students and staff that promotes diversity, positive behaviours, builds effective relationships and enables all our students to develop and achieve the best possible outcomes. We value others for their contribution, irrespective of personal differences.

Our Equality, Diversity and Inclusivity (EDI) objectives and action plan set out our aims to identify actions and targets that promote the ongoing implementation of Hartpury's Single Equality Scheme. This should also be read in conjunction with our Hartpury 2025 strategic aims. It is the obligation of all staff and students to respect and act in accordance with the EDI Policy and to actively promote it throughout their life at Hartpury.

This policy is non contractual and may be updated at any time.

Hartpury's commitment to EDI is detailed in our headline objectives:

Empower our community to embrace equality

We are committed to ensuring that all members of our community are aware of their individual and collective responsibilities and legal duties in relation to EDI. We are committed to increasing equality of opportunity and outcomes.

Celebrate and recognise the strength of diversity

We will increase our understanding of EDI and the challenges that our students and staff may face, nurturing, supporting and enabling them to succeed through staff and student surveys, awareness raising events and networks.

Promote an Inclusive Culture

We promote inclusive learning and working cultures, where everyone can flourish. This is the responsibility of all members of the Hartpury community and is demonstrated through actions and behaviours with the integration of EDI into initiatives and activities across Hartpury.

Apply zero tolerance to all forms of harassment and discrimination

We enable an inclusive environment where everyone can feel inspired to make a difference and where bullying and harassment, discrimination and hate crime are challenged, reported and action taken.

Defining Equality, Diversity and Inclusivity

Equal treatment involves much more than simply treating everyone alike; it requires a recognition that some groups and individuals have particular and specific needs that must to be met if they are to enjoy equal access to the services offered by Hartpury. We recognise that Hartpury may need to provide its services in a range of different or more flexible ways, in order to ensure genuine equality of access or opportunity for groups and individuals who approach those services from a position of disadvantage. Valuing diversity involves an acknowledgement of the benefits and intrinsic worth derived from the range of difference within our community and fostering it as a strength. We aim to celebrate and to value the differences between individuals' cultural, social and intellectual contribution to Hartpury and will seek to promote greater mutual understanding between groups and individuals who reflect these differences. We will seek to utilise the talents and experiences that each and every individual can bring to the institution. Inclusivity is the complete acceptance and integration of all students and staff regardless of diversity background that proactively leads to a sense of belonging, engagement and full participation within and across Hartpury. It is about the removal of barriers that exist to equal opportunity for individuals from diverse backgrounds. Our commitment is to identify and remove these barriers to facilitate an environment/campus that is increasingly inclusive.

Legal Framework

The Equality Act 2010 introduces the term 'protected characteristic' to refer to aspects of a person's identity explicitly protected from unlawful discrimination. Nine are identified:

- Age
- Disability
- Gender reassignment
- Marriage or civil partnership
- Pregnancy and maternity
- Race – (includes race, colour, nationality (including citizenship), ethnic or national origins)
- Religion or belief including philosophical belief and a lack of belief
- Sex
- Sexual orientation

However, other aspects of a person's identity, background or circumstance can cause them to experience discrimination, for example a person's socio-economic status, class or background. Hartpury is committed to advancing equality and eliminating discrimination on these and other grounds.

The Equality Act 2010 recognises the following types of discrimination:

- Direct discrimination, including associative and perception discrimination
- Indirect discrimination
- Harassment
- Victimisation
- Discrimination arising from a disability

Failure to make reasonable adjustments The Equality Act 2010 requires Hartpury to give due regard to:

- eliminate discrimination, harassment and victimisation
- advance equality of opportunity
- foster good relations.

Scope

This policy covers all staff, current and/or prospective students and visitors irrespective of:

- Age – people of any age, including older and younger people.
- Disability – people with a range of impairments both visible and non-visible for example, diabetes, wheelchair users, blind or deaf people, cancer patients, dyslexia, mental health and HIV.
- Sex – men and women.
- Race – people from all races and nationalities this will include Gypsies and Travellers, Migrant Workers, Asylum Seekers and Refugees, as well as white British people.
- Religion, faith or Belief – people of any religion, for example Christianity, Buddhism, Hinduism, Islam, Sikhism or Judaism, people with any similar philosophical belief for example, Humanism and people with no beliefs.
- Sexual Orientation – people of any sexual orientation, for example heterosexual, gay, lesbian, bi-sexual or questioning.
- Pregnancy and maternity - Pregnancy is the condition of being pregnant or expecting a baby. Maternity refers to the period after the birth and is linked to maternity leave in the employment context. In the non-work context, protection against maternity discrimination is for 26 weeks after giving birth, and this includes treating a woman unfavourably because she is breastfeeding.
- Marriage and Civil Partnership - Marriage is a union between a man and a woman or between a same-sex couple. Same-sex couples can also have their relationships legally recognised as 'civil partnerships'. Civil partners must not be treated less favourably than married couples (except where permitted by the Equality Act).
- Gender Reassignment – people preparing the transition from male to female (MTF) or female to male (FTM), people who are currently going through the process of transitioning or people who have transitioned. A transsexual person has the protected characteristics of gender reassignment. Protection remains for people undergoing gender reassignment from discrimination due to absence from work and studies. Transvestites are also included.

It also applies to people using the services of Hartpury such as conferencing facilities or providing a service such as contractors. All of these groups will be expected to adhere to this Policy. Where staff or students are working or studying in locations other than the Hartpury campus they will still be subject to the Policy. The Policy also extends to cover behaviour in the VLE, by email and other social media channels. Breaches of this policy will be taken seriously and may lead to disciplinary proceedings.

Purpose

Hartpury provides education and training which involves work-based training, vocational and professional training, further and higher education, full-time, part-time, and short courses. As such our student base is diverse, bringing on to campus people from all of the different equality groups as well as individuals with various educational experiences and ambitions. Likewise, staff and visitors are diverse and bring their own perspectives and expectations. The procedures enshrined within this policy will ensure that all persons involved with Hartpury are treated with respect, courtesy, integrity and equality of opportunity in all aspects of their contact with Hartpury. Our approach is to ensure that no person associated within Hartpury receives less favourable or more favourable treatment on the grounds of any of the nine protected characteristics. This policy and associated procedures also provide guidance to the wider Hartpury community on the role for every individual in contributing to equality of opportunity. In order to ensure commitment to the principles outlined in the policy and associated procedures, senior managers will liaise regularly with relevant representative bodies (e.g. Student Union, Staff Forum).

Responsibilities

Role	Responsible For
Employee	• Read, understand and practically apply this policy. • Complete relevant training regarding equality and diversity. • Work harmoniously with all other staff, students, customers and other people and uphold high standards expected. • Challenge and report any concerns about equality and diversity in a safe manner via one of the routes outlined in this policy. • Teaching and learning staff will deliver materials to students which avoid stereotyping or discrimination and embed equality and diversity into their sessions. • To respect the dignity of all staff and students • To comply with the law in relation to the protected characteristics that is in force in the UK.
Manager	• Set a good example by treating all members of Hartpury with dignity and respect and challenging unacceptable behaviour • Ensure all employees and students are aware of this policy and know how to report discrimination, harassment or bullying and that reporting incidents does not result in victimisation. • Deal with complaints fairly, thoroughly, quickly and confidentially. • To create a positive, inclusive ethos that challenges discriminatory behaviour on the part of the managers, staff or learners.
Human Resources	• Will ensure that procedures for the recruitment and promotion of staff encompass best practice at all times, irrespective of who they are within equal opportunities legislative requirements.

	• Monitor and act on employee protected characteristic data. • Provide equality and diversity training for staff.
Students	• Are expected to adhere to the Student Charter and Code of Conduct. • Report unacceptable behaviour or any discrimination.
EDI Forum	• Ensure the EDI action plan is revised annually and all actions monitored.

Implementation

The Equality, Diversity and Inclusivity Policy will be issued to all staff through the Staff Handbook and to students through the joining information available on the website. The Policy is also available on the Intranet and Hartpury website. All Hartpury Procedures will be available to staff and students through the Intranet, , Moodle, Operating Procedures, Policy Manuals and leaflets. Alternative formats for example large print, Braille, audio, other languages can be provided on request.

All applicants will be treated with fairness and equality regardless of their circumstances, as outlined in the Recruitment and Selection Policy.

Induction programmes for staff and students will contain EDI principles and responsibilities.

Hartpury will ensure that all CPD requests are treated with fairness and equality as outlined in the Staff Development Policy. Personal tutors, line managers, teaching and support staff will ensure that individuals are guided and supported by relevant information regarding equality and diversity procedures and principles. Staff training programmes will incorporate general and specific matters relating to EDI with particular reference to new and developing guidance on legislation where appropriate.

All staff who are involved in a Disciplinary or Performance Improvement processes will be treated with fairness and equality regardless of their circumstances, as outlined in the Disciplinary and Dismissal Policy and Procedure and the Performance Improvement Policy and Procedure.

Any member of the Hartpury community who believes they have been subjected to unfair treatment as described in this policy and associated procedures should report their concern to either their personal tutor, line manager or a member of the Senior Management Team.

Hartpury staff have to report any case of alleged discrimination or harassment to the Human Resources Department. Students are required to report any case of alleged discrimination or harassment to the Safeguarding and Wellbeing team.

Equal Pay Statement

Hartpury supports the principle of equal pay for work of equal value and recognises the system should be free from bias and based on objective criteria. As part of our ongoing commitment to putting equal pay principles into practice, we will carry out monitoring of the impact of our pay practices in line with legislative requirements.

Gender Pay Reporting

Hartpury is confident that males and females are paid equally for doing the equivalent or same job and this has been demonstrated in our equal pay audits. Hartpury has policies and procedures in place that are fair to all and will continue to monitor the impact of these policies in terms of our gender pay gap.

Hate Crime

Hate incidents are expressions, actions or behaviour, which are motivated by hostility or prejudice towards a person's race, religion or belief, disability, sexual orientation or gender identity. When the behaviour amounts to a criminal offence, a hate incident is referred to as a hate crime. Hate crimes should be reported to the police. Hartpury promotes a supportive, inclusive environment where our staff and students can study, work and live in a community that does not tolerate bullying, harassment, hate and sexual misconduct.

