



# **The Metanoia Institute**

## **Policy Development and Review Policy**

### **2025**

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**Principal Authoring Department:**  
Quality

**Approved by:**  
Academic Board

**Date approved:**

## Version Control

|                                                  |                                             |                        |
|--------------------------------------------------|---------------------------------------------|------------------------|
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## Contents

| Section |                                         | Page |
|---------|-----------------------------------------|------|
| 1.      | Introduction                            | 4    |
| 2.      | Policy Framework                        | 4    |
| 3.      | What to Consider for Policy Development | 6    |
| 4.      | Approval Routes                         | 8    |
| 5.      | Implementation                          | 9    |
| 6.      | Record keeping                          | 9    |
| 7.      | Process                                 | 9    |
|         | <b>Appendices</b>                       |      |
| 1.      | Policy template                         | 11   |
| 2.      | Equality Assessment Tool                | 13   |
| 3.      | Policy Control information              | 15   |

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**Document Control dates:**

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This Document works in collaboration with the following policies/framework(s):

- Governance Handbook
- Student Engagement with Governance Policy
- Student Representative Framework
- Programme Design and Approval Policy
- Quality Assurance Manual

**Acronyms:**

|      |                     |
|------|---------------------|
| AB   | Academic Board      |
| BoT  | Board of Trustees   |
| EdC  | Education Committee |
| ExC  | Executive Committee |
| MI   | Metanoia Institute  |
| ToRs | Terms of Reference  |

## **Section 1: Introduction**

### **1.1 Purpose**

The purpose of policy development is to establish a clear and consistent framework for decision-making, ensuring Metanoia's operations align with its strategic goals, values, regulatory compliance and legal obligations. Well-defined policies guide the Metanoia community, promoting efficiency, transparency, and inclusivity.

The Policy Framework aims to guide all staff involved in policy development, including approval, publication and review. This will ensure Metanoia Institute has consistent standards for relevant and up-to-date governance documentation.

### **1.2 Scope**

The Framework should be applied to all policy documents which are developed or reviewed.

It is important to keep all policies under review to ensure that they remain fit for purpose and legally compliant. Normally a three-year review period is sufficient. In some cases, review may be required earlier if there is a legislative or regulatory requirement or significant change and, in some cases, every five years is sufficient. In the preparation and review of a policy, the reviewer should consider sector practice as well as external requirements.

### **1.3 Roles and Responsibilities**

Managers of relevant areas are responsible for identifying the need for a particular policy to help the Institute meet its strategic objectives and/or ensure legal and regulatory compliance. All staff who have responsibility for developing policy documents should be aware of the Framework and ensure that their policies comply with the guidelines.

It is the responsibility of the policy owner to set the review date (which must be a maximum of five years) and complete the review at the appropriate time. A reviewed policy will have a new version number.

## **Section 2: Policy framework**

The Framework consists of the following:

- Definitions
- Policy Development Guide
- Review Process
- Approval Routes
- Storage

### **2.1 Definitions**

Below are proposed definitions of official documents based on those currently used both within the Institute and across the sector.

|                                  |                                                                                                                                                                                         |
|----------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Strategy</b>                  | Statement that sets out how Metanoia will manage its resources and meet the aims in the Institute's Strategy.                                                                           |
| <b>Regulation</b>                | Sets out the Institute rule or standards governing an area. Often, but not exclusively, academic rather than administrative.                                                            |
| <b>Policy</b>                    | Sets out the direction or guiding principles governing an area. Often, but not exclusively, administrative rather than academic.                                                        |
| <b>Procedure/Protocol</b>        | Description (involving linked action steps) of how to do something, to ensure consistency of practice. Often supports a Regulation or Policy. Developed with the user/customer in mind. |
| <b>Code of Practice</b>          | Advisory document which supports a policy/regulation and normally includes formal expectations of behaviour and/or good practice.                                                       |
| <b>Guidelines/Guidance/Guide</b> | Document giving detailed practical/operational advice on a particular area.                                                                                                             |

## 2.2 Policy document template

2.2.1 Every policy must have a named post-holder as owner. The owner will be responsible for the policy's development, dissemination, maintenance and review.

2.2.2 A template, appendix 1, also located on the Quality SharePoint, is available to assist staff with the development of a policy. This is not intended to be prescriptive but to assist when drawing up new policies and to support a consistent approach to the presentation of documentation.

