



Terms and
Conditions of
Employment

Academic Staff

**ROYAL
HOLLOWAY**
University of
London

TERMS AND CONDITIONS OF EMPLOYMENT FOR ACADEMIC STAFF

GENERAL

1. The appointment is subject to the provisions of the Royal Holloway and Bedford New College Act, 1985, the Statutes and the Regulations of the College, any collective agreements made between the Council and recognised trade union, and to the written acceptance of the terms set out in the letter of appointment. In the case of Appointed Teachers, the appointment is also subject to the provisions of the Regulations on University Titles.

DUTIES

2. To undertake such research, teaching and administration as may reasonably be required by the Head of Department, his or her nominated Deputy, or the College. Note that the Head of Department reports to the Dean of the relevant Faculty, who reports to the Principal.
3. Academic staff are required to advance their subject by research and other means. Attendance at meetings of College and University bodies of which academic staff are members is regarded as an important part of the work.
4. Modification of any terms relating to the appointment will be specified in the letter of appointment.

PROBATION

5. It is expected that new lecturers and senior lecturers will undertake a probationary period of three years. This period gives time to build research portfolios, and to demonstrate success in teaching through student feedback, peer review and other support mechanisms. Successful completion of probation may well include staff development. Exceptionally, early release from probation may be agreed, typically because a member of staff has acquired significant relevant experience at another institution. Alternatively, completion may be delayed if a member of staff has not yet been able to meet agreed probation targets, but whose performance is otherwise in line with expectation. The length of any probationary period, and any probation conditions, will be specified in the letter of appointment.
6. The guidelines for managing academic probationary periods are available at:
<https://www.royalholloway.ac.uk/iquad/collegepolicies/documents/pdf/humanresources/academicprobationguidelines.pdf>

HOURS OF WORK AND OUTSIDE WORK

7. There are no specified hours of work, but appointments are full time unless otherwise stated in the letter of appointment. A notional 35 hours per week is used as a reference for calculating pro-rata hours as appropriate. The standard working week is Monday to Friday unless otherwise agreed at appointment or with the Head of Department.
8. A member of staff may deliver College based consultancy outside of his/her contractual workload, subject to approval by the Head of Department and within the requirements of the Working Time Directive (or prevailing legislation). All consultancy must be undertaken in accordance with the terms of the College's Consultancy Policy which is available at:

<https://www.royalholloway.ac.uk/iquad/documents/pdf/researchsupport/consultancy-policyv2.pdf>
9. Prior permission is not normally required for paid work consisting of university examining or examining for school certificate or comparable examining boards, reviewing or refereeing publications, providing articles, broadcasts and lectures, or other activities normally associated with the holders of University teaching posts. However, the Head of Department must be told before any significant commitment of time is made and such work must not interfere with the performance of a member of staff's College duties.
10. Occasionally, academic staff will by mutual agreement be required to attend College for events or other agreed work on a Saturday or Sunday (or day 6 or 7). In these instances, and with the prior agreement of your Head of Department, you will be entitled to time off in lieu as compensation. In exceptional circumstances, and with prior agreement of the Director of HR, arrangements can be made for overtime worked on days 6 and 7 to be compensated with a payment appropriate to the allowance for time off in lieu.

SALARY

11. Salary and grade will be specified in the letter of appointment and notified in writing thereafter.
12. The annual incremental date is 1st August for staff on an incremental scale and in post on 31st January. The date on which your first increment is due will be specified in your letter of appointment.
13. Staff automatically move up one incremental point every year until they reach the top non-contribution point of their grade. The current RHUL single pay spine is available at:

<https://www.royalholloway.ac.uk/iquad/documents/pdf/humanresourcespdf/payandsalaryscales/rhulpayandgradingstructurepointstogradematrix.pdf>
14. The College will operate a fair and transparent process with clearly defined and applied criteria which will be implemented for the award of accelerated incrementation within the main scale, and the award of contribution points.

15. Salaries are payable monthly in arrears, no later than 27th of the month, by credit transfer.
16. The RHUL salary scale is determined by collective agreement with the trades unions recognised by the College. Cost of living awards are determined by collective agreement between the Universities and Colleges Employers Association, acting on behalf of the College, and the nationally recognised trades unions.