Racial Equality

Education has the power to strengthen communities, enrich lives and transform the world, and at Hartpury, we take our role as educators incredibly seriously. The Black Lives Matter (BLM) movement has shown the necessity of a robust education system, which does not shy away from conversations that might feel uncomfortable for some. We know that to be part of the solution, we need to acknowledge the problem, which is why we have made a public statement acknowledging our support for BLM and we are committed to creating and maintaining an inclusive learning and working environment, where equality is promoted, diversity is valued and discriminatory behaviour is not tolerated towards people of colour. We are united as a whole Hartpury community in our dedication to standing up to racism and oppression, and standing in solidarity with the black community, at home and around the world.

Complaints

Any cases of discrimination, harassment, bullying or victimisation will be taken seriously by Hartpury. Staff, students or other parties who make a complaint of discrimination have the right to do so without fear of victimisation and Hartpury will make every effort to ensure victimisation does not occur and that any complaints are dealt with promptly and fairy.

Promoting Positive Mental Health

Hartpury will ensure that those who are living with a mental health problem are managed fairly and consistently. In order to fully demonstrate the organisations commitment to changing the way we all think and act about mental health in the workplace, Hartpury has achieved the Student Minds University Mental Health Charter.

Process for Monitoring

The EDI Forum meet termly, and minutes are available on Hartpury's intranet. An EDI Report is presented to the Corporation annually. The EDI Forum review all EDI action plans and statistics relating to staff and students termly.

This Policy will be reviewed by the Deputy Principal - Resources on an annual basis and any changes agreed by the EDI Forum. The Corporation will approve the policy on an annual basis.

SOURCES OF FURTHER GUIDANCE

Equality Act 2010
Human Rights Act (1998)

Reference to Other Policies

Student Charter (University students)
Student Code of Conduct (College students)
Academic and Behaviour Management Procedure (College Students)
Restorative Practice Framework Procedure (College Student)
University Disciplinary Policy (University students)
Student Disability Policy
Child Protection and Safeguarding Policy and Procedures
Grievance Policy (Staff)
Disciplinary & Dismissal Policy and Procedure (Staff)
Complaints Procedure
HE Student Complaints
Recruitment and Selection Policy (Staff)
Harassment and Bullying Policy
Gender Identity Policy
Sexual Misconduct Policy
Health & Wellbeing Policy (Staff)
Whistleblowing Policy (staff)
Flexible Working Policy (staff)

Equality, Diversity and Inclusion

As with all Hartpury policies and procedures, due care has been taken to ensure that this policy is appropriate to all members of staff and students regardless of their age, disability, ethnicity, sex, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sexual orientation and transgender status.

The policy will be applied fairly and consistently whilst upholding Hartpury's commitment to providing equality to all.

Hartpury is committed towards promoting positive mental health and aims to create a culture of support where staff and students can talk about mental health problems without the fear of stigma or discrimination.

Approval and Review Cycle

DATE LAST APPROVED	July 2023
POLICY OWNER	HR
APPROVING COMMITTEE	Corporation
STATUS	Approved
EFFECTIVE FROM	February 2024
NEXT REVIEW DATE	February 2025
LOCATION OF POLICY	Website: Policies General Intranet: HR Policies

APPENDIX 1 – GUIDANCE AND FURTHER INFORMATION (PROTECTED CHARACTERISTICS)

AGE EQUALITY

Introduction

We welcome students and staff of all ages, and you will be fully supported to enjoy being part of our community. Our inclusive approach to student and staff selection aims to ensure we are recruiting talented individuals based on their abilities, no matter what age they are. You can expect to be part of a respectful and inclusive environment at Hartpury.

Definition of age

The Equality Act 2010 makes it illegal for an organisation to discriminate an individual on the basis of their age. Age is defined as a person belonging to a particular age group, which can include people of the same age and people of a particular age range.

Our Commitment

Hartpury is committed to equality of opportunity for our students and our staff regardless of their age. Our aim is to enable all students to access learning and to improve their personal and professional development, their employability and their chances of success. We will continue to work to narrow age related success gaps. Our recruitment methods and employee support will reflect best practice. We will create opportunities for staff to have a voice via the staff forum and will work to develop excellent professional development and progression opportunities to evolve staff careers, irrespective of age. We will act firmly to eliminate any unfair behaviour arising from differences in age.

DISABILITY

Introduction

We provide a full range of support for staff and students with disabilities. A number of policies and initiatives specifically for staff and students with disabilities aim to reduce barriers, monitor the staff and student experience and help us to achieve equity.

Definition of disability

Disability is defined in the Equality Act 2010. A person has a disability if they have a physical or mental impairment, and the impairment has a substantial and long-term adverse effect on their ability to carry out normal day to day activities. In addition, Hartpury recognises the social model of disability, which defines disability as created by barriers in society such as inaccessible buildings, stereotyping and prejudice, and inflexible policies and practices. We aim to eliminate such barriers for staff, students and visitors to campus.

Our Commitment

Hartpury has adopted the social model of disability, which promotes the right of a disabled person to belong, to be valued, to choose and to make decisions. In adopting this model, we accept that we will have to strive to remove disabling barriers created by attitudes, systems and practices that prevent participation by disabled persons.

We are committed to the development of new and better opportunities for disabled people and aim to develop both practice and delivery options in order to ensure their success. We will promote positive attitudes towards disabled people and will take steps to remove any barriers, by putting in place reasonable adjustments. We will gather and use information on how our policies and practices affect the educational opportunities available to, and on the achievements of, disabled students and staff.

Hartpury is a registered Disability Confident employer. Our commitments include offering an interview to applicants with a disability who meet the minimum essential requirements of the role, anticipating and providing reasonable adjustments as and when required, and providing support to any existing employee who becomes disabled or acquires a long-term health condition.

Please also refer to the Student Disability Policy

SEX/ GENDER REASSIGNMENT EQUALITY

Introduction

Legal sex is the protected characteristic under the Equality Act 2010 that refers to a man or woman. We want to achieve equity for all our students and staff, regardless of their legal sex or gender identity. We aim to provide an environment that is fair and respectful whilst you study or work with us.

Definition

Sex is a protected characteristic under the Equality Act 2010. This means that both men and women are protected from discrimination because of their sex.

Our commitment

Hartpury welcomes people of all genders, in all departments and roles and educational programmes across our curriculum learning environments, including anyone identified as non-binary. We promote an inclusive culture of mutual respect in relation to gender. We do not tolerate gender-based harassment. We will remove barriers and actively encourage inclusive participation in traditionally gender specific job roles, job levels, curriculum areas and programmes of study, in accordance with legislation. Hartpury strives to be a place where people are encouraged to follow their chosen career or learning pathway regardless of gender status and we have built an environment where respect is valued by all.

For further information please refer to the Gender Identity Policy

MARRIAGE AND CIVIL PARTNERSHIP

Introduction

We aim to support all students and staff, regardless of their marital status.

If you are married or in a civil partnership, you can be assured that you will be treated equally and will have access to the same opportunities as staff who have a different relationship status.

Definition of marriage and civil relationship

Under the Equality Act 2010, anyone who has entered into a marriage or civil partnership is protected from discrimination arising from their marital status.

Our Commitment

We are committed to treating civil partners in the same way as married people in employment and training. Any benefits given to married employees will also be offered to civil partners, including flexible working, statutory paternity pay, paternity and adoption leave, health insurance and survivor pensions.

PREGNANCY AND MATERNITY

Introduction

We aim to fully support you if you are pregnant or are a parent at Hartpury, and we understand that this may have an impact on your studies or work from time to time. If you are pregnant, we want to ensure that your time on Campus is a comfortable one during this time. If you are a parent, we appreciate your responsibilities and would like to offer you relevant support.

Definition of pregnancy and maternity

A pregnant person is protected against discrimination on the grounds of pregnancy and maternity during the period of their pregnancy and any statutory maternity leave to which they are entitled.

For education and service providers, protection has been expanded to people outside of the workplace from discrimination that arises as a result of pregnancy and maternity. For staff, it is unlawful to consider an employee's period of absence due to a pregnancy-related illness when making a decision about their employment.

Breastfeeding parents are also protected.

Our Commitment

We are committed to advancing equality of opportunity for women who are pregnant or have given birth in the last 26 weeks or are breastfeeding, including a student of any age, fostering good relations towards the elimination of discrimination, harassment and victimisation related to pregnancy and maternity, providing support services via our Wellbeing Centre.

RACE EQUALITY

Introduction

We are committed to providing the best support, the best learning experience and the best working environment for students and staff, regardless of racial background. We want you to be confident that racial equality is taken seriously at Hartpury.

Definition of race

The Equality Act 2010 protects people from discrimination on the grounds of race, colour, nationality and/or ethnicity. You may see the abbreviations BME or BAME used in equality monitoring data. BME refers to Black and minority ethnic, while BAME refers to Black, Asian and people of colour.

Our commitment

We are committed to making Hartpury a place where students and staff are valued and respected and able to develop equally. We will promote best practice in race equality and we will identify and combat racism. Racial harassment will not be tolerated within the organisation. We will continue to take positive action to encourage the recruitment of Black, Asian and Minority Ethnic (BAME) groups of students on all courses and to close any gaps in success.
Our curriculum and extra-curricular activities will raise awareness and enable students to gain respect, self-esteem and confidence, preparing them to live in a racially diverse society. We will continue to seek to increase the number of staff, particularly senior staff, from BAME groups and encourage links with supportive professional bodies such as the Network for Black Professionals. We will work to develop role models through our body of students and our community and recognise the contribution they can make to students' aspirations. We will work to secure the fullest participation of BAME students and staff.
Hartpury supports the work of the Black Further Education Leadership Group, and has signed an open letter to the Prime Minister to address systematic racism in further education. Hartpury supports the work of the Gloucester Race Commission, which was established by Gloucester City Council for an initial period of 12 months to reflect upon and gain a better understanding of experiences of racism with Gloucester.