Generally, a policy should include:

- Front page: Metanoia logo, Principal Authoring Department, Approved by and Date Approved.
- Second page: version control grid and contents page
- Third page: author/department contact information, document control dates and acronyms.
- An introductory section to include:
  - Purpose of Policy: the aims and objectives
  - Scope: to whom the policy applies

- Roles and responsibilities: indicating which job roles and members of staff have responsibility for which parts of the policy
  - A main body, sub-sectioned with all sections, paragraphs numbered and page numbers at the bottom of each page.
- 2.2.3 Should end with a section on reporting and review, which outlines any formal reports made through the Committee Structure annually.

#### 2.2.4 Writing style for policies

- Plain English, concise and accuracy checked
- Not to include information that may be quickly outdated (e.g. names, use designation instead)
- If acronyms are used, the full name should be used in the first instance with the acronym in brackets
- In Arial font size 11, to conform to accessible document guidelines

### **Section 3: What to Consider for Policy Development**

#### 3.1 Consider any equality impact (Equality impact tool, appendix 2)

- When developing a new policy or reviewing a current one (only relevant for significant policies), it is important to ensure that it is fair, transparent, legal and consistently applied. It is also important to ensure that the proposed policy does not have an inadvertent negative impact on individuals by them being part of a protected group under the Equality Act (age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation). The policy owner should utilise the equality tool template, appendix 2. A copy of the analysis should be retained until superseded at the next review point.

