Knowledge Exchange Concordat:
Review of action plans

July 2022

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Introduction

HE providers have embarked on a significant exercise to enhance their knowledge exchange (KE) activity through a sector-led KE Concordat. The KE Concordat has provided a framework by which HE providers were able to identify their KE strengths and areas for improvement and to consider action plans to enhance their activities.

Strengthening knowledge-based interactions – called 'knowledge exchange' – between universities and external partners is of strategic importance to economic, social and cultural growth. This includes working with businesses and the public and third sectors, and all forms of partners external to the higher education sector. KE activities cover collaborating and translating higher education knowledge into applications in the form of new products, processes or business models; providing enterprise support and guidance to entrepreneurs and start-ups of all types; employer engagement; engagement with local organisations; and much more.

This report examines HE providers' current KE activities, as well as their plans for further development, as laid out in their action plans.

Purpose of the KE Concordat

HE providers are committed to continuously improving their KE activities and enhancing the wider impacts that these bring. They participated in the KE Concordat to identify their institutional strengths and weaknesses against a set of principles and ultimately to strengthen their corporate approaches and improve their performance. The design of the KE Concordat recognises that there is no single profile of KE that fits all higher education institutions, and encourages them to make a commitment to improve in ways that help them in ways that are consistent within their priorities and expertise.

The aims of the KE Concordat are to:

— give HE providers and their staff and students clarity of mission in relation to KE activity

— support, develop and strengthen KE activity among higher education institutions

— give partners an accurate representation of the approach that individual HE providers are taking to KE, and provide clear indicators of their approaches towards improvement

— give governing bodies and government broad confidence in the activity that is taking place in HE providers.

Overview of the KE Concordat process

The KE Concordat was developed and produced in response to a report published by Professor Trevor McMillan, Vice-Chancellor of Keele University, in 2016. The report included several recommendations to support the broader development of KE, and informed the creation of two streams for KE enhancement in the sector:

— The Knowledge Exchange Framework (KEF) – led by Research England looks at the performance measurement of KE in England, using data from past performance to highlight performance and inform improvement.

— The Knowledge Exchange Concordat – this sector-led initiative focuses HE providers on future priorities and strategies for development and enhancement.

— Today, the KE Concordat is viewed among a wider set of initiatives aimed at supporting the higher education sector to develop and progress activities and processes that are aligned with research, impact, ethics and engagement.[1]

The KE Concordat is a sector-led activity developed by Universities UK (UUK) and GuildHE, with support from the UK higher education funding bodies, the National Centre for Universities and Business (NCUB) and Praxis Auril. The KE Concordat is overseen by a strategic group made up of higher education sector leaders and policymakers.[2]

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[1] Among these are: UUK (2021) Concordat to Support Research Integrity; (undated); Research Excellence Framework; UUK (undated) Concordat to Support the Career Development of Researchers; and Advance HE (undated) Athena Swan Charter.

[2] A Task and Finish Group, chaired by Vice Chancellor Trevor McMillan, was formed following a consultation to establish the KE Concordat. More detail can be found here: www.universitiesuk.ac.uk/what-we-do/policy-and-research/publications/concordat-advancement-knowledge-exchange-0

The KE Concordat asks HE providers to consider their performance across eight guiding principles:

1. **Clarity of mission:** KE is a recognised part of the overall institutional strategy and is valued for the social, cultural and economic outcomes it helps HE providers to achieve.

2. **Policies and processes:** Where appropriate, HE providers have clear policies on all types of KE that they undertake, and work with staff, students, partners and beneficiaries so that the policies are understood and operationalised.

3. **Engagement:** HE providers build effective relationships by having clear routes to access information and expertise in the institution, with engagement mechanisms and policies developed to suit the needs of a wide range of beneficiaries and partners working with institutions as publicly funded bodies.

4. **Working transparently and ethically:** HE providers make sure that partners and beneficiaries understand the ethical and charitable regulatory environments in which the institution operates, including a commitment to inclusivity and equality, and they take steps to maximise the benefit to them within that context.

5. **Capacity building:** Staff and students are developed and trained appropriately to understand and undertake their roles and responsibilities in the delivery of successful KE.

6. **Reward and recognition:** HE providers recognise and reward the achievements of staff and students who perform high-quality KE activities.

7. **Continuous improvement:** HE providers proactively strive to share best practice with their peer institutions, and have established processes for learning from this.