RELIGION AND BELIEF

Introduction

We aim to support you whether you identify yourself as being part of a particular religion or belief, or whether you identify as having no religion.

Definition of religion and belief

Under the Equality Act 2010, it is unlawful to discriminate against someone because of their religion or beliefs. Protection from discrimination also applies to those who have no religion, for example, people who identify as atheists.

Our Commitment

Hartpury welcomes people of all faiths and none, and will promote learning and understanding between religions. We will act firmly to eliminate any discriminatory behaviour arising from differences in belief. We will work to secure respect for beliefs, faiths and religions and welcome all of them equally, providing opportunities for the faithful to celebrate their beliefs. As a learning organisation, we will place firm emphasis on the primacy of education and we will develop and deliver our curriculum to strengthen moral and social awareness wherever it is appropriate.
The Chaplaincy provides spiritual support and facilities for staff and students of all faiths and none. Hartpury is strongly committed to interfaith working.
The chaplain has strong connections with the local community and its communities of faith. The chaplain can advise on local places of worship and how your faith interacts with academic life and your chosen discipline. Events are held throughout the year to mark and celebrate a variety of religious dates.

SEXUAL ORIENTATION

Introduction

Lesbian, Gay, Bisexual, Queer and Trans students and staff, as well as those who, are questioning their sexual orientation or gender identity, or identify with another sexual orientation not listed here (LGBTQ+) are an important part of our Hartpury community. We aim to provide an open and relaxed environment where you can be yourself, whatever your sexual orientation.

Definition of LGBTQ+

The Equality Act 2010 defines sexual orientation as orientation towards people of the same sex (lesbian or gay) orientation towards people of a different sex (heterosexual), and orientation towards people of the same sex and different sex (bisexual or pansexual). We recognise that sexual orientation covers a wide range of identities and the term LGBTQ+ is used as an 'umbrella' term for anyone who does not identify as heterosexual.

Our commitment

Hartpury celebrates the diversity of its staff and students and welcomes people of any sexual orientation. We will actively challenge homophobia when it arises. Hartpury will be a place where the LGBTQ+ community is visible, valued and its contribution to the organisation and wider world is recognised.

Appendix 2.4: Terms of Reference for the Research and Knowledge Exchange Committee

Research and Knowledge Exchange Committee

Purpose

The Research and Knowledge Exchange (RKE) Committee, reporting to Academic Board, oversees and evaluates RKE activities including the Research Degrees Committee, Ethics Committee and the RKE Strategic Group. Its purpose is also to ensure positive RKE engagement with Teaching and Learning and broader activities at Hartpury. The Committee receives progress reports, as appropriate, from all areas of RKE and sets annual RKE targets. The Committee is responsible for allocating the RKE budget according to RKE, Research Centre and other strategic priorities. The Committee may also be used as a consultative forum in RKE initiatives that have a clear outward facing, industry and impact orientation. The Committee works closely with the Hartpury Business Development Group in its broader remit for Knowledge Exchange.

Composition

- Pro Vice Chancellor (Education, Research & Knowledge Exchange) (Chair)
- Director of RKE (Vice Chair)
- Heads of School
- Head of Sustainability
- Department RKE Representatives (x7) – T&R staff members
- Chair of Ethics Committee
- Business Development Group Representative
- RKE Project Manager
- Professors and Associate Professors (if not Department RKE Reps)
- FE Executive nominee
- Library, Research & Digital Resources & Data Representative
- 1 Postgraduate Taught Student Representative
- Research Degrees Manager

In attendance

Officer and other members of staff and external representatives as approved by the Chair

Frequency of meetings: Meetings shall be held four times per year; normally once per term prior to Academic Board.

Terms of Reference

1. To oversee and evaluate RKE activities and those of the RKE Strategic Group, Research Degrees Committee and Ethics Committee at Hartpury.
2. Regularly review progress against the RKE Strategic Plan, including key performance indicators (KPIs) and milestones, and assess the effectiveness of the strategy in achieving its objectives.
3. To ensure positive engagement with Teaching and Learning and the broader activities at Hartpury.
4. To monitor and evaluate RKE activities across the University and within Departments.
5. To liaise with Business Development and Bid Governance groups on KE activities.
6. To make reports and recommendations, to Academic Board on RKE activities and initiatives.
7. To provide an annual report of RKE activity to Academic Board.
8. To receive reports from Ethics and Research Degrees Committees.
9. To review applications from staff and PG students for RKE funding.
10. To monitor and help progress RKE submissions (e.g. REF, RDAP, KEF and KEC).
11. To be responsible for making decisions relating to research independence and selection of outputs.
12. To initiate and input into discussions on relevant RKE topics referred to it by the Academic Dean RKE, Academic Board, Hartpury Corporation and external persons and organisations.
13. To initiate, monitor and assess the impact of activities (including projects) supported by internal and external funds, and through competitive tendering.
14. To ensure all RKE processes are fair and transparent, and compliant with the University's Equality, Diversity and Inclusivity Policy.

Minimum number of members that must be present to constitute a valid meeting (Quorum): One-third of the members eligible to attend.

For more information, please contact:
academic.services@hartpury.ac.uk

Appendix 2.5: Terms of Reference for the REF Steering Group

Research Excellence Framework (REF) Steering Group

Purpose

The Research Excellence Framework (REF) Steering Group reports directly to the Research and Knowledge Exchange (RKE) Committee. The Group exists to advise on the strategic direction of REF activities at Hartpury, developing processes towards REF. The REF Steering Group has a particular focus on equality, diversity and inclusivity, and will support the development of Hartpury's research environment and culture.

Composition

- Pro Vice Chancellor (Education, Research & Knowledge Exchange) (Chair)
- Director of Research & Knowledge Exchange (Vice Chair)
- Heads of Schools x 2
- Unit of Assessment Leads x 2
- Research & Knowledge Exchange EDI Lead
- External Returns and Data Quality Manager
- RKE Project Manager

In attendance

Officer and other members of staff and external representatives as approved by the Chair.

Frequency of meetings: Meetings to be held minimum of three times per year; timings will vary depending on REF cycles.

Terms of Reference

1. To advise the Higher Education Executive on the University's policy and strategy in relation to REF activities.
2. To develop processes to support University submissions to REF, in accordance with guidance provide by the Funding Bodies, taking account of the University's commitment to inclusivity by reflecting its equality and diversity policies, and including an effective process of consultation and communication with staff.
3. To oversee the dissemination and implementation of the REF Code of Practice.
4. To advise and support the Schools in preparing for REF2029.
5. To guide professional services as appropriate, on the preparation and administration of RKE activities.
6. To make regular reports to the Research and Knowledge Exchange Committee on REF progress.

Minimum number of members that must be present to constitute a valid meeting (Quorum): One-third of the members eligible to attend.

For more information please contact:
academic.services@hartpury.ac.uk

Appendix 2.6: Terms of Reference for Academic Board

Academic Board Terms of Reference

Purpose: Academic Board is Hartpury University's highest level of academic authority and has delegated responsibility from the Board of Governors to oversee academic governance arrangements. The Board is a deliberative forum used to consult on issues such as internal institutional and organisational strategy and the impact of sector changes or academic developments, which would affect Higher Education (HE). It aims to ensure Hartpury University delivers a student academic experience that enables all students to achieve. It advises the Vice-Chancellor and the Board of Governors.

Composition:

Members to include:

- Vice-Chancellor (Chair)
- Deputy Vice-Chancellor (Deputy Chair)
- Academic Registrar
- Pro Vice Chancellor (Education, Research and Knowledge Exchange)
- Heads of School (2)
- Head of Admissions
- Director of Education
- College Principal (FE)
- Director of RKE

Elected Members to include:

- Student Nominees (normally 2 nominated by Hartpury Students' Union)
- School Nominees (normally 1 nominated by each department)

Elected members of Academic Board will have a term of office that will not normally exceed 3 years.

In attendance: Officer and other members of staff as approved by the Chair

Terms of Reference:

1. Academic Board is accountable to, and reports to the Board of Governors regarding:
   a. the development of good practice and innovation in scholarship, research, learning, teaching and assessment through the development and review of the facilitating strategies.
   b. statements of the University's academic standards and how they are set, applied and reviewed.
   c. oversight of the external examining section of the Hartpury Quality Enhancement Framework.
   d. appropriate regulations for the conduct of taught provision including the admission of students, assessment and examination and the procedures for expulsion of students for academic reasons.
   e. policies and processes that establish codes of academic conduct and ethics for student and staff
   f. ensuring that the development of Curriculum and associated activities align with the educational character and mission of the Institution, and the resources needed to support them are available and align.
   g. new University awards and honorary awards
   h. the delegation of Academic Board's responsibilities to appropriate committees
2. To ensure Hartpury University meets the requirements of ongoing registration on the Office for Students Register.
3. To approve the key documents that form the student contract.
4. Reviewing data to ensure that regulations and policies enable continuous improvement of institutional performance and staff and student experience.
5. To direct and promote access, participation and progression across the institution.
6. To make recommendations on measures of enhancement to the student and staff experience, proposed enhancement that relates to the scrutiny of quality and standards will likely be referred to Academic Standards and Enhancement Committee for consideration.
7. To scrutinise and approve, as appropriate, medium risk new academic partnerships and to advise Board of Governors on the viability of high-risk new academic partnership proposals.
8. To ensure that its related Committees, and any task-and-finish groups created, discharge their functions and delegated authority appropriately, by reviewing those outcomes in terms of value.
9. To debate, consider and direct the Higher Education strategy, in line with organisational strategies.
10. To provide input into discussions on relevant academic topics referred by the Vice-Chancellor and/or Board of Governors.

Minimum number of members that must be present to constitute a valid meeting (Quorum): One-third of the members eligible to attend.

Reserved Business: The Chair may require elected members of Academic Board to withdraw when matters are discussed which could be a conflict of interest.

Frequency of meetings: Meetings shall be held at least three times per academic year, normally prior to Board of Governors' Meetings.