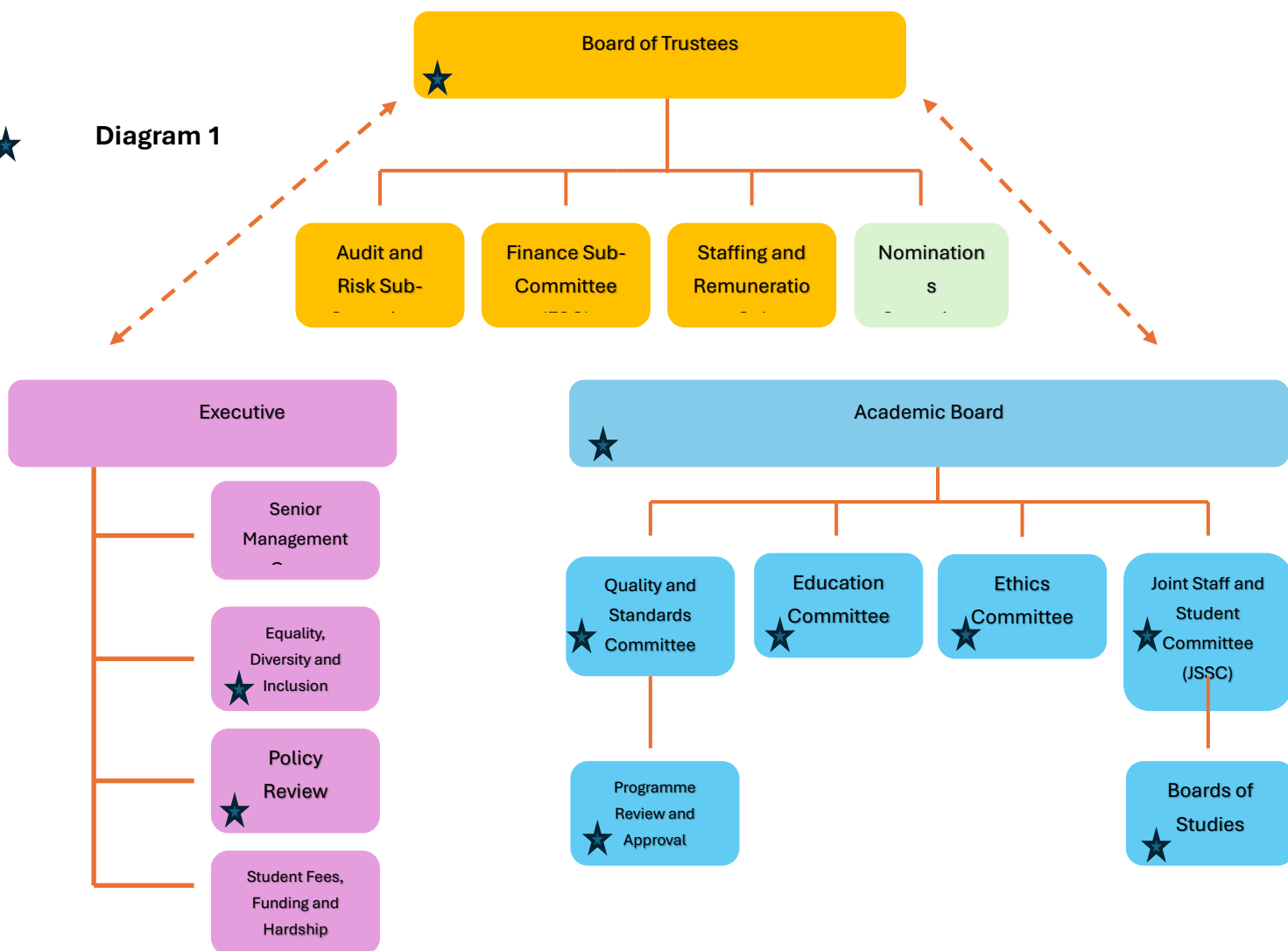
#### 3.2 Consultation

- Policy development/review is an active process, scaffolding the Quality Assurance and Governance Frameworks, refer to the Quality Assurance Manual, located on the Quality SharePoint, and the Governance Handbook, located on the Governance SharePoint. All policies must go through the process of consultation and approval, which is a part of Quality Assurance and Governance.
- Governance is a process of consultation and approval through the governance structure, refer to diagram 1. The consultation aspect is achieved by consulting committee members who are representatives of the Metanoia community. The structure consists of several committees, as demonstrated below in diagram 1. Each committee consists of staff and student members, each member having the opportunity to comment and vote for approval, or not, on all matters and documents presented at the meetings.

If at any point you wish to raise a query, contact either Governance, [governance@metanoia.ac.uk](mailto:governance@metanoia.ac.uk) or Quality, [quality@metanoia.ac.uk](mailto:quality@metanoia.ac.uk)



Diagram 1



#### Section 4: Approval Routes

Before a policy can be implemented and published, it must go through an approval process.

- Each committee is required at the first meeting of the academic year to set a schedule of work for policy development or review of existing policies. The schedule is open to suggestions for the development of new policies. The committee Servicing Officer is responsible for the implementation of the schedule.
- Authors should refer to the terms of reference (ToRs) of the Institute's Committees, referenced in the Governance Handbook, available on the Governance SharePoint, to help with planning approval routes.

If you are in any doubt, advice should be sought from the Head of Governance, [governance@metanoia.ac.uk](mailto:governance@metanoia.ac.uk).

## 4.1 Approval Governance Structure

The governance structure consists of several committees and sub-committees, each designed through their terms of reference (ToRs) to focus on specific areas of responsibility, which are detailed in the Metanoia Governance Handbook, located on the Governance SharePoint.

There are two branches of responsibility: Organisational Governance and Academic Governance. Quality Assurance largely falls under the remit of the Academic Governance branch, though quality assurance processes often include a reference to Organisational Governance when strategic decisions are required.

The Quality Assurance's parent committee is the Academic Board (AB), which reports to the Board of Trustees (BoT). The Executive Committee (ExC) reports directly to the Board of Trustees. Each of the committees and sub-committees are responsible for reviewing its terms of reference at the first meeting of each academic year. Proposed amendments to the terms of reference are required to be approved by their parent committee; for Quality Assurance, this will be the Academic Board and for the Executive, the Board of Trustees.

Quality Assurance is a framework that feeds through the Metanoia Governance structure. The system incorporates clear parameters of responsibility and accountability through a collective committee approach that includes the Metanoia community, i.e. staff and students.

All policies will go through the governance structure for consultation and approval to seek approval. If you develop/review a policy and you are not a member of a specific committee where the document is to be presented, then you will be asked to attend the meeting at a designated time by the committee Servicing Officer.

If you have any queries, contact Governance, [governance@metanoia.ac.uk](mailto:governance@metanoia.ac.uk) or Quality, [quality@metanoia.ac.uk](mailto:quality@metanoia.ac.uk)

## 4.2 Policy Review Group

The purpose of the Policy Review Group (PRG) is to review, assess, and recommend updates to the Metanoia policies and procedures across both academic and operational branches of the institutional governance structure. The group ensures that institutional policies remain compliant with current legal, regulatory, and sector standards and reflect best practices. It reports to the Executive Committee, which in turn reports to the Board of Trustees.