DEDUCTIONS FROM PAY

17. The College may recover any overpayment of salary or expenses incurred. Examples of these include an overpayment due to a miscalculation or managerial error or due to excess annual leave taken at the date of termination. The terms of any repayment will be agreed in consultation with the employee concerned, including the option to have the payment scheduled across a number of months and years.

HOLIDAYS

18. Academic members of staff are entitled to 27 working days paid holiday a year. All annual leave is pro-rated for part time staff. They are also entitled to 8 statutory public holidays and, at the College's discretion, an additional 6 days holiday, shared between Easter and Christmas, when the College is closed.
19. The holiday year runs from 1st August to 31st July. Outstanding leave can only be carried over from one holiday year to the next in exceptional circumstances and only with the agreement of the Head of Department.
20. All leave must be agreed in advance with the Head of Department in accordance with local departmental rules and within the terms of the Working Time Directive (or prevailing legislation). Leave will only be approved according to the requirements of the service.

PENSIONS

21. You are entitled to join the occupational pension scheme for staff in Grades 6 to 10 which is the Universities Superannuation Scheme (USS). The College operates SmartPension which is a salary sacrifice scheme. You will be automatically entered into USS and SmartPension unless the College considers you may not benefit from participation in SmartPension or you elect otherwise in writing. If you elect to join USS and opt out of SmartPension you will be required to contribute to USS according to the rules of the scheme, and the College will contribute an additional sum in order to finance the benefits of the scheme. If you have elected to remain in SmartPension you will sacrifice an amount from your salary equivalent to the amount of money that you currently pay into USS. The College will then make a contribution equal to the amount of salary you have sacrificed plus the employer pension contribution.

22. Your attention is drawn to the provisions of the Rules of USS and SmartPension which are available at <https://www.royalholloway.ac.uk/restricted/contensis/finance/documents/pdf/smartpension-booklet-april-2016.pdf>

This booklet also explains about electing not to join, leaving and rejoining the scheme.

TERMINATION OF EMPLOYMENT

23. A member of staff may terminate his or her employment by giving a whole term's notice in writing to the Principal. After consultation with the Head of Department, the Principal may accept a shorter period if appropriate.
24. The College is required to give written notice of the termination of employment in accordance with Statute 9 of the Revised Statutes of the College. A member of academic staff can only be removed from office in accordance with Statute 9.

ABSENCE THROUGH SICKNESS

25. A member of staff unable to attend work because of sickness must notify his or her Head of Department, or the person nominated for absence reporting in the department as soon as possible.
26. Academic staff are entitled to six months full pay and six months half pay during periods of absence due to sickness. The full sick pay scheme, which is amended from time to time, is available at:

<https://www.royalholloway.ac.uk/iquad/collegepolicies/documents/pdf/humanresources/sickpayscheme.pdf>

FAMILY FRIENDLY AND MATERNITY POLICIES

27. The College has an occupational maternity leave and pay policy. The current policy is available at:

<https://www.royalholloway.ac.uk/iquad/collegepolicies/documents/pdf/humanresources/maternitypolicypostapr11.pdf>

28. Other family friendly entitlements include occupational paternity pay. General information about shared parental leave can be found at:

<https://www.gov.uk/shared-parental-leave-and-pay>

SABBATICAL LEAVE

29. After passing probation, a member of staff may apply for sabbatical leave on full salary. The sabbatical leave scheme is available at: <https://www.royalholloway.ac.uk/iquad/documents/pdf/humanresourcespdf/policies/sabbatical-leave-policy.pdf>

DISCIPLINARY PROCEDURES

30. The disciplinary procedure for academic staff is detailed in Statute 9 of the Statutes of the College, in which a right of appeal is incorporated. The statutes are available at: <https://www.royalholloway.ac.uk/aboutus/documents/pdf/governance/college-statutes-1-august-2016.pdf>

GRIEVANCE PROCEDURE

31. If a member of staff has a grievance relating to his or her employment, he or she should discuss the matter personally with the Head of Department or appropriate line manager. If this is not appropriate the matter should be raised with the Director of Human Resources.
32. The Grievance Procedure for academic staff is included within Statute 9 of the Revised Statutes which is available at <https://www.royalholloway.ac.uk/aboutus/documents/pdf/governance/college-statutes-1-august-2016.pdf>

FREEDOM OF OPINION

33. A member of staff is free to express his or her political, religious, social and academic views both in private and in public in line with the Education Reform Act 1988. There is no restriction on the use of the College address in this connection, but letters to the press reflecting upon or discussing College policy should only be sent after consultation with the Principal.