For more information please contact:
academic.registry@hartpury.ac.uk

HARTPURY UNIVERSITY

Appendix 2.7: Terms of Reference for the Quality, Enhancement and Standards Committee

QUALITY, ENHANCEMENT and STANDARDS COMMITTEE (QuESt)
Terms or Reference

1	**Governor Members**
1.1	Three independent governor members
	Staff Governor
	Student Governor
	Vice-Chancellor
1.2	**Co-opted Member**
	One co-opted member may be appointed.
1.3	**In Attendance**
	Principal (FE)
	Deputy-Vice-Chancellor (HE)
	Academic Registrar
	Pro-Vice-Chancellor (Research and Knowledge Exchange) as required
	SU officer (on request)
	Representatives from other areas of the University and College to be invited to attend as the agenda dictates.
1.4	**Quorum**
	Three members (including a minimum of two independent governors and the Vice-Chancellor or nominated representative).
1.5	**Purpose**
	The committee's purpose is to provide oversight and assurance that the polices, processes and approaches of the university's academic activities support the delivery of the University's strategy and values. This is achieved by providing constructive challenge through the independent and objective review and scrutiny of academic activities including learning, teaching and assessment, the student experience, research and knowledge exchange (RKE) and the maintenance of the University's academic standards. It provides the Board of Governors with assurance that the university's academic governance and quality assurance processes comply with regulatory requirements and associated standards and are fit-for-purpose.
2	**Terms of Reference**
	Objectives
2.1	2.1.The Committee carries out the responsibilities placed on the Board of the University by the Office for Students (OfS) relating to the relevant ongoing conditions of registration. These include:

	• A conditions: Access and Participation of students from all backgrounds • B conditions: Quality, reliable standards and positive outcomes for all students • C conditions: Protecting the interests of all students
2.2	2.2.As a registered Higher Education provider, Hartpury is required to follow the public interest governance principles. This committee has responsibility for the oversight of: I. Academic freedom II. Accountability III. Student Engagement IV. Academic governance V. Risk Management (particularly academic risk) VII. Freedom of speech
2.3	Under the delegated authority from the Board of Governors this committee is empowered to:
	a. To advise the University Board on the educational character of the University and, in particular, major curriculum changes and enhancements that affect the educational character of the University.
	b. To receive monitoring reports including the annual quality report that enable it to provide confirmation to the governing body that the University's academic governance and quality assurance processes meet or exceed requisite thresholds and are fit for purpose.
	c. To monitor the operation of external quality assurance procedures to which the University is subject. •
	d. To consider the outcome of academic and professional assessments conducted by external statutory bodies and professional bodies, including research and knowledge exchange.
	e. To receive monitoring reports that enable it to confirm to the governing body that the University meets or exceeds the requirements of the Concordat to Support Research Integrity.
3.	**Attendance at Meetings**
	All University Board members shall have the right of attendance
4.	**Frequency of Meetings**
	Meetings shall be held at least three times per academic year, normally once per term prior to University Board.

5.	**Reporting Procedures**
	The Clerk to the Governors will circulate minutes from the meeting to members of the Committee.
	Last Reviewed – December 2021, Nov 22, June 23, June 25, June 25 Next Review: June 26

HARTPURY UNIVERSITY

Agenda Cycle – QuESt

Month	Standing agenda items (every meeting)	Annual Agenda items	In-year additions as requested / agreed
November	HE update presentation (external and internal) – discuss (DVC)	Student Survey report reflecting on previous year (NSS, PTES, Huggs) – approve (ADTLSE)	
	KPI – set (DVC)	Annual Teaching Excellence report – approve (ADTLSE)	
	Annual Quality Report – approve (AR)	Concordat to Support Research Integrity – approve (ADRKE)	
	SU report – (SU Officer)		
	Academic Board minutes – note (VC)*		
February	HE update presentation (external and internal) – discuss (DVC)	HE Academic strategy update – approve (DVC)	
	KPI update (DVC)	RKE annual report – approve (ADRKE)	
	Annual Quality Report – update action plan (AR)*	Consumer protection law annual report – approve (HoA) (within Annual Quality Report – Nov)	
	SU report – (SU Officer)	Annual report on complaints and concerns – approve (AR)	
	Academic Board minutes – note (VC)*	Annual report on student protection – approve (AR)	
June	HE update presentation (external and internal) – discuss (DVC)	Terms of reference review and self-assessment – approve (Clerk)	APP – approval (Head of Inclusivity)
	KPI update (DVC)	Review Conditions of registration and public interest governance principles (every two years) – approve (AR & ?)	
	Annual Quality Report – update action plan (AR)*	Update regarding overarching approaches to quality assurance (eg HQEF) (every two years) – approve (AR)	
	SU report – (SU Officer)	Graduate outcomes report – approve (tbc)	
	Academic Board minutes – note (VC)*		

Areas to be considered which were in previous terms of ref / previous business but not covered above:

- Employability / careers – would be covered in strategy review currently, so not included.
- Learning and teaching / student experience annual report -> create an annual teaching excellence annual report, but will consider how it aligns with quality report / timing.
- Partnerships – bring through when something needs this level of approval as in quality report annually and provision (risk) is small. Could be reviewed if provision expand

HARTPURY UNIVERSITY HEC
INSTRUMENT OF GOVERNMENT

CONTENTS

1. Interpretation of the terms used

In this Instrument of Government—

(a) any reference to "the Vice-Chancellor" shall include a person acting as vice-chancellor or equivalent title approved by the Board of Governors;

(b) "the Clerk" means the Clerk to the Board of Governors;

(c) "the Corporation" means any higher education corporation to which this Instrument applies;

(d) "the institution" means the institution (having university title) which the Corporation is established to conduct and any institution for the time being conducted by the Corporation in exercise of its powers under the Education Reform Act 1988 ("the Act");

(e) "this Instrument" means this Instrument of Government;

(f) "Board of Governors" means the members of the Corporation**;**

(g) "meeting" includes a meeting at which the members attending are present in more than one room, provided that by the use of video-conferencing facilities it is possible for every person present at the meeting to communicate with each other and also includes meetings by written resolutions and by e-mail as set out in the Corporation's Standing Orders;

(h) "necessary skills" means skills and experience, other than professional qualifications, specified by the Corporation as appropriate for members to have;

(i) "Vice-Chancellor" means the Principal

(j) "staff member" and "student member" have the meanings given to them in clause 2;

(k) "the Secretary of State" means the Secretary of State for Education;

(l) "staff matters" means the remuneration, conditions of service, promotion, conduct, suspension, dismissal or retirement of staff;

(m) "the students' union" means any association of students formed to further the educational purposes of the institution and the interests of students, as students;

(n) a "variable category" means any category of members whose numbers may vary according to clauses 2 and 3.

2. Composition of the Board of Governors

(1)The Board of Governors shall consist of—

(a) not less than nine or more than fourteen members who appear to the Board of Governors to have both the necessary skills and a balance of the necessary skills to ensure that the Board of Governors carries out its functions under article 3 of the Articles of Government (of which up to thirteen shall be persons appearing to the Board of Governors to have experience of, and to have shown capacity in, industrial, commercial or employment matters or the practice of any profession);

(b) the Vice-Chancellor of the institution;

(c) one person co-opted by the Board of Governors who has experience of the provision of education;

(d) one person who is a member of the institution's staff and has a contract of employment with the institution and who has been nominated and elected as set out in paragraph (3), ("staff member"); and

(e) one person who is a student at the institution and has been nominated and elected by their fellow students, or if the Board of Governors so decides, by the students union ("student member").

(2)A person who is not for the time being enrolled as a student at the institution, shall nevertheless be treated as a student during any period of authorised absence from the institution for study, travel or for carrying out the duties of any office held by that person in the institution's students' union but shall not also be a member of any Corporation subsidiary company board conducting a further education institution.

(3)The staff member may be a member of the academic staff or the non-academic staff and shall be nominated and elected by all staff but shall not also be a member of any Corporation subsidiary company board conducting a further education institution.

(4)A person (other than a person appointed in pursuance of sub-paragraphs (1)(d) or (1)(e)above) who is—

(a)employed at the institution (whether or not as a teacher);

(b)a full-time student at the institution; or

(c)an elected member of any local authority,

is not eligible for appointment as a member of the Board of Governors otherwise than as a co-opted member.
(5)The appointing authority, as set out in clause 5, will decide whether a person is eligible for nomination, election and appointment as a member of the Board of Governors under paragraph (1).

3. Determination of membership numbers

(1) Subject to paragraph (2, the number of members of the Board of Governors and the number of members of each variable category shall be that decided by the Board of Governors.

(2) The Board of Governors may at any time vary the determination referred to in paragraph (1) and any subsequent determination under this paragraph provided that:

(a) the number of members of the Board of Governors shall not be less than twelve or more than fifteen;

(b) the Board of Governors shall secure that a majority of all members of the Board of Governors are independent members; and

(c) the numbers of members of each variable category shall be subject to the limit which applies to that category set out in Clause 2.

(3) No determination under this clause shall terminate the appointment of any person who is already a member of the Board of Governors at the time when the determination is made.

4. Transitional arrangements

(1) The appointment of the first members of the Board of Governors shall be by the Secretary of State in accordance with section 122A(2)(b) of the Act.

(2) Where, following the last determination, the membership of the Board of Governors does not conform in number to that determination—

(a) nothing in clauses 2 and 3 of this Instrument shall require the removal of members; but

(b) the Board of Governors shall ensure that any new appointments are made so that its composition conforms to the determination as soon as possible.

5. Appointment of the members of the Board of Governors

(1) The Board of Governors shall be the appointing authority subject to paragraph (2) below. The Board of Governors shall determine the period of office of each person in the variable categories in clause 2 above not being an ex officio role.

(2) If the number of members falls below the number needed for a quorum, the Secretary of State is the appointing authority in relation to the appointment of those members needed for a quorum.

(3)The appointing authority may decline to appoint a person as a staff or student member if—

(a) it is satisfied that the person has been removed from office as a member ofa higher education corporation in the previous ten years; or

(b) the appointment of the person would contravene any rule or bye-law made under article 23 of the Articles of Government concerning the number of terms of office which a person may serve, provided that such rules or byelaws make the same provision for each category of members appointed by the appointing authority; or

(c) the person is ineligible to be a member of the Board of Governors because of clause 8.