- 4.2.1. Each committee will provide a schedule of work for policy development or review in the first quarter of the academic year to the PRG and an end-of-year report to include policy status and potential/new developments.

## Section 5: Implementation

The committee Servicing Officer is responsible for sharing the final version of the approved policy with Quality, who will make arrangements for the effective communication of the policy to the relevant target audience.

## Section 6: Record keeping

To improve the accessibility of the Institute's policy documents for staff and other interested parties, all policies will be linked from one central location on the website and available on the Quality SharePoint.

If you have any queries, please contact Quality, [quality@metanoia.ac.uk](mailto:quality@metanoia.ac.uk)



## **Section 7: Process**

7.1 Each committee is required at the first meeting of the academic year to set a schedule of work for policy development or review of existing policies. The committee Servicing Officer is responsible for the implementation of the schedule.

### **7.2 Process for committee policy development and review**

The relevant committee Servicing Officer will initiate the following process:

1. Each committee will receive at the first meeting of the academic year a copy of the policy schedule to set review dates for each policy for implementation the following academic year.
2. The document author will receive a prompt three months prior to the policy due date from the relevant committee Servicing Officer. The prompt will be sent as a Microsoft calendar appointment.
3. The relevant committee Servicing Officer to ensure the submitted policy incorporates the relevant back sheet for process information, a list of significant amendments and the amendments are highlighted within the document, for ease of reference, in readiness for consideration by the relevant committee.
4. The calendar reminder will include:
  - the policy or template for new development;
  - a list of the committees the document will be presented to and for what purpose (information/ recommended approval/approval);
  - the date of each committee meeting;
  - the deadline for submission;
  - the expected end-date of the approval process; and
  - any other information considered helpful.
5. The relevant committee Servicing Officer will send a further reminder 6 weeks before the deadline.
6. The relevant committee Servicing Officer will provide support and relevant information to the author of the document throughout the approval process.
7. The Policy approval aspect of the process is complete when it has received final approval. What this means: If the membership of the committee recommends amendments, the committee must have sight of the amendments to sign off the amendments before their publication
8. The relevant committee Servicing Officer will forward copies of the approved policy with a list of amendments, if applicable, to the Quality Support and Standards Manager, who will code the document and deposit it into the central repository.

9. The Quality Standards and Support Manager (QSSM) will be responsible for ensuring the relevant teams are made aware of the updated/new policy. An email will be circulated to the Associate Directors, Heads of Programme, Registrar, Academic Co-ordinators and Head of Marketing and Communications for upload onto the website under the relevant academic year and any other relevant staff. The email will indicate when the policy comes into force.
10. The Quality Standards and Support Manager will deposit the definitive policy in the central governance repository located on the governance SharePoint.

To locate existing policies, refer to the Quality SharePoint or the policy section of the Metanoia website.

If you have any queries, contact Quality ([quality@metanoia.ac.uk](mailto:quality@metanoia.ac.uk)).



# The Metanoia Institute

[Title]

[Year]

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**Principal Authoring Department:**

**Approved by:**  
Academic Board

**Date approved:**

### ***Version Control***

|                                                  |                                        |                     |
|--------------------------------------------------|----------------------------------------|---------------------|
| <b>Document title: Dual Relationships Policy</b> |                                        | <b>No of pages:</b> |
| <b>Version Number: 1</b>                         | <b>Date first published: -</b>         |                     |
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### **Contents**

| <b>Section</b> |  | <b>Page</b> |
|----------------|--|-------------|
| 1.             |  |             |
| 2.             |  |             |
| 3.             |  |             |
| 4.             |  |             |
| 5.             |  |             |
| 6.             |  |             |
| 7.             |  |             |
| 8.             |  |             |
| 9.             |  |             |
| 10.            |  |             |
| 11.            |  |             |
| 12.            |  |             |
| 13.            |  |             |
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**Contact details of author/department:**

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This Document works in collaboration with the following policies/framework(s): **IF ANY**