8. **Evaluating success:** higher education undertake regular institutional and collective monitoring and review of their strengthening KE performance using the KE Concordat and through regional, national and/or international benchmarks to inform the development and execution of a programme of continuous improvement so that KE becomes more effective.

A more detailed explanation of each of the principles is included in Annexe 2.

The UK's HE providers were invited to sign up to the KE Concordat by agreeing to its aims and eight principles. They then had an option to participate in a development year (2020–21). In total, 136 HE providers from across the UK became signatories to the KE Concordat (see Annexe 3), and 112 participated in the development year.

HE providers participating in the development year completed a self-evaluation exercise against the KE Concordat principles and produced an action plan. The action plan template included the following sections:

— summary of institutional strategic objectives for KE

— self-evaluation (including gap analysis) summary

— action plan, including an outline of:

· the extent to which the HE provider meets each principle

· how the HE provider will address gaps identified in the self-evaluation

· a self-score on a scale of 1–4 assessing performance against each principle

· identification of examples of 'innovative good practice' and 'areas of improvement'

Priority actions

The action-plan process allowed HE providers to self-assess their KE maturity, strengths and areas for development against the KE Concordat principles. Within the action plan, HE providers could self-identify examples of 'innovative practice' and 'areas for improvement' against any of the principles.[3] They could then decide on up to five priority actions that they believed would lead to the greatest improvements. HE providers were asked to set the five priority actions in the context of their institutional priorities, and to identify the timescales needed to complete each action, which KE Concordat principle the priority action aligned with, and the party responsible for delivery and implementation. HE providers were advised not to exceed five priority actions overall (although some institutions did exceed five).

Guidance was also provided by the KE Concordat operational group, which was tasked with developing and implementing the KE Concordat.

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[3] For definitions, see UUK (2016) *Guidance for the completion and submission of action plans*

Each action plan was evaluated by at least three evaluators. Evaluators were selected from a diverse group of volunteers, all of whom had knowledge and understanding of KE activity and experience in other HE providers, businesses or charities. The evaluators attended a moderation meeting, facilitated by a member of the KE Concordat operational group, to discuss their feedback on each action plan before a feedback letter was sent to participating HE providers, including to the head of the HE provider and a named contact for KE.

1. Purpose of the report

This report analyses the content of HE providers' action plans and evaluators' feedback in order to build understanding of key areas for improvement in developing and implementing KE activities across the UK. The aim of this is to provide sector-wide insights to help strengthen HE providers' practice, as well as to offer policymakers greater understanding of HE providers' KE approaches, so that appropriate policies and approaches can be developed.

The KE Concordat was developed and delivered at a time of significant change in the UK, with the Covid-19 pandemic causing widespread disruption, but also illuminating the critical importance of university partnerships to help develop solutions aimed at addressing the nation's recovery. Since the KE Concordat process started, the UK Government has set out a number of initiatives to strengthen the UK's research, innovation and skills systems, including a Plan for Growth, Levelling Up White Paper, Innovation Strategy and R&D People and Culture Strategy.

As part of the development year process and to understand the value and impact of the KE Concordat, as well as to learn from the process, a detailed review has been undertaken. This includes a separate evaluation that looked at the KE Concordat process, this report and an executive summary report bringing together the high-level findings from both evaluations.

To contribute to the analysis contained in this report, NCUB contracted research consultants Carol Stanfield and Simon Gallacher to conduct an in-depth analysis of a selection of action plans to draw initial conclusions across both the quantitative and qualitative reviews.[4]

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[4] See 4: Methodology below for details.

Stages of KE maturity

This analysis of the KE Concordat submissions recognises that diverse HE providers are at different phases of their KE development. These specific stages are used throughout this report to discuss different levels of KE maturity:

1. **Introduction:** establishing or introducing KE as an institutional practice (eg, through a strategy) or initiating a specific KE activity (eg intellectual property (IP), commercialisation)

2. **Revision:** refreshing or updating a KE strategy in the light of sector developments and contextual changes

3. **Consolidation:** enhancing or improving the quality of a strategy or activity, based on intelligence about current implementation

2. Summary of emerging considerations for policy and practice

This report revealed important and common themes in KE activities across the sector that are important for HE providers and policymakers to consider. A summary of the concluding considerations for policy and practice is included below.