(2) Where the office of any member becomes vacant the appointing authority shall as soon as practicable take all necessary steps to appoint a new member to fill the vacancy.

6. Appointment of the Chair and Vice-Chair

(1) The members of the Board of Governors shall appoint a Chair and a Vice-Chair from among those members appointed under clause 2(1)(a) above.

(2) Neither the Vice-Chancellor nor any staff or student member shall be eligible to be appointed as Chair or Vice-Chair or to act as Chair in their absence.

(3) If both the Chair and the Vice-Chair are absent from any meeting of the Board of Governors, the members present shall choose someone from among themselves to act as Chair for that meeting.

(4) The Chair and Vice-Chair shall hold office for such period as the Board of Governors decides.

(5) The Chair or Vice-Chair may resign from office at any time by giving notice in writing to the Clerk.

(6) If the Board of Governors is satisfied that the Chair is unfit or unable to carry out the functions of office, it may give written notice, removing the Chair from office and the office shall then be vacant.

(7) If the Board of Governors is satisfied that the Vice-Chair is unfit or unable to carry out the functions of office, it may give written notice, removing the Vice-Chair from office and the office shall then be vacant.

(8) At the last meeting before the end of the term of office of the Chair, or at the first meeting following the Chair's resignation or removal from office, the Board of Governors shall appoint a replacement from among themselves.

(9) At the last meeting before the end of the term of office of the Vice-Chair, or at the first meeting following the Vice-Chair's resignation or removal from office, the Board of Governors shall appoint a replacement from among themselves.

(10) At the end of their respective terms of office, the Chair and Vice-Chair shall be eligible for reappointment.

(11) Paragraph (10) is subject to any rule or bye-law made by the Board of Governors under article 23 of the Articles of Government concerning the number of terms of office which a person may serve.

7. Appointment of the Clerk to the Board of Governors

(1) The Board of Governors shall appoint a person to serve as its Clerk, but the Vice-Chancellor, staff or student member may not be appointed as Clerk.

(2) In the temporary absence of the Clerk, the Board of Governors shall appoint a person to serve as a temporary Clerk, but the Vice-Chancellor, staff or student member may not be appointed as temporary Clerk.

(3) Any reference in this Instrument to the Clerk shall include a temporary Clerk appointed under paragraph (2).

(4) Subject to clause 14, the Clerk shall be entitled to attend all meetings of the Board of Governors and any of its committees.

The Clerk may also be a member of staff at the institution.

8. Persons who are ineligible to be members

(1) No one under the age of 18 years may be a member, except as a student member.

(2) The Clerk may not be a member.

(3) A person who is a member of staff of the institution may not be, or continue as, a member, except as a staff member or in the capacity of Vice-Chancellor.

(4) Paragraph (3) does not apply to a student who is employed by the Corporation in connection with the student's role as an officer of a students' union.

(5) Subject to paragraphs (6) and (7), a person shall be disqualified from holding, or from continuing to hold, office as a member, if that person has been adjudged bankrupt or is the subject of a bankruptcy restrictions order, an interim bankruptcy restrictions order or a bankruptcy restrictions undertaking within the meaning of the Insolvency Act 1986, or if that person has made a composition or arrangement with creditors, including an individual voluntary arrangement.

(6) Where a person is disqualified by reason of having been adjudged bankrupt or by reason of being the subject of a bankruptcy restrictions order, an interim bankruptcy restrictions order or a bankruptcy restrictions undertaking, that disqualification shall cease—

(a) on that person's discharge from bankruptcy, unless the bankruptcy order has before then been annulled; or

(b) if the bankruptcy order is annulled, at the date of that annulment; or

(c) if the bankruptcy restrictions order is rescinded as a result of an application under section 375 of the Insolvency Act 1986, on the date so ordered by the court; or

(d) if the interim bankruptcy restrictions order is discharged by the court, on the date of that discharge; or

(e) if the bankruptcy restrictions undertaking is annulled, at the date of that annulment.

(7) Where a person is disqualified by reason of having made a composition or arrangement with creditors, including an individual voluntary arrangement, and then pays the debts in full, the disqualification shall cease on the date on which the payment is completed and in any other case it shall cease on the expiration of three years from the date on which the terms of the deed of composition, arrangement or individual voluntary arrangement are fulfilled.

(8) Subject to paragraph (9), a person shall be disqualified from holding, or from continuing to hold, office as a member if—

(a) within the previous five years that person has been convicted, whether in the United Kingdom or elsewhere, of any offence and has received a sentence of imprisonment, whether suspended or not, for a period of one day or more,; or

(b) within the previous twenty years that person has been convicted as set out in sub-paragraph (a) and has received a sentence of imprisonment, whether suspended or not, for a period of more than two and a half years; or

(c) that person has at any time been convicted as set out in sub-paragraph (a) and has received a sentence of imprisonment, whether suspended or not, of more than five years; or

(d) that person has at any time been disqualified for an offence against a child under Part II (Protection of Children) of the Criminal Justice and Court Services Act 2000 or is barred from a regulated activity involving children and vulnerable adults under the Safeguarding Vulnerable Groups Act 2006; or

(9) For the purpose of this regulation there shall be disregarded any conviction by or before a court outside the United Kingdom for an offence in respect of conduct which, if it had taken place in the United Kingdom, would not have constituted an offence under the law then in force anywhere in the United Kingdom.

(10) Upon a member of the Board of Governors becoming aware that he or she should be disqualified from continuing to hold office under paragraphs (5) or (8), the member shall immediately give notice of that fact to the Clerk.

9. The term of office of a member

(1) A member of the Board of Governors shall hold and vacate office in accordance with the terms of the appointment, but the length of the term of office shall not exceed four years. For the avoidance of doubt members appointed under clause 4(1) above's term of office shall start on the date of their appointment under clause 4(1).

(2) Members retiring at the end of their term of office shall be eligible for reappointment, and clause 5 shall apply to the reappointment of a member as it does to the appointment of a member. Members shall not serve for more than a maximum of eight years.

(3) Paragraph (2) is subject to any rule or bye-law made by the Board of Governors under article 23 of the Articles of Government concerning the number of terms of office which a person may serve.

10. Termination of membership

(1) A member may resign from office at any time by giving notice in writing to the Clerk.

(2) If at any time the Board of Governors is satisfied that any member –

(a) is unfit or unable to discharge the functions of a member; or

(b) has been absent from meetings of the Board of Governors for a period longer than six consecutive months without the permission of the Board of Governors; or

(c) has brought him or herself or the institution into disrepute or threatened to do; or

(d) the person has breached any code of conduct applying to members of the Board of Governors from time to time,

the Board of Governors may by notice in writing to that member remove the member from office and the office shall then be vacant.

(3) Any person who is a member of the Board of Governors by virtue of being a member of the staff at the institution, including the Vice-Chancellor, shall cease to hold office upon ceasing to be a member of the staff and the office shall then be vacant.

(4) A student member shall cease to hold office—

(a) at the end of the student's final academic year, or at such other time in the year after ceasing to be a student as the Board of Governors may decide; or

(b) if expelled from the institution, and the office shall then be vacant.

11. Members not to hold interests in matters relating to the institution

(1) A member to whom paragraph (2) applies shall -

(a) disclose to the Board of Governors the nature and extent of the interest; and

(b) if present at a meeting of the Board of Governors, or of any of its committees, at which such supply, contract or other matter as is mentioned in paragraph (2) is to be considered, not take part in the consideration or vote on any question with respect to it and not be counted in the quorum present at the meeting in relation to a resolution on which that member is not entitled to vote; and

(c) withdraw, if present at a meeting of the Board of Governors, or any of its committees, at which such supply, contract or other matter as is mentioned in paragraph (2) is to be considered, where required to do so by a majority of the members of the Board of Governors or committee present at the meeting.

(2)This paragraph applies to a member who— (a) has any financial interest in—

(i) the supply of work to the institution, or the supply of goods for the purposes of the institution;

(ii) any contract or proposed contract concerning the institution; or

(iii) any other matter relating to the institution; or

(b) has any other interest of a type specified by the Board of Governors in any matter relating to the institution.

(3)This clause shall not prevent the members considering and voting upon proposals for the Board of Governors to insure them against liabilities incurred by them arising out of their office or the Board of Governors obtaining such insurance and paying the premium.

(4)Where the matter under consideration by the Board of Governors or any of its committees relates to the pay and conditions of all staff, or all staff in a particular class, a staff member—

(a) need not disclose a financial interest; and

(b) may take part in the consideration of the matter, vote on any question with respect to it and count towards the quorum present at that meeting, provided that in so doing, the staff member acts in the best interests of the Board of Governors as a whole and does not seek to represent the interests of any other person or body, but

(c) shall withdraw from the meeting if the matter is under negotiation with staff and the staff member is representing any of the staff concerned in those negotiations. The Clerk shall maintain a register of the interests of the members which have been disclosed and the register shall be made available during normal office hours at the institution to any person wishing to inspect it.

12. Meetings

(1) The Board of Governors shall meet at least four times per year, and shall hold such other meetings as may be necessary.

(2) Meeting" includes a meeting at which the members attending are present in more than one room, provided that by the use of video-conferencing facilities it is possible for every person present at the meeting to communicate with each other and also includes meetings by written resolutions and by e-mail.

(3) Subject to paragraphs 5 and 6 and to clause 13(4), all meetings shall be called by the Clerk, who shall, at least seven calendar days before the date of the meeting, send to the members of the Board of Governors written notice of the meeting and a copy of the proposed agenda.

(4) If it is proposed to consider at any meeting the remuneration, conditions of service, conduct, suspension, dismissal or retirement of the Clerk, the Chair shall, at least seven

calendar days before the date of the meeting, send to the members a copy of the agenda item concerned, together with any relevant papers.

(5) A meeting of the Board of Governors, called a "special meeting", may be called at any time by the Chair or at the request in writing of any five members.

(6) Where the Chair, or in the Chair's absence the Vice-Chair, decides that there are matters requiring urgent consideration, the written notice convening the special meeting and a copy of the proposed agenda may be given within less than seven calendar days.