EXPLOITATION OF INVENTIONS AND PATENTS

34. If in the course of his or her duties a member of staff makes an invention which he or she believes to be commercially exploitable, this should be reported to the College in accordance with the Code of Practice on the Exploitation of Inventions and Patents which is available at: <https://www.royalholloway.ac.uk/iquad/collegepolicies/documents/pdf/research/exploitationofinventionsandpatents2014.pdf>

TRADE UNION RECOGNITION

35. The College recognises three trades unions, the GMB, the UCU and UNITE negotiation and consultation concerning the terms and conditions of employment for its staff.

HEALTH AND SAFETY

36. A copy of the College's Health and Safety Policy forms Appendix 1 of this document. You are required to read this policy on appointment at the College. All members of staff are required to comply with the terms of the policy.

EQUAL OPPORTUNITIES

37. The University of London was established 'to provide education on the basis of merit above and without regard to race, creed or political belief' and was the first university in the United Kingdom to admit women to its degrees. This tradition continues into the field of employment and the College affirms its commitment to equality of

opportunity. Therefore, the equal opportunities policy of the College is that the only consideration in recruitment, training, appraisal and promotion of employees must be how the genuine requirements of the post are met or likely to be met by the individual under consideration. These requirements being met, no regard should be taken (except where legally required) of any of the following factors: race, sex, age, marital status, details of dependents, nationality, physical or mental capabilities, sexual orientation, religion or political beliefs. All members of staff are required to comply with this policy.

PERSONAL HARASSMENT & ABUSE

38. Royal Holloway is committed to upholding the dignity of the individual. Personal harassment and abuse can seriously worsen working, learning and social conditions for staff and students at the College. Any incident of harassment or abuse will be regarded extremely seriously and can be grounds for disciplinary action which may include dismissal or termination of registration for students.

The College's Code of Practice on Verbal and Physical Abuse is available at:

<https://www.royalholloway.ac.uk/iguad/collegepolicies/documents/pdf/healthandsafety/verbal-and-physical-abuse.pdf>

OTHER POLICIES AND PROCEDURES

39. The College policies and procedures relating to employment are available on the College website at
<https://www.royalholloway.ac.uk/humanresources/policiesproceduresandforms.aspx>

REVISIONS

40. If the Council approves any changes to these terms and conditions of employment, whether as a result of statutory changes or arising from a Collective Agreement, you will be notified in writing.

Appendix 1

ROYAL HOLLOWAY, UNIVERSITY OF LONDON

HEALTH AND SAFETY POLICY STATEMENT & ORGANISATION AND ARRANGEMENTS FOR CARRYING OUT THE POLICY

SECTION 1 – POLICY STATEMENT

- 1) The Council of Royal Holloway, University of London sets out in this document its commitment as both employer and provider of higher education, to the provision of a safe and healthy environment and working conditions for staff and students, as well as to visitors and contractors working on its premises.
- 2) The Council attaches great importance to the management of Health, Safety and Fire- related risks (hereafter collectively referred to as '*Health and Safety*'), treating them as seriously as other corporate objectives. This importance is reflected in a pro-active approach to the management, planning, organisation, control, monitoring and review arrangements established under individual policies and procedures and associated formal documents and the detailed arrangements contained in this Health and Safety Policy.
- 3) The Council's health and safety duties will be conducted in accordance with the relevant statutory provisions and in doing so the resources necessary to discharge such obligations will be made available. Staff, students, contractors and visitors to College premises must meet their own legal responsibilities and not do anything that may prejudice the health, safety and welfare of themselves or others and assist the College authorities to achieve the objectives contained in this and other formal documents.
- 4) The Council recognises the need for the support of staff and students and for them to be consulted and involved, particularly where allocated specific health and safety functions. An essential element in this communication process is the College Health and Safety Committee which draws together management, staff and students to achieve a safe and healthy place of work and study.
- 5) Information, instruction, training and support will be provided to those charged with specific responsibilities under Section 2, subsections 1) and 2) below and individual policies and procedures and associated formal documents. It will also be extended to those who may be subject to potential risks to their health and safety in order that they are able to competently recognise and manage such risks. In this respect, particular attention must be paid to the minimisation of risks arising from the use of chemicals, radiation, or other harmful materials.
- 6) Health and safety is a line management responsibility requiring managers to undertake the duties identified in Section 2 (below) of this Policy, individual policies and procedures and associated formal documents.
- 7) The College Health & Safety Adviser will be involved from the outset in issues/projects having major risk-related implications. The post holder will normally act as the principal contact in formal communications/discussions with the