Different HE providers are at different stages in KE development

Some HE providers referred to a need to develop more specific KE policies (stage 1) or to review and align all policies and processes to drive KE (stage 2), while others were focused on developing formal policies to improve business gateways and the 'front door' as well as standardising data collection (stage 3). All HE providers should be encouraged to learn from and share good practice with other institutions at all levels of maturity to embed a culture of constant improvement.

Embedding robust approaches to monitoring and evaluation is critical to improve KE practice

With a breadth of KE activity taking place across the sector, many HE providers are considering how to grow evidence-gathering, feedback mechanisms and external evaluations to inform monitoring and evaluation (M&E) processes. Improved evidence-gathering (including feedback) is needed to inform HE providers' understanding of how evaluation can be used to inform future strategy and practice and to address more specific areas, such as equality, diversity and inclusion.

Capacity and capability-building to support KE requires significant time and resources

HE providers recognise the need to go further in their capacity and capability-building activities to ensure KE is considered within workforce planning, promotions, training, and reward and recognition programmes. HE providers should consider focusing on their key strengths within these priority areas, to ensure resources are focused.

KE should become embedded in institutional strategies

To achieve full adoption and buy-in across all areas of the institution, KE activities should be consistently embedded into institutional strategies, and reviewed regularly

by senior leadership and governing bodies. Key performance indicators (KPIs) should be developed by HE providers to ensure progress is being made.

Improving IP policies continues to be a focus for many HE providers

Developing, improving on and creating more awareness of IP policies and processes within KE activity is an important area for further development in the sector. Many HE providers with well-established IP policies are keen to improve their processes, and recognise that more could be done to engage students in IP processes and training.

Improving engagement with small- to medium-sized enterprises was an area of focus for many HE providers

Many HE providers highlighted a need to develop their approach to working with small- to medium-sized enterprises (SMEs) and were developing specific engagement strategies to achieve this. There are opportunities for the sector to share good practice and consider approaches that make it easier and simpler for SMEs to engage with HE providers.

There is a need to develop long-term approaches to supporting KE activity

Recognising that KE happens across the entire institution, cutting across staff, students, teaching and research, it is clear that KE requires cross-institutional support and resourcing. There is a need for HE providers to consider how KE is resourced and to ensure there is not an over-reliance on single funding streams, so that the long-term strengthening of KE across the provider is secured.

3. Methodology

The KE Concordat provides a framework of eight principles for supporting KE against which HE providers have assessed themselves. In signing up to the development year, participating HE providers committed to carrying out a detailed self-evaluation (including self-evaluation scores) and gap analysis of their KE activities against the eight principles to generate an action plan.

NCUB conducted an initial quantitative analysis of the 112 action plans, leading to a more in-depth qualitative analysis of the full data of a sample of 41 action plans and the associated evaluator comments.

The initial approach included analysis across all 112 submitted action plans of:

- self-evaluation scores provided by the HE providers against the eight guiding principles

- implementation timeline against the eight guiding principles

- sentiment analysis of evaluator feedback

These are discussed in more detail below.

Sample for detailed analysis

To conduct an in-depth analysis of action plans, a sample was selected comprising HE providers in England from each KE cluster, based on groups established in the KEF (see Table 1).[5] A sample of the action plans received from HE providers in Northern Ireland and Scotland was also reviewed.[6] All HE providers in Wales confirmed commitment to the principles of the KE Concordat through their panel-approved Research Wales Innovation Funding (RWIF) strategies. This meant that Welsh institutions submitted their priority action plans to the Higher Education Funding Council for Wales (HEFCW). Progress updates will be provided through annual review meetings or, if required, as part of annual RWIF monitoring.

In total, 41 action plans, over one-third of the total submitted, were reviewed, along with their evaluator comments and the feedback letters to the institution.

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[5] See https://kef.ac.uk/about for more information on how providers in England have been categorised into clusters for the Knowledge Exchange Framework by Research England.

[6] HE providers in other UK nations could participate in the development year, but higher education funding bodies are considering plans for implementation of the KE Concordat in those nations.

Table 1: Sample for detailed analysis

Cluster	Number of providers in KEF cluster	Number of KE Concordat signatories	Number of action plans submitted	Sample
Arts	21	11	8	4
E	29	29	29	7
J	17	15	14	6
M	18	16	14	5
Science, technology, engineering, and mathematics (STEM)	12	9	9	4
V	17	15	15	6
X	20	20	19	6
Scotland	N/A	7	3	2
Northern Ireland	N/A	0	1	1
Wales	N/A	9	0	0
England providers not participating in KEF	N/A	1	0	0
Total		136	112	41

The sample for cluster E is greater to reflect the number of action plans submitted by HE providers in this cluster.