**Acronyms:**

**Introduction:**

**Purpose:**

**Scope:**

**Roles and Responsibilities:**

**Main body content:**

## **POLICY BACK COVER**

**Section 1 - to be completed by policy proposer and forwarded to Committee**

**Servicing Officer.**

|                                                                                                                                                                           |                                  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| <b>Policy Title:</b>                                                                                                                                                      | Click or tap here to enter text. |
| <b>Author/Owner:</b>                                                                                                                                                      | Click or tap here to enter text. |
| <b>Rationale:</b><br><i>Outline the purpose of the policy, and its scope e.g. credit-bearing provision</i>                                                                | Click or tap here to enter text. |
| <b>Consultation undertaken:</b><br><i>List all groups and/or committees where consultation was undertaken e.g. students, administration, external advisor, EdC,, etc.</i> |                                  |
| <b>Resource implication:</b><br><i>Outline the potential financial, human and technological resource implication of the policy</i>                                        | Click or tap here to enter text. |

## DOCUMENT CONTROL

**Section 2 - to be completed by receiving committee.**

|                       |  |
|-----------------------|--|
| Choose an item.       |  |
| <b>Circulated to:</b> |  |

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|------------------|--|---------------------------|--|
| <b>Approved:</b> |  | <b>Date for adoption:</b> |  |
|------------------|--|---------------------------|--|

|                                       |  |                         |  |
|---------------------------------------|--|-------------------------|--|
| <b>Version and document<br/>Code:</b> |  | <b>Date for review:</b> |  |
|---------------------------------------|--|-------------------------|--|

**END OF TEMPALTE**

## Appendix 2: Equality Assessment Tool

Policy/practice assessed for EI: Evidence used/obtained:

Date EIA conducted:

Completed by:

| Question                                                                                                                                                                                                                                                                                           | Comments | Ownership |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|-----------|
| Is the purpose of the policy or practice clear?                                                                                                                                                                                                                                                    |          |           |
| Have all issues relating to equality been identified within the practice or policy?                                                                                                                                                                                                                |          |           |
| How will the policy or practice be applied consistently throughout MI?                                                                                                                                                                                                                             |          |           |
| <p>Will the policy or practice have any significant impact on protected characteristics; such as (but not limited to or hierarchical):</p> <p>Gender, BAME; Age of staff/students/clients;<br/> Staff/students/clients with disabilities; Part-time staff/students; Sexual orientation; Trans;</p> |          |           |



|                                                                                                                   |  |  |
|-------------------------------------------------------------------------------------------------------------------|--|--|
| Marriage or civil partnership;<br>Religion or beliefs;<br>Pregnancy, maternity or<br>paternity leave.             |  |  |
| How will the practice/policy<br>contribute to the MI<br>commitment to equality?                                   |  |  |
| How will the policy or<br>practice be monitored to<br>ensure equality?                                            |  |  |
| How will the policy or<br>practice identify any under-<br>or over-representation in<br>participation or outcomes? |  |  |
| Is there an action plan<br>based on the information<br>generated by the EIA?<br>(Please attach)                   |  |  |

## **POLICY BACK COVER**

**Section 1 - to be completed by policy proposer and forwarded to Committee Servicing Officer.**

|                                                                                                                                                                          |                                                                                           |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|
| <b>Policy Title:</b>                                                                                                                                                     | Policy Development Policy                                                                 |
| <b>Author/Owner:</b>                                                                                                                                                     | Quality Standards and Support Manager                                                     |
| <b>Rationale:</b><br><i>Outline the purpose of the policy, and its scope e.g. credit-bearing provision</i>                                                               | To support staff with the development and review of policy.                               |
| <b>Consultation undertaken:</b><br><i>List all groups and/or committees where consultation was undertaken e.g. students, administration, external advisor, EdC, etc.</i> | Consultation taken through the membership of the Education and Academic Board committees. |
| <b>Resource implication:</b><br><i>Outline the potential financial, human and technological resource implication of the policy</i>                                       | Click or tap here to enter text.<br>None                                                  |

## DOCUMENT CONTROL

**Section 2 - to be completed by receiving committee.**

|                       |                |
|-----------------------|----------------|
| Choose an item.       |                |
| <b>Circulated to:</b> | Metanoia Staff |

|                  |  |                           |                |
|------------------|--|---------------------------|----------------|
| <b>Approved:</b> |  | <b>Date for adoption:</b> | September 2026 |
|------------------|--|---------------------------|----------------|

|                                   |       |                         |            |
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