regulatory bodies, where these have major risk-related implications.

SECTION 2 – ORGANISATION AND ARRANGEMENTS FOR CARRYING OUT THE POLICY

- 1) In meeting its statutory obligations, Council has vested in the Principal, as Chief Academic and Administrative Officer, responsibility for the management of health and safety. The Principal and Health & Safety Adviser will formally report to Council, via the Audit and Compliance Committee, annually and more frequently as may be necessary, on the College's health and safety performance. The Principal is supported in his/her duties by the Vice-Principals. However, it is the Deans of Faculty, Directors, Heads of Department and Managers, who have prime operational, day-to-day responsibility for ensuring the health, safety and welfare of persons and for meeting the specific requirements identified in this Policy and in individual policies and procedures and associated formal documents, thereby facilitating the effective management of risk.
- 2) These organisational arrangements, as they relate to lines of communication and levels of responsibility, are detailed below.
 - a) The Council is responsible for:
Ensuring the College is compliant with health and safety legislative requirements.
 - b) The Principal is responsible to Council for:
 - i. Implementing the College's Health and Safety Policy and associated formal documents;
 - ii. Identifying and allocating health and safety responsibilities to those senior staff referred to under sub paragraphs c. - h. below;
 - iii. Monitoring and reviewing the effectiveness of College health and safety activities and its Health and Safety Policy, individual policies and procedures and associated formal documents and for ensuring that, at the strategic level, performance standards and timescales are adhered to.
 - iv. The setting of health and safety standards and objectives;
 - v. The allocation of the necessary financial resources;
 - vi. Keeping under review this Health and Safety Policy;
 - vii. Reviewing College health and safety performance.
 - c) Vice-Principals are responsible to the Principal and support him/her in the execution of his/her duties.
 - d) The Deans of Faculty are responsible to the Principal for:
 - i. Ensuring that the requirements laid down in this Health and Safety Policy, individual policies and procedures and associated formal documents including timescales set, are adhered to throughout their areas of responsibility;
 - ii. Overseeing the allocation of health and safety responsibilities at departmental level;
 - iii. Ensuring that consistency of approach is achieved throughout their areas of responsibility;
 - iv. Working with heads of department where limited resources may present difficulties in meeting the health and safety standards set, in order to resolve such difficulties.

- e) The Director of Finance, Registrar and Director of Operations, College Secretary, Director of Communications and External Relations and Director of Strategic Operations are responsible to the Principal for those duties identified in d. above within their areas of responsibility.
- f) Directors (other than those referred to in e. above), Heads of Department (academic and non-academic) and Managers are responsible to either a Dean of Faculty, or Director (as is administratively appropriate) for:
- i. Ensuring that departmental activities are conducted in accordance with College, legislative, and other formal standards and that those hazards having the potential to cause harm are risk assessed and identified controls implemented.
 - ii. Producing safe systems of work and the methodology for complying with this Policy, individual policies and procedures and associated formal documents within their area of responsibility;
 - iii. Organising supervision to control the working environment and the maintenance of safe standards;
 - iv. Investigating accidents to establish causes and prevent recurrence, if necessary, with the advice and assistance of Health and Safety Office staff;
 - v. The health and safety induction of new staff and students and ensuring that information, instruction and training is provided to meet individually identified needs, if necessary with the advice and assistance of a member of the Health and Safety Office;
 - vi. Identifying, allocating and monitoring the adequacy of the specific health and safety responsibilities of staff and students, including departmental Health and Safety Co-ordinators while ensuring their roles and responsibilities are met;
 - vii. Producing departmental code(s) of safe working practice and implementing them on a day-to-day basis, where identified necessary, normally by risk assessment.
 - viii. Reviewing the above arrangements at regular intervals, making such adjustments as may be identified necessary.