HE providers' action plans in each sample were reviewed in respect of the eight KE Concordat principles, including analysis of approach to KE; self-scoring; priority actions, with timelines; level of seniority responsible for implementation; examples of self-identified innovative practice; evaluator comments; and areas for improvement.

Comparing HE providers

To aid fair comparison in this analysis, NCUB used the KE Framework categorised by Research England whereby HE providers in England were divided into seven KEF clusters, according to a conceptual framework that identified groups of HE providers with similar structural KE characteristics. The framework distinguished the scale and intensity of capabilities along three key dimensions:

- existing knowledge-base

- knowledge generation

- physical assets

HE providers in each of these clusters were considered to have similar capabilities and resources available to engage in KE activities.[7] The KE Framework applies to institutions in England only, and therefore the sample of HE providers in Northern Ireland and Scotland were analysed by country.

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[7] For information about the clusters, see https://kef.ac.uk/about

4. Report structure

The analysis of KE Concordat action plans is set out over two sections. The first sets out the institutional strengths and priorities across a range of indicators, analysing all of the 112 action plans across the eight principles. This includes an analysis of HE provider self-evaluation scores, priority action timelines, evaluator sentiment and institutional variations.

The second section includes an in-depth analysis of the action plans of the sample of 41 HE providers, including institutional strengths and areas for development, and suggested steps to address practice.

Institutional strengths and actions

The UK has a diverse higher education system, with HE providers of different sizes, origins and specialisms across the UK. To consider how HE providers' KE activities can be strengthened further, it is necessary to understand how HE providers evaluated their own KE activity and development, how this aligns with their missions and their priority actions, and how their approach was viewed by evaluators.

This section examines all 112 submitted action plans to consider HE provider self-evaluation scoring, priority action timelines and evaluator sentiment in order to inform cross-sector strengths and areas of development, as well as variation between different HE providers.

Self-evaluated KE strengths and areas for development

As part of the self-evaluation process, HE providers were asked to score themselves on the extent to which they currently believed they met each of the eight KE Concordat principles. The scoring was based on a scale of 1 (= 'not at all') to 4 (= 'entirely').

Main findings

On average, HE providers scored between 2.45 and 2.89 across the principles, representing a positive general assessment of KE activity, with recognition of areas to grow and improve. HE Providers self-scored highest for clarity of mission and working transparently and ethically, and lowest for recognition and rewards, and evaluating success (see Figure 1).

**Figure 1: Average self-scoring by KE Concordat principle**
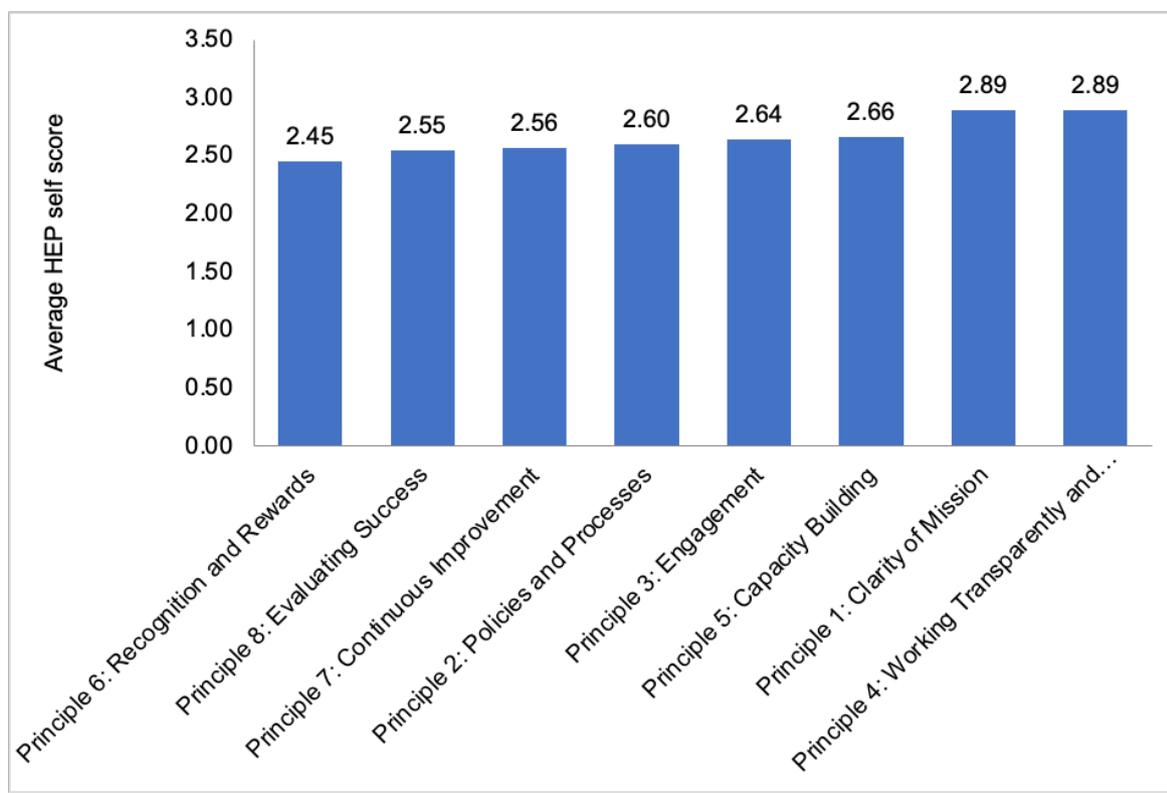
The higher than average self-scoring against Principle 1 (Clarity of mission) suggests that overall, HE providers were confident about their plans to progress these activities. Interestingly, this appears to align loosely with where HE providers have set out their priority actions (see Figure 2).

