

Policy Management Framework

Version Control

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| 9. Date of Equality Impact Assessment: | 01-MAY-2018 |
| 10. Equality Impact Assessment Reference Number: | EIA – 25892 |
| 11. Does this policy apply to LSTM Group (LSTM and subsidiaries?) | Yes |
| 12. Add document to external LSTM website? | Yes |

Always view the current version of the document via the Knowledge Exchange Policy Hub.

Modifications from previous version of document

| Version | Date of issue | Details of modification |
|---------|---------------|---|
| 0.8 | 04-APRIL-2018 | Transferred to new policy template. |
| 1.0 | 01-MAY-2018 | EIA completed. |
| 1.1 | 20-NOV-2020 | Transferred to updated accessible policy template. |
| 1.2 | 04-FEB-2021 | Updates to reflect document applies to LSTM Group. Updates to section 3 on Equality Impact Assessments incorporating comments from Inclusion, Diversity and Engagement Manager. |
| 1.3 | | Update to title. Changes to wording in paragraph 1.1, 2.2, 2.3 moved to 1.1, Change from corporate governance documents to policies / policy. Additions to sections 3 and 4 to reflect changes to the approval route and responsibilities for delegated authority to committees for policies as directed by Management Committee representatives. |
| 1.4 | MAY 2021 | Minor updates to wording in section 4 following consultation with Inclusion, Diversity and Engagement Manager. |
| | JUNE 2021 | Amendments to wording in section 4 and 5 about updated approval routes. Consultation with Head of Information Services, Group Legal and Intellectual Property Advisor, Head of Strategic Planning and Governance. |
| 2.0 | 26-AUG-2021 | Issued |

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1 Scope

- 1.1 The purpose of this framework is to ensure that there is a standard document control process for the creation, approval, dissemination and review of all LSTM's corporate governance documents.
- 1.2 This framework applies to all regulations, policies and codes of practice produced as a part of LSTM's business practices. Categories and definitions of corporate governance documents can be found in the [Document Definition Pyramid guide](#). Other, accompanying material such as guidance, standard operating procedures, forms or links to externally produced documents are excluded. The term 'policy' has been used in this framework to describe all these documents for ease of understanding.

This document is a minimum requirement which should be adhered to by all LSTM departments. However, it is recognised that some areas will require more in-depth and robust procedures e.g. around laboratory safety, clinical trials and they will have additional standards as required by audit and regulatory authorities in those areas.

- 1.3 Advice and interpretation of this framework can be found in [Policy Management Guidance](#). (Currently under review).

2 Background and context

- 2.1 As an independent HEI, LSTM is required to adhere to the UK regulatory framework for Health and Safety, information governance, equality and diversity, human tissue legislation etc. In addition, LSTM must provide assurance to external bodies such as funders that we have robust procedures which are embedded in the organisation and fully understood by all staff. This may require the production of policies, codes of practice which are needed to disseminate these practices throughout the organisation.
- 2.2 A co-ordinated approach to the management of our corporate governance documents will enable us to meet LSTM's strategic objectives in Enabling Strategy 6 of the LSTM Strategic Plan 2017 – 2023, in which 'we aim to develop a knowledge management culture in LSTM which promotes information and data as key assets and information skills as fundamental for its workforce.'¹

¹ LSTM, Strategic Plan 2017 – 2023,
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Management of our policies also helps to avoid confusion, provides clarity as to the target audience and assures our auditors that relevant staff have a clear understanding of their responsibilities.

3. Responsibilities

3.1 Originators / authors of policies will:

3.1.1 Ensure that all policies and related material assigned to them are updated per an agreed schedule;

3.1.2 Will determine the appropriate review period for their policies. This will normally be every three years . It is recognised that updates to documents may be needed before the end of the agreed schedule;

3.1.3 Conduct appropriate breadth of [consultation](#) with stakeholders that is proportionate to the policy prior to submitting the document for approval. This includes undertaking an Equality Impact Assessment. See the [Policy Management Guidance](#) for further information on consultation. For policies applicable to LSTM Group, ensure that representatives from subsidiaries are included in the consultation stage;

3.1.4 Ensure that all policies have been through the approval process as outlined below and further in the Policy Management Guidance;

3.1.5 Ensure that new and substantive changes to governance documents regulations, policies and codes of practice undergo an Equality Impact Assessment (EIA) outlined in the Policy Management Guidance.

3.1.6 Ensure that their policies are disseminated through appropriate channels, including the [Policy Hub](#) and the LSTM website.

3.2 LSTM Management Committee will:

3.2.1 Have responsibility for final sign off for new and substantive revisions of policies.

3.2.2 Delegate authority to approving committees for reviewing minor revisions and approving policies on their behalf. See summary scheme of delegation when published.

3.3 Information Services will:

3.3.1 Maintain a database of governance documents which will be known as the "[Policy Hub](#)";

3.3.2 Issue new document reference numbers to document originators

on request;

3.3.3 Issue review reminders to document originators;

3.3.4 In the event, that policies are not updated, encourage originators to update the document.

3.3.5 Have the authority to co-ordinate the management of policies.

3.3.6 Provide quarterly reports to Management Committee on policies due for review and overdue review.

3.4 Approving committees will:

3.4.1 Take responsibility for reviewing policies and ensure that appropriate consultation has been carried out before policy approval.