(7) Every member shall act in the best interests of the Board of Governors and shall not be bound to speak or vote by mandates given by any other body or person.

(8) The Board of Governors shall determine any allowances to be paid to members of the Board of Governors or to members of its committees.

13. Quorum

(1) Meetings of the Board of Governors shall be quorate if the number of members present is at least 40% of the total number of members (including a majority of members appointed under clause 2(1)(a)), determined according to clause 3.

(2) If the number of members present for a meeting of the Board of Governors does not constitute a quorum, the meeting shall not be held.

(3) If during a meeting of the Board of Governors there ceases to be a quorum, the meeting shall be terminated at once.

(4) If a meeting cannot be held or cannot continue for lack of a quorum, the Chair may call a special meeting as soon as it is convenient.

14. Proceedings of meetings

(1) Every question to be decided at a meeting of the Board of Governors shall be decided by a majority of the votes cast by members present and entitled to vote on the question.

(2) Where, at a meeting of the Board of Governors, there is an equal division of votes on a question to be decided, the Chair of the meeting shall have a second or casting vote.

(3) A member may not vote by proxy or by way of postal vote.

(4) No resolution of the Board of Governors may be rescinded or varied at a subsequent meeting of the Board of Governors unless consideration of the rescission or variation is a specific item of business on the agenda for that meeting.

(5) Except as provided by procedures made pursuant to article 16 of the Articles of Government, a member of the Board of Governors who is a member of staff at the institution, including the Vice-Chancellor, shall withdraw—

(a) from that part of any meeting of the Board of Governors, or any of its committees, at which staff matters relating solely to that member of the staff, as distinct from staff matters relating to all members of staff or all members of staff in a particular class, are to be considered;

(b) from that part of any meeting of the Board of Governors, or any of its committees, at which that member's reappointment or the appointment of that member's successor is to be considered;

(c) from that part of any meeting of the Board of Governors, or any of its committees, at which the matter under consideration concerns the pay or conditions of service of all members of staff, or all members of staff in a particular class, where the member of staff is acting as a representative (whether or not on

behalf of a recognised trade union) of all members of staff or the class of staff (as the case may be); and

(d) if so required by a resolution of the other members present, from that part of any meeting of the Board of Governors or any of its committees, at which staff matters relating to any member of staff holding a post senior to that member's are to be considered, except those relating to the pay and conditions of all staff or all staff in a particular class.

(6) A student member who is under the age of 18 shall not vote at a meeting of the Board of Governors, or any of its committees, on any question concerning any proposal—

(a) for the expenditure of money by the Board of Governors; or

(b) under which the Board of Governors, or any members of the Board of Governors, would enter into any contract, or would incur any debt or liability, whether immediate, contingent or otherwise.

(7) Except as provided by rules made under article 18 (3) of the Articles of Government relating to appeals and representations by students in disciplinary cases, a student member shall withdraw from that part of any meeting of the Board of Governors or any of its committees, at which a student's conduct, suspension or expulsion is to be considered.

(8) In any case where the Board of Governors, or any of its committees, is to discuss staff matters relating to a member or prospective member of staff at the institution, a student member shall—

(a) take no part in the consideration or discussion of that matter and not vote on any question with respect to it; and

(b) where required to do so by a majority of the members, other than student members, of the Board of Governors or committee present at the meeting, withdraw from the meeting.

(9) The Clerk—

(a) shall withdraw from that part of any meeting of the Board of Governors, or any of its committees, at which the Clerk's remuneration, conditions of service, conduct, suspension, dismissal or retirement in the capacity of Clerk are to be considered; and

(b) where the Clerk is a member of staff at the institution, the Clerk shall withdraw in any case where a member of the Board of Governors is required to withdraw under paragraph (5).

(10) If the Clerk withdraws from a meeting, or part of a meeting, of the Board of Governors under paragraph (10), the Board of Governors shall appoint a person from among themselves to act as Clerk during this absence.

(11) If the Clerk withdraws from a meeting, or part of a meeting, of a committee of the Board of Governors, the Board of Governors shall appoint a person from among themselves to act as Clerk to the committee during this absence.

15. Minutes

(1) Written minutes of every meeting of the Board of Governors shall be prepared, and, subject to paragraph (2), at every meeting of the Board of Governors the minutes of the last meeting shall be taken as an agenda item.

(2) Paragraph (1) shall not require the minutes of the last meeting to be taken as an agenda item at a special meeting, but where they are not taken, they shall be taken as an agenda item at the next meeting which is not a special meeting.

(3) Where minutes of a meeting are taken as an agenda item and agreed to be accurate, those minutes shall be signed as a true record by the Chair of the meeting.

(4) Separate minutes shall be taken of those parts of meetings from which the staff member, the Vice-Chancellor, the student member or the Clerk have withdrawn from a meeting in accordance with clause 14(5), (6), (8), (9) or (10) and such persons shall not be entitled to see the minutes of that part of the meeting or any papers relating to it.

16. Public access to meetings

The Board of Governors shall decide any question as to whether a person should be allowed to attend any of its meetings where that person is not a member, the Clerk or the Vice-Chancellor and in making its decision, it shall give consideration to clause 17(2).

17. Publication of minutes and papers

(1)Subject to paragraph (2), the Board of Governors shall ensure that a copy of—

(a) the agenda for every meeting of the Board of Governors; and

(b) the signed minutes of every such meeting;,

shall be made available on the institution's website as soon as reasonably practicable.

(2)There shall be excluded from any item made available for inspection any material relating to—

(a) a named person employed at or proposed to be employed at the institution;

(b) a named student at, or candidate for admission to, the institution;

(c) the Clerk; or

(d) any matter which, by reason of its nature, the Board of Governors is satisfied should be dealt with on a confidential basis.

18. Copies of the Instrument of Government

A copy of this Instrument shall be given free of charge to every member of the Board of Governors and shall be available for inspection on the institution's website.

19. Change of name of the Corporation

The Corporation may change its name with the approval of the Privy Council.

20. Application of the seal

The application of the seal of the Corporation shall be authenticated by—

(a) the signature of either the Chair or of some other member authorised either generally or specially by the Board of Governors to act for that purpose; and

(b) the signature of any other member.

HARTPURY UNIVERSITY HEC
ARTICLES OF GOVERNMENT

CONTENTS

1. Interpretation of the terms used

In these Articles of Government—

(a) any reference to "the Vice-Chancellor" shall include a person acting as Vice Chancellor or any other title approved by the Board of Governors;

(b) "Academic Board" means that body referred to in Article 7 below;

(c) "the Articles" means these Articles of Government;

(d) "Chair" and "Vice-Chair" mean respectively the Chair and Vice-Chair of the Board of Governors appointed under clause 6 of the Instrument of Government;

(e) "the Clerk" has the same meaning as in the Instrument of Government;

(f) "the Corporation" has the same meaning as in the Instrument of Government;

(g) "the institution" has the same meaning as in the Instrument of Government;

(h) "OfS" Office for Students established under The Higher Education and Research Act 2017

(i) "staff member" and "student member" have the same meanings as in the Instrument of Government;

(j) "the Secretary of State" means the Secretary of State for Education*;*

(i) "senior post" means the post of Vice-Chancellor and such other senior posts as the Corporation may decide for the purposes of these Articles;

(k) "the staff" means all the staff who have a contract of employment with the institution;

(l) "the students' union" has the same meaning as in the Instrument of Government;

(m) "Vice-Chancellor" means Principal.

2. **Conduct of the institution**

(1)The institution shall be conducted in accordance with the provisions of the Instrument of Government, all requirements of law, orders, directions or regulations made by the Secretary of State or Privy Council, these Articles, any rules or bye-laws made under these Articles and any trust deed regulating the institution.

(2)The institution shall be conducted under the name Hartpury University.

3. **Responsibilities of the Board of Governors, the Vice-Chancellor and the Clerk**

(1)The Board of Governors shall be responsible for the following functions—

(a) the determination and periodic review of the educational character and mission of the institution and the oversight of its activities;

(b)publishing arrangements for obtaining the views of staff and students on the determination and periodic review of the educational character and mission of the institution and the oversight of its activities.

(c) approving the quality strategy of the institution;

(d) the effective and efficient use of resources, the solvency of the institution and safeguarding its assets;

(e) approving annual estimates of income and expenditure;

(f) the appointment, grading, suspension, dismissal and determination of the pay and conditions of service of the holders of senior posts and the Clerk, including, where the Clerk is, or is to be appointed as, a member of staff, the Clerk's appointment, grading, suspension, dismissal and determination of pay in the capacity of a member of staff; and

(g) setting a framework for the pay and conditions of service of all other staff.

(2)The Board of Governors shall procure that there shall be no disposal of any asset used by any subsidiary of the Corporation conducting further education without the approval of the board of directors of such subsidiary.

(3)Subject to the responsibilities of the Board of Governors, the Vice-Chancellor shall be the Chief Executive of the institution, and shall be responsible for the following functions-

(a) making proposals to the Board of Governors about the educational character and mission of the institution and implementing the decisions of the Board of Governors;

(b) the determination, after consultation with the Academic Board, of the institution's academic and determination of its other activities;

(c) preparing annual estimates of income and expenditure for consideration and approval by the Board of Governors, and the management of budget and resources within the estimates approved by the Board of Governors;

(d) the organisation, direction and management of the institution and leadership of the staff;

(e) the appointment, assignment, grading, appraisal, suspension, dismissal and determination, within the framework set by the Board of Governors, of the pay and conditions of service of staff, other than the holders of senior posts or the Clerk, where the Clerk is also a member of the staff; and maintaining student discipline and, within the rules and procedures provided for within these Articles, suspending or expelling students on disciplinary grounds or expelling students for academic reasons.

(4)The Clerk shall be responsible for the following functions: -

(a) advising the Board of Governors with regard to the operation of its powers;(b) advising the Board of Governors with regard to procedural matters;

(c) advising the Board of Governors with regard to the conduct of its business; and

(d) advising the Board of Governors with regard to matters of governance practice.