Evaluators highlighted, across many of the sampled action plans, a number of innovative practices aligned with Principle 4 (Working transparently and ethically), demonstrating that HE providers are making progress in this area.

Although HE providers could have identified any priority areas for improvement regardless of their score, the lower average self-scores against Principle 6 (Recognition and reward) and Principle 8 (Evaluating success) are relatively low. Evaluator comments noted that although a large number of submissions had plans in place to improve evaluation methods for KE, this had still not taken place. In particular, evaluators noted that under Principle 8, more and/or improved evidence (including feedback) needed to be gathered against a good understanding of how the HE provider valued KE, and that this needed to be reviewed formally.

Figure 2: Total number of priority actions aligned with each KE Concordat principle
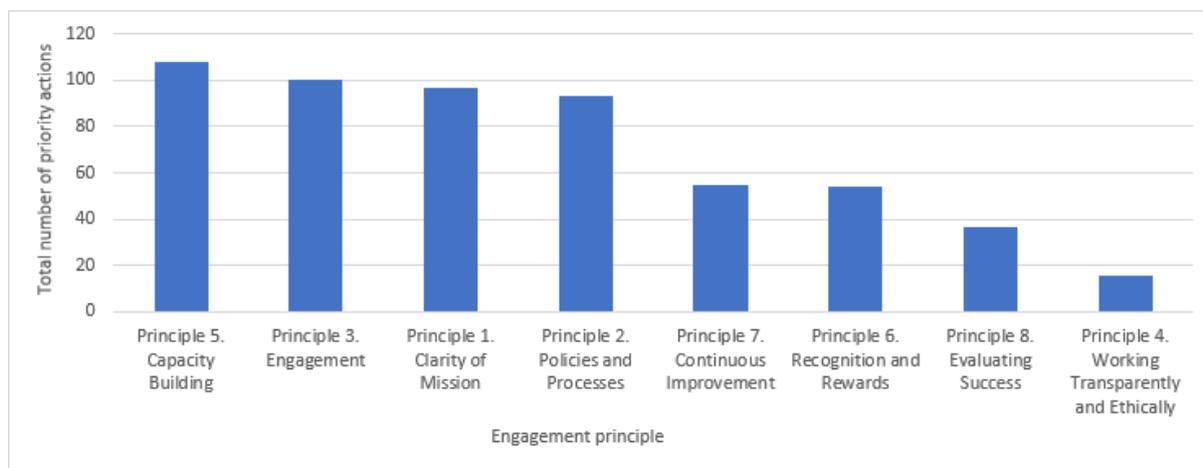
Findings by institution type

There is some variation in self-evaluation of KE activities by HE provider type.

In this analysis, HE providers in England were grouped into KE clusters.[8] HE providers in cluster M consistently self-scored lower than average for all engagement principles, with their highest average score of 2.6 for Principle 4 (Working transparently and ethically). A