3.4.2 Where a policy is discussed and / or approved, the minutes of the relevant meeting should clearly state this and provide a report to the appropriate reporting committee.

3.4.3 Seek consultation with other committees where consultation exceeds the scope or expertise of committee members.

3.5 IT Services will:

3.5.1 Provide an internal intranet, currently, the “Knowledge Exchange” which will be the portal for access to the Policy Hub.

3.6 Line Managers will:

3.6.1 Read and adhere to policies and procedures and ensure that their groups or teams comply with such policies as required.

3.7 LSTM staff will:

3.7.1 Read and adhere to policies and procedures as prescribed by their job description and role.

4. Definitions

- i. Corporate governance documents – the subset of documents which establish expectations for an organisation and provide a consistent baseline for departments to follow in conducting day to day business. They include policies, codes of practice and regulations.

- ii. Originator – the individual responsible for ensuring that the governance document exists. The originator may or may not be the author of the document.
- iii. Approving committee - is a group appointed for a specific function by a larger group to deliberate on and approve policy.
- iv. Policy Hub – centralised online storage area for LSTM's corporate governance documents.
- v. LSTM Group – LSTM and subsidiaries, including Well-Travelled and IVCC.
- vi. Major / substantive change to a policy – a change that alters the intent, meaning or focus of the document.
- vii. Minor changes to a policy – amendments that include editing such as changes to format, replacing hyperlinks and updating job titles.

5. Principles

5.1 Justification for a new / revised policy may include:

An external driver such as an update to or new legislation, a change in responsibility, for clarity or to broaden the scope of the document or the regular review of documents.

5.2 Document review will:

Determine if the policy is still needed; determine whether the purpose and goal of the policy are still being met: assess if changes are required to improve the effectiveness or clarity of the document; ensure that appropriate training, monitoring, and ongoing review of the policy occurs.

5.3 Consultation

5.3.1 Appropriate [consultation](#) with stakeholders is the responsibility of the document owner. Full guidance on consultation can be found in the Policy Management Guidance.

5.3.2 Equality Impact Assessments must be completed as part of the consultation process and before policy approval and sign off.

5.4 New documents / substantive changes

5.4.1 Major or substantive revisions to an existing policy are subject to the same development and approval route as new policies and must be signed off by Management Committee. See the Policy Management Guidance for details.

5.4.2 A substantive change to a policy is one that changes the intent, meaning or focus of the document.

5.4.3 An updated Equality Impact Assessment may be required for major changes to existing policies.

5.4.4 Amendments to policies must be recorded in the document control area of the template entitled 'Modifications from previous version' and must state where changes have been made (quoting the section and or paragraph number) and date changes were made,

5.5 Review - minor changes

5.5.1 Minor changes are those that do not change the substance of a policy. These may include updated links, changes to references, to other supporting documents or updates to jobtitles.

5.5.2 Amendments to policies must be recorded in the document control area of the template entitled 'Modifications from previous version' and must state where changes have been made (quoting the section and or paragraph number) and the date.

5.6. Approval

5.6.1 New and substantive changes to policies should be sent to the appropriate approving committee for scrutiny and approval and then to Management Committee for final sign off.

5.6.2 Reviewed and minor changes to policies may be reviewed and signed off at the appropriate approving committee and reported to Management Committee via the committee minutes. See the scheme of delegation for guidance. (Once published)

5.6.3 Policies that have been reviewed (with minor amendments) and have not been seen by Management Committee for more than five years should be submitted to Management Committee for sign off.

5.7 Publishing and communication

5.7.1 Policies will be made available on LSTM's external website unless there are clear exceptions to this.

6. Format, structure and presentation

6.1 Staff must use the corporate style, as per the LSTM [Policy template](#) noting such aspects as font, structure and numbering. In depth guidance for policy writers can be found in the [Policy Management Guidance](#).

- 6.2 Any minor or substantive changes to governance documents should be submitted with tracked changes as well as a clean version to the approving committee.

7. Equality and Diversity

LSTM is committed to promoting equality of opportunity, combatting unlawful discrimination and promoting good community relations. We will not tolerate any form of unlawful discrimination or behaviour that undermines this commitment and is contrary to our equality policy.

8. Further information and related documents

- 8.1.1 [Policy Management Guidance](#) (currently under review)
- 8.1.2 [Version Control: A Good Practice Guide](#)
- 8.1.3 [Document definition pyramid](#)
- 8.1.4 [Policy Development and Approval Process Flowchart](#)
- 8.1.5 [Policy Management Glossary](#)
- 8.1.6 [Equality and Diversity and EIA guidance](#)
- 8.1.7 [Accessibility guidance](#)
- 8.1.8 [LSTM committee pages](#)
- 8.1.9 [Policy template](#)

9. Useful contacts

Policy development - [Information Services](#) - Library Licensing and Compliance Officer

IVCC policy sub-group – Group Legal and Intellectual Property Advisor