Note: Heads of Department should appoint a Health and Safety Co-ordinator(s) to assist them with the execution of the above duties.

- g) The Director of Facilities Management is responsible to the Registrar and Director of Operations for:
- i. The overall management of health and safety within the Facilities Management Department. Specifically within the Academic Estate, this relates to the provision and maintenance of the buildings, their operating systems and relevant services provided, together with the grounds in which they are situated. For the Residential Estate, this covers all aspects of the provision and maintenance of the buildings, their operating systems, the grounds in which they are situated and all services provided within them.
 - ii. Building operating systems noted above, paying particular attention to those of fire and security, ensuring appropriate levels of protection and safety are provided for individuals and the properties concerned;
 - iii. Any part of the functions referred to in (i) above, ensuring that arrangements are in line with legislative requirements and/or other relevant standards and wherever possible, endeavouring to make such provision a model of best practice.
 - iv. Undertaking those duties identified in 2), f. above.
- h) The College Health & Safety Adviser is responsible to the College Secretary for

providing comprehensive services on health, safety and fire matters to Council, the Principal, Vice-Principals, Deans of Faculty, Directors, Heads of Department (academic and non-academic) Managers, Safety Representatives and Health and Safety Committee members, and other relevant personnel. The post holder will also:

- i. Keep all levels of management informed of statutory, best practice and other health and safety-related requirements, as well as members of the Health and Safety Committee, and advise them of action necessary to meet such demands;
 - ii. Provide, wherever possible, necessary training;
 - iii. Liaise with safety representatives and departmental health and safety co-ordinators;
 - iv. Provide advice on policy, procedure and other relevant documents, as is necessary to enable the Council, its senior officers and other College personnel, to meet their formal health and safety-related obligations;
 - v. Undertake such other duties as are identified in this document.
 - vi. Monitor compliance with the requirements of this Policy.
- i) Safety Representatives (trades union or non-trades union) should, within the department or area they represent:
- i. Assist with the promotion of safe working practices;
 - ii. Familiarise themselves with this Health and Safety Policy, individual policies and procedures and associated formal documents;
 - iii. Liaise with their head of department, and the College Health & Safety Adviser, in accident investigations and health and safety audits;
Where a member of the Health and Safety Committee, take part in proceedings, representing their staff and presenting to them information gathered from meetings;
 - iv. Report personally, or endeavour to ensure that other staff report, any hazardous or potentially hazardous situations;
 - v. Familiarise themselves with the action required in cases of emergency such as those related to fire, accidents or security issues.
- j) Individual Members of Staff and Students will co-operate and comply at all times with the health and safety information, instruction and training provided and bring without delay to the attention of their line manager/department office, any hazards identified, or improvements identified necessary. They do, therefore, have a duty to take reasonable care for the health and safety of themselves, and of other persons whom their actions or omissions may affect.

All persons must co-operate with the College to enable it, or any other person, to comply with any duty or requirement imposed by health and safety legislation. Specifically, no person shall intentionally or recklessly interfere with or misuse anything provided in the interests of health, safety or welfare in pursuance of any of the relevant statutory provisions (Section 8 of the Health and Safety at Work Act 1974).

k) **The College Health and Safety Committee**

The Committee will monitor and keep under review the measures necessary to ensure the health, safety and welfare of College employees, students and others engaged in legitimate activities on its premises. It promotes co-operation between management, staff and students in instigating, developing and carrying out measures to achieve health, safety and welfare at work, as well as in study and recreational activities. This work is an essential element in the development of the College's 'health and safety culture'.

l) Individual Policy and Procedure etc. Documents and Safe Systems of Work

The detailed arrangements for dealing with specific health, safety and welfare issues are identified in this Policy, individual policies and procedures and associated formal documents. These are available on the College Health and Safety Office website.