4. **The establishment of committees and delegation of functions generally**

(1) The Board of Governors may establish committees for any purpose or function, other than those assigned in these Articles to the Vice-Chancellor or Clerk and may delegate powers to-

(a) such committees;

(b) the Chair, or in the Chair's absence, the Vice-Chair; or (c) the Vice-Chancellor.

(2) The number of members of a committee and the terms on which they are to hold and to vacate office, shall be decided by the Board of Governors.

(3) The Board of Governors may also establish committees under collaboration arrangements made with further education institutions or maintained schools (or with both), and such joint committees shall be subject to any regulations made under section 166 of the Education and Inspections Act 2006 governing such arrangements.

(4) Any committee established by the Board of Governors, other than the committee referred to in Article 10, may include persons who are not members of the Board of Governors.

5. **The Search and Governance Committee**

(1) The Board of Governors shall establish a committee, to be known as the "Search and Governance Committee", to advise on—

(a) the appointment of members (other than as a staff or student member);and

(b) such other matters relating to membership and appointments as the Board of Governors may ask it to.

(2) The Board of Governors shall not appoint any person as a member (other than as a staff or student member) without first consulting and considering the advice of the search committee.

(3) The Board of Governors may make rules specifying the way in which the search committee is to be conducted. A copy of these rules, together with the search committee's terms of reference and its advice to the Board of Governors, other than any advice which

the Board of Governors is satisfied should be dealt with on a confidential basis, shall be published on the institution's website.

6.**The Audit Committee**

(1) The Board of Governors shall establish a committee, to be known as the "Audit Committee", to advise on matters relating to the Board of Governor's audit arrangements and systems of internal control.

The Audit Committee shall consist of at least three persons and may include members of staff at the institution with the exception of the Vice-Chancellor and any other senior post holder, and shall operate in accordance with any requirements of OfS from time to time.

7. Matters relating to Higher Education

Academic Board

(1) The Board of Governors shall establish a body to be known as the "Academic Board".

(2)The Academic Board shall be comprised of no more than 30 members, comprising the Vice-Chancellor (who shall be Chair) and such other numbers of staff and students as may from time to time be approved by the Board of Governors. The Vice-Chancellor may nominate a Deputy Chair from among the members of the Academic Board to take the chair in his or her place. The period of appointment of members and the selection or election arrangements shall be subject to the approval of the Board of Governors.

(3) The constitution of the Academic Board and its terms of reference from time to time shall be as approved by the Board of Governors.

(4) The Vice-Chancellor shall appoint a person to act as secretary to the Academic Board.

(5) Any member of the Academic Board may be reappointed provided he or she remains qualified for appointment.

(6) A member of the Academic Board appointed to fill a casual vacancy shall hold office only for the unexpired term of office of the member in whose place he or she is appointed.

(7) The Academic Board shall hold a meeting whenever necessary and in any event at least three times in every year.

(8) The Academic Board shall make rules relative to the convening of meetings and the conduct of proceedings.

(9) Subject to the provision of these Articles, to the overall responsibility of the Board of Governors, and to the responsibilities of the Vice-Chancellor, the Academic Board shall be responsible for:

(a) general issues relating to the research, scholarship, teaching and courses of higher education at the institution, including in that regard criteria for the admission of students; the appointment and removal of internal and external examiners; policies and procedures for assessment and examination of the academic performance of students; the content of the curriculum; academic standards and the validation and review of courses; the procedures for the award of qualifications and honorary academic titles; and the procedures for the expulsion of students for academic reasons. Such responsibilities shall be subject to the requirements of validating and accrediting bodies where appropriate;

(b) considering the development of the higher education academic activities of the institution and the resources needed to support them and for advising the Vice-Chancellor and the Board of Governors thereon; and

(c) advising on such other matters relating to the institution as the Board of Governors or the Vice-Chancellor may refer to the Academic Board.

(10) The Academic Board may establish such committees as it considers necessary to enable it to carry out its responsibilities provided that each establishment is first approved by the Board of Governors. The number of members of any such committee and the terms on which they are to hold and vacate office shall be determined by the Academic Board.

The Vice-Chancellor

(11) In the event of a vacancy in the position of a Vice-Chancellor the Board of Governors shall appoint a person to the role of Vice-Chancellor as an interim measure for an initial period of no more than six months, any reappointment for one or more periods of up to six months will require the prior approval of the Board of Governors.

(12) The Vice-Chancellor shall cease to be the Vice-Chancellor upon:

(a) resigning from the position of the Vice-Chancellor; or

(b) upon the designation of a successor as Vice-Chancellor; or

(c) upon loss of confidence vote by the Board of Governors or the Academic Board; or

(d) in accordance with the terms of the appointment of the Vice-Chancellor.

Closure of higher education programmes

Any proposal to withdraw a programme of study leading to an award of the institution shall be subject to the approval of the Academic Board. Before implementing such proposal, the institution must demonstrably safeguard the interests and rights of students registered on the programme and the standards of the relevant award.

8. Access to committees by non-members and publication of minutes

The Board of Governors shall ensure that:—

(e) a written statement of its policy regarding attendance at committee meetings by persons who are not committee members; and

(f) a written statement of its policy regarding the publication of minutes of committee meetings are published on the institution's website.

9. Delegable and non-delegable functions

The Board of Governors shall not delegate the following functions-

(a) the determination of the educational character and mission of the institution;

(b) the approval of the annual estimates of income and expenditure;

(g) the responsibility for ensuring the solvency of the institution and for safeguarding their assets;

(h) the appointment or dismissal of the Vice-Chancellor or holder of a senior post;

(i) the appointment or dismissal of the Clerk, (including, where the Clerk is, or is to be, appointed as a member of staff the Clerk's appointment in the capacity of a member of staff); and

(j) the modification or revocation of these Articles.10. The Board of Governors

may not delegate –

(1) (a) the consideration of the case for dismissal, and

(b) the power to determine an appeal in connection with the dismissal

of the Vice-Chancellor, the Clerk or the holder of a senior post, other than to a committee of members of the Board of Governors.

(2)The Board of Governors shall make rules specifying the way in which a committee having functions under paragraph (1) shall be established and conducted.

11. The Vice-Chancellor may delegate functions to the holder of any other senior post or any other senior manager other than any functions that have been delegated to the Vice-Chancellor by the Board of Governors.

12. **Appointment and promotion of staff**

(1)Where there is a vacancy or expected vacancy in a senior post, the Board of Governors shall—

(a) unless it resolves otherwise advertise the vacancy nationally; and(b) appoint a selection panel consisting of—

(i)at least five members of the Board of Governors including the Chair or the Vice-Chair or both, where the vacancy is for the post of Vice Chancellor ; or

(ii) the Vice-Chancellor and at least two other members of the Board of Governors, where the vacancy is for any other senior post.

(2)The members of the selection panel shall—

(a) decide on the arrangements for selecting the applicants for interview;

(b) interview the applicants; and

(c) where they consider it appropriate to do so, recommend to the Board of Governors for appointment one of the applicants they have interviewed.

(3)If the Board of Governors approves the recommendation of the selection panel, that person shall be appointed.

(4)If the members of the selection panel are unable to agree on a person to recommend to the Board of Governors, or if the Board of Governors does not approve their recommendation, the Board of Governors may make an appointment itself of a person from amongst those interviewed, or it may require the panel to repeat the steps specified in paragraph (2), with or without first re-advertising the vacancy.

(5)Where there is a vacancy in a senior post or where the holder of a senior post is temporarily absent, until that post is filled or the absent post holder returns, a member of staff-

(a) may be required to act as Vice-Chancellor or in the place of any other senior post holder; and

(b) if so required, shall have all the duties and responsibilities of the Vice Chancellor or such other senior post holder during the period of the vacancy or temporary absence.

13. The Vice-Chancellor shall have responsibility for selecting for appointment all members of staff other than – (a) senior post holders; and

(b) where the Clerk is also to be appointed as a member of staff, the Clerk in the role of a member of staff.

14.**Rules relating to the conduct of staff**

After consultation with the staff, the Board of Governors shall make rules relating to their conduct.

15. **Academic freedom**

In making rules under article 14, the Board of Governors shall have regard to the need to ensure that academic staff at the institution have freedom within the law to question and test received wisdom, and to put forward new ideas and controversial or unpopular opinions, without putting themselves at risk of losing their jobs or any privileges which they may enjoy at the institution.

16. **Grievance, suspension and disciplinary procedures**

(1) After consultation with staff, the Board of Governors shall make rules setting out

(a) grievance procedures for all staff;

(b) procedures for the suspension of all staff; and (c) disciplinary

and dismissal procedures for

(i) senior post-holders, and

(ii) staff other than senior post-holders and such procedures shall be subject to the provisions of Articles 3(1)(e), 3(2)(e), 9(d), 9(e), 10(1) and 17.

(2) Any rules made under paragraph (1)(b) shall include provision that where a person has been suspended without pay, any appeal against such suspension shall be heard and action taken in a timely manner.

(3) Any rules made under paragraph (1)(c)(i) shall include provision that where the Board of Governors considers that it may be appropriate to dismiss a person, a preliminary investigation shall be conducted to examine and determine the case for dismissal.

17. **Suspension and dismissal of the Clerk**

(1) Where the Clerk is also a member of staff at the institution, the Clerk is to be treated as a senior post holder for the purposes of article 16(c).

(2) Where the Clerk is suspended or dismissed under article 16, that suspension or dismissal shall not affect the position of the Clerk in the separate role of Clerk to the Board of Governors.

18. **Students**

(1) Any students' union shall conduct and manage its own affairs and funds in accordance with a constitution approved by the Board of Governors and no amendment to, or rescission of, that constitution, in part or in whole, shall be valid unless approved by the Board of Governors.

(2) The students' union shall present audited accounts annually to the Board of Governors.

(3) After consultation with representatives of the students, the Board of Governors shall make rules concerning the conduct of students, including procedures for their suspension and expulsion (including expulsion for an unsatisfactory standard of work or other academic reason).

19. **Financial matters**

The Board of Governors shall set the policy by which the tuition and other fees payable to it are determined, subject to any terms and conditions attached to grants, loans or other payments paid or made by the Office of Students .