The above documents identify the College's management arrangements for health and safety and the manner in which departmental risks are controlled. Specifically, the health and safety standards to be attained, who is to do what and when, and the specific results to be achieved. They set performance standards and connect individual responsibilities to required outputs, with the achievement of objectives based on specific tasks, the results of which are measurable.

Each department will produce a health and safety policy identifying its management arrangements for health and safety and specifically risk assessment. It is not practicable to set the standards for all activities centrally and the following are examples of where managers, working with the Health & Safety Adviser, are required to set their own:

- (a) Procedures for dealing with potential problem areas such as the guarding of machinery, good housekeeping, effective inspection and maintenance of plant and equipment, such as fume cupboards and electrical equipment;
- (b) Procedures for introducing new machinery, plant and equipment, substances or processes, and for examining and addressing the health and safety aspects prior to a new project being undertaken;
- (c) Procedures for dealing with risks such as ionising radiation, noise, biological hazards, the selection, storage and transport of gases and toxic chemicals, and the safe and environmentally appropriate disposal of toxic wastes;
- (d) Safe systems and methods of work;
- (e) The selection, use and provision of suitable personal protective equipment;
- (f) Arrangements for dealing with the use of premises outside of normal working hours;
- (g) Accident investigation and reporting procedures;
- (h) The arrangements for obtaining and communicating to staff and students, information about health and safety matters, including articles and substances used;
- (i) Providing training to meet identified needs for new and existing staff, together with retraining, including when staff undertake new responsibilities or move from another department.

m) The Management of Risk at Departmental Level

A key element of the effective management of risk at departmental level is the production of written risk assessments which may only be undertaken by staff and/or students trained by a member of the College Health and Safety Office, using the College's 'General' risk assessment form. This risk assessment process will identify areas of potential risk and the

manner in which activities are to be executed safely including, for example, the need for safe systems of work, rules and procedures. It will include activities, curricular or extra curricular and include the planning and execution of field trips and expeditions as well as school visits or other events held at the College. Risk assessment will also be an essential element in the allocation of resources. This should ensure that funding is apportioned according to the level of risk identified.

All persons must adhere to the requirements of relevant College policies and procedures, associated formal documents, departmental rules and safe systems of work. They should bring any instances of potential or actual risk arising to the attention of their line manager at the earliest opportunity in order that effective remedial action can be taken.

n) **Health and Safety Information**

Comprehensive information, including copies of Health and Safety Executive publications relating to all subjects likely to be relevant to College activities, are available for reference from the College Health and Safety Office.

MONITORING THE POLICY

- o) The implementation of this Policy and the requirements of individual policies and procedures and associated formal documents will be monitored at departmental level during a formal health and safety audit. The Health & Safety Adviser will develop a three-year rolling programme for such audits.
- p) Accredited staff representatives may wish, in accordance with the relevant statutory provisions, to carry out more frequent inspections with local management.
- q) The Health & Safety Adviser will produce annual accident/incident and occupational health statistics. Copies will be circulated to the Audit and Compliance Committee, the Principal and Health and Safety Committee members. Such reports will facilitate a critical review of trends and necessary corrective action.

Dr Richard Fisk
Health & Safety Adviser
28/01/11

Signed by the Principal, Professor Paul Layzell on 7th March 2011.

Appendix 2

ROYAL HOLLOWAY University of London

Anti-Fraud Policy and Response Plan

PART I

1 Introduction

1.1 The policy is designed to ensure that the College:

- is safeguarded against occurrence, through promoting an anti-fraud culture and the operation of sound systems of internal control
- has systems to facilitate detection
- has a plan for responding to any occurrence.

1.2 Policy Statement

1.2.1 Royal Holloway, University of London is committed to preventing acts of fraud and corruption, whether initiated within the College, or by external sources. The College is committed to promoting an anti-fraud culture and reducing the opportunities for fraud and corruption to the lowest possible level of risk.

1.2.2 It is required that everyone connected with the College, in whatever capacity, will act with integrity and without intent to commit fraud or corruption. It is further expected that all staff will comply with legal requirements and with all regulations, procedures and practices of the College including the obligation to report all reasonable suspicions of fraud. Fraud committed by students will be addressed using the Student Disciplinary Regulations, Academic Regulations and other policies relating to students as appropriate.

1.2.3 Fraud and corruption will not be tolerated. The College will investigate all instances of attempted and suspected fraud committed by staff, consultants, suppliers and other third parties and will seek to recover funds and assets lost through fraud. Perpetrators will be subject to appropriate disciplinary or legal action.

1.2.4 All staff are notified of their responsibilities in relation to protecting the College from Fraud and Corruption at the start of their employment. This policy is available on the College web site and is brought to the attention of all staff from time to time.

2 What is Fraud?

- 2.1 Fraud encompasses irregularities and illegal acts which are characterised by an intention to deceive or mislead, and where the individual knows the information is false or at least has good reason to suppose that it is not true. Fraud is likely to result in an unauthorised benefit to an individual but could also be to the benefit of the College. Fraud in Higher Education does not always relate to financial matters and could also be to achieve other benefits such as an improved research reputation, results or funding.

Examples include:

- acceptance of bribes or bribing others
 - claims submitted for goods not received
 - intentional failure to act in circumstances where action is required by the College or law
 - intentional misrepresentation of events or data
 - theft
 - unauthorised or illegal use of confidential information
 - intentional and improper representation of the College's assets to a third party
- 2.2 Individuals can be prosecuted under the Fraud Act 2006 and the Bribery Act 2010 if they make a false representation, fail to disclose information or abuse their position.

3 Protecting the College

3.1 Checking References and Qualifications

New members of staff should be screened before appointment. In most cases it is sufficient to obtain and check a previous reference and check any qualifications where appropriate. Staff with financial responsibilities must have references to cover a reasonable continuous period. Appropriate checks should also be made on staff working with children or vulnerable adults.

3.2 Internal Control

- 3.2.1 This is an essential measure in avoiding occurrences of fraud. In addition to College policies on matters like the processing of expense claims, tendering for contracts and accepting hospitality, all processes which could be open to fraud or corruption should involve effective management controls such as the segregation of duties, checking of exception reports and the random checking of transactions.

- 3.2.2 Managers have specific responsibilities for preventing and reporting fraud. In particular:

- Monitoring compliance with internal controls and agreed policies and procedures e.g. Financial Regulations, checking staff lists and budget

reports, proper control over cash transactions and holdings.

- identifying unusual behaviour in staff members such as regular late working without obvious reason or suspected alcohol or gambling problems. Advice should be sought from HR on how to address these matters.
- notifying appropriate staff of any indications of fraudulent activity.
- Assisting in the investigation of suspected fraud.

3.2.3 All staff are responsible for:

- Ensuring that the College's reputation and assets are protected against fraud.
- Reporting known or suspected fraud.
- Assisting in the investigation of fraud

3.2.4 The College's Financial Regulations provide clear guidance on issues of financial responsibility. All Heads of Departments and other Senior Staff are responsible for ensuring they have familiarised themselves with the Regulations. These are available on the Finance Department's web pages.

3.2.5 The College has clear guidance on purchasing and procurement. Heads of Departments are responsible for ensuring that staff involved in purchasing and procurement are familiar with the guidance which is available on the Finance Department's web pages.

3.2.6 All staff making claims for expenses are required to make any claims within the terms of the College's Travel and Subsistence policy which is available on the Finance Department's web pages. This policy also provides guidelines on the acceptance of hospitality and gifts.

3.3 Internal and External Audit

Planned audit work is used to review and provide assurance on performance, processes and controls across the full range of College activities. All staff are required to comply with requests for information or assistance made by the Internal or External Auditors.