20. **Co-operation with OfS**

The Board of Governors shall co-operate with any person who has been authorised by the Office of Students to audit any returns of numbers of students or claims for financial assistance and shall give any such person access to any documents or records held by the Board of Governors, including computer records.

21.**Internal audit**

(1) The Board of Governors shall, at such times as it considers appropriate, examine and evaluate its systems of internal financial and other control to ensure that they contribute to the proper, economic, efficient and effective use of the Board of Governor's resources.

(2) The Board of Governors may arrange for the examination and evaluation mentioned in paragraph (1) to be carried out on its behalf by internal auditors.

(3) The Board of Governors shall not appoint persons as internal auditors to carry out the activities referred to in paragraph (1) if those persons are already appointed as external auditors under article 22.

22. **Accounts and audit of accounts**

(1)The Board of Governors shall

(a) keep proper accounts and proper records in relation to the accounts; and(b)

prepare a statement of accounts for each financial year of the institution.

(2)The statement shall—

(a) give a true and fair account of the state of the institution's affairs at the end of the financial year and of its income and expenditure in the financial year; and

(b) comply with any directions given by the Office of Students as to the information to be contained in it, the manner in which the information is to be presented, the methods and principles according to which it is to be prepared and the time and manner of publication.

(3)The accounts and the statement of accounts shall be audited by external auditors appointed by the Board of Governors in respect of each financial year.

(4)The Board of Governors shall not appoint persons as external auditors in respect of any financial year if those persons are already appointed as internal auditors under article 21.

(5)Auditors shall be appointed and audit work conducted in accordance with any requirements of OfS.

(6)The "financial year" means the first financial year and, except as provided for in paragraph (8), each successive period of twelve months.

(7)The "first financial year" means the period from the date the Corporation was established up to the second 31st July following that date, or up to some other date which has been chosen by the Board of Governors with OfS approval.

(8)If the institution is dissolved—

(a) the last financial year shall end on the date of dissolution; and

(b) the Board of Governors may decide, with OfS approval, that what would otherwise be the last two financial years, shall be a single financial year for the purpose of this article.

23. **Rules and bye-laws**

The Board of Governors shall have the power to make rules and bye-laws relating to the government and conduct of the institution and these rules and bye-laws shall be subject to the provisions of the Instrument of Government and these Articles.

24. **Copies of Articles of Government and rules and bye-laws**

A copy of these Articles, and of any rules and bye-laws, shall be given free of charge to every member of the Board of Governors and shall be available for inspection at the institution upon the institution's website.

25. **Modification or replacement of the Instrument and Articles of Government**

(1) subject to paragraph(2), and the prior approval of the Privy Council in accordance with the Act, the Board of Governors may by resolution of the members modify or replace its instrument and articles of government, after consultation with any other persons who, in the Board of Governors view, are likely to be affected by the proposed changes.

(2) The Board of Governors shall not make changes to the instrument and articles of government that would result in the body ceasing to be a charity.

26. **Dissolution of the Corporation**

(1) The Board of Governors may by resolution dissolve the Corporation and provide for the transfer of its property, rights and liabilities.

(2) The Board of Governors shall ensure that a copy of the draft resolution to dissolve the Corporation on a specified date shall be published at least one month before the proposed date of such resolution.

27. **Administrative Arrangements**

27(1) Means of communication to be used

(a)Subject to the Articles, anything sent or supplied by or to the Corporation under the Articles may be sent or supplied in any way in which the Companies Act 2006 provides for documents or information which are authorised or required by any provision of that Companies Act to be sent or supplied by or to the Corporation.

(b) Subject to the Articles, any notice or document to be sent or supplied to a member of the Board of Governors in connection with the taking of decisions by Board of Governors may also be sent or supplied by the means by which that person has asked to be sent or supplied with such notices or documents for the time being.

(c) A member of the Board of Governors may agree with the Corporation that notices or documents sent to that person in a particular way are to be deemed to have been received within a specified time of their being sent, and for the specified time to be less than 48 hours.

27(2) When a communication from the Corporation is deemed received

(a) Any document or information, if sent by first class post, shall be deemed to have been received on the day following that on which the envelope containing it is put into the post, or, if sent by second class post, shall be deemed to have been received on the second day following that on which the envelope containing it is put into the post and in proving that a document or information has been received it shall be sufficient to prove that the letter, envelope or wrapper containing the document or information was properly addressed, prepaid and put into the post.

(b) Any document or information not sent by post but left at a registered address or address at which a document or information may be received shall be deemed to have been received on the day it was so left.

(c) Any document or information, if sent or supplied by electronic means, shall be deemed to have been received on the day on which the document or information was sent or supplied by or on behalf of the Corporation.

(d) If the Corporation receives a delivery failure notification following a communication by electronic means in accordance with Article 27(2)(c), the Corporation shall send or supply the document or information in hard copy or electronic form (but not by electronic means) to the governor either personally or by post addressed to the person at his or her registered address or by leaving it at that address. This shall not affect when the document or information was deemed to be received in accordance with Article 27 (2)(c).

27(3) Provision for employees on cessation of operations

The Board of Governors may decide to make provision for the benefit of persons employed or formerly employed by the Corporation or any of its subsidiaries (other than as a member of the Board of Governors or former member thereof) in connection with the cessation or transfer to any person of the whole or part of the undertaking of the Corporation or that subsidiary.

28. GOVERNORS' INDEMNITY AND INSURANCE

Indemnity

(1) Subject to Article 28 (5), a relevant member of the Board of Governors may be indemnified out of the Corporation's assets against:

(a) any liability incurred by that person in connection with acting as a member of the Board of Governors otherwise than in respect of any negligence, default, breach of duty or breach of trust by that person in relation to the Corporation.

(b) any liability incurred by that person in connection with the activities of the Corporation in its capacity as a trustee of an occupational pension scheme (as defined in section 235(6) of the Companies Act);

(c)any other liability incurred by that person as an officer of the Corporation.

(2)The Corporation may fund the expenditure of a relevant member of the Board of Governors for any purpose permitted under the Companies Act and may do anything to enable such relevant person to avoid incurring such expenditure as provided in the Companies Act.

(3) No relevant member of the Board of Governors shall be accountable to the Corporation for any benefit provided pursuant to this article and the receipt of any such benefit shall not disqualify any person from being or becoming a member of the Board of Governors.

(4) The powers given by this article shall not limit any general powers of the Corporation to grant indemnities, purchase and maintain insurance or provide funds (whether by way of loan or otherwise) to any person in connection with any legal or regulatory proceedings or applications for relief.

(5) This article does not authorise any indemnity which would be prohibited or rendered void by any provision of the Companies Act or by any other provision of law or any provision of charity law for so long as the Corporation is a charity.

(6) In this article and in **Article 28(7)** a relevant member of the Board of Governors means any current or former member thereof.

Insurance

(7) The Board of Governors may decide to purchase and maintain insurance, at the expense of the Corporation, for the benefit of any relevant member of the Board of Governors in respect of any relevant loss which insurance shall whilst the Corporation be a charity comply with all applicable charities law.

(8) In Article 28(7) a **relevant loss** means any loss or liability which has been or may be incurred by a relevant governor in connection with that member of the Board of Governor's duties or powers in relation to the Corporation, any associated company or any pension fund or employees' share scheme of any associated company.

Appendix 2.9: Form for the Declaration of Individual Circumstances

Declaration of Individual Staff Circumstances

This document is being sent to all Category A staff whose outputs are eligible for submission to REF2021 (see 'Guidance on submissions', paragraphs 117-122). As part of the University'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 submitted to REF without the minimum requirement of one output 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 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 heath, 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 these circumstances, you are requested to complete the attached form. Further information can be found 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 the University 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

Returned forms will be sent to Human Resources. The information provided will be shared only with the Chief People Officer and the PVC Education, Research and Knowledge Exchange (The PVC ERKE chairs the REF Steering Group and will provide that Group only with details that relate to the output requirements. No names or personal details will be shared with the Group. If you have given your permission to do so (see permissions at the end of the attached form) the information will be shared with your Head of Department. This will only be used to assist in making reasonable adjustments to expectations. Feedback on this process will be provided to you by the Dean of Research and Knowledge Exchange, and where appropriate (and only if you have given your permissions to share the information) the Head of Department.

In the event that Hartpury decides to apply to the funding bodies for either form of reduction of outputs (removal of 'minimum of one' requirement or 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.

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

The University 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 partner to provide the updated information.

To submit this form you should send directly to Human Resources hr@hartpury.ac.uk

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
Early Career Researcher (started career as an independent researcher on or after 1 August 2016). *Date you became an early career researcher.*	Click here to enter a date.
Career break or secondment outside of the HE sector. *Dates and durations in months.*	Click here to enter dates and durations.
Family-related leave; • statutory maternity leave • statutory adoption leave • Additional paternity or adoption leave or shared parental leave lasting for four months or more. *For each period of leave, state the nature of the leave taken and the dates and durations in months.*	Click here to enter dates and durations.
Disability (including chronic conditions) *To include: Nature / name of condition, periods of absence from work, and periods at work when unable to research productively. Total duration in months.*	Click here to enter text.
Mental health condition *To include: Nature / name of condition, periods of absence from work, and periods at work when unable to research productively. Total duration in months.*	Click here to enter text.

Ill health or injury *To include: Nature / name of condition, periods of absence from work, and periods at work when unable to research productively. Total duration in months.*	Click here to enter text.
Constraints relating to family leave that fall outside of standard allowance *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.*	Click here to enter text.
Caring responsibilities *To include: Nature of responsibility, periods of absence from work, and periods at work when unable to research productively. Total duration in months.*	Click here to enter text.
Gender reassignment *To include: periods of absence from work, and periods at work when unable to research productively. Total duration in months.*	Click here to enter text.
Any other exceptional reasons e.g. bereavement. *To include: brief explanation of reason, periods of absence from work, and periods at work when unable to research productively. Total duration in months.*	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 Human Resources and the Dean of Research and Knowledge Exchange.
- 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. (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