4 Reporting

Members of Staff are essential in identifying occurrences of fraud and corruption and should raise any concerns with the Director of Finance and their Head of Department in line with the College's Financial Regulations and Public Interest Disclosure Protocol (available on the College web pages or from the College Secretary's Office). The latter document reinforces the College's Financial Regulations and provides protection for staff reporting incidents of suspected fraud or corruption from victimisation. Matters may be raised in confidence but where an investigation is undertaken it should be recognised that it may not be possible to maintain complete confidentiality. Where it is not appropriate for the matter to be reported to the Head of Department or the Director of Finance the matter can be reported directly to the College's Internal Auditor. Matters that are less obviously of a financial nature should be reported to the College Secretary.

PART 2

Response Plan

This purpose of this plan is to allocate responsibilities for action and reporting lines in the event of a suspected fraud or irregularity.

Initiating Action

1. Actual or suspected frauds or irregularities may be identified through a number of mechanisms, including:
 - operation of internal controls
 - reported by staff in accordance with Financial Regulations or using the Public Interest Disclosure Protocol
 - reported by third parties;
 - as a result of Internal or External Audit review.
2. Regardless of how they are initially reported to the College management, all actual or suspected incidents should be reported to the Internal Auditor to allow an independent investigation to be undertaken promptly.
3. This plan covers recording and securing evidence, preventing further losses and the investigation process. Managers on identifying or being advised of a suspected fraud should report it immediately as indicated elsewhere in the policy. They should also take immediate and effective action to secure all relevant information and documentation and prevent any further losses pending the initiation of an investigation as described below.

Investigation

4. With the Directors of Finance and Human Resources, and the College Secretary (or their representatives), and the relevant line manager, the Internal Auditor should agree the following as soon as possible and develop an action plan with allocated responsibilities:
 - whether an investigation should take place -an investigation would normally be expected
 - the staff who should undertake the investigation in addition to the Internal Auditor
 - the initial scope of the investigation
 - whether any external support is required for the investigation
 - whether the police or College insurers should be contacted prior to an investigation taking place
 - the timescale for the investigation

- whether any members of staff should be suspended from work prior to the start of the investigation or at any point during the investigation
 - any other action that should be taken immediately to secure evidence or protect the College from further loss
 - whether the matter requires notification to the Chair of the College Council and the Chair of the Audit Committee prior to an investigation
5. Delay in arranging a meeting of the above officers should not delay developing a plan or commencing an investigation. Consideration should be given to whether all of the officers need to be involved in the particular case. Consideration should also be given to the inclusion of others if appropriate.
 6. The Principal should be notified of the issue by the Director of Finance or one of the other officers if appropriate.
 7. Where there appears to be sufficient evidence to warrant reporting to the police the Internal Auditor will liaise with the police and be responsible for future communications with them over the matter.
 8. If it becomes necessary to interview a member or members of staff under suspicion, the Internal Auditor, or an appropriate member of the investigation team, will carry out such interviews in accordance with the Codes of Practice related to the Police and Criminal Evidence Act. Adherence to these Codes will also ensure that any other staff assisting in such interviews are aware of the requirements of the Act.
 9. Investigations must also be carried out in accordance with the requirements of the College's Disciplinary Procedures.
 10. On conclusion of the investigation a report will be produced for consideration by the relevant line manager and the officers named in paragraph 3, recommending further actions. The Principal will also be notified of the outcome of the investigation.

Action

11. Where evidence of fraud or corruption has been found it would be expected that a disciplinary hearing would be arranged and the police would be informed if this has not already occurred.
12. Other actions should be considered. These might include further investigations of systems or processes, or legal action, which might be particularly appropriate in incidents involving contractors or other third parties.

Recovery of Losses

13. Every effort will be made to recover any losses suffered as a result of fraud perpetrated on the College.

Reporting

14. In accordance with the HEFCE Audit Code of Practice some cases of fraud or suspected fraud must be reported to HEFCE. This should be done by the Principal as soon as possible following the investigation. The Chair of the College Council and the Chair of the Audit Committee must also be notified.
15. All fraud and corruption investigations must be reported to the Audit Committee with a brief description of the incident, the value of any loss, the means of perpetrating the fraud, the measures taken to prevent a recurrence and any further actions that are required. This report would normally be prepared by the Internal Auditor and be made available to the College's External Auditors.

Approved by the College Council 13 October 2010

Policy Owner - Chief Operating Officer and Head of Governance

Equality Impact Assessment -no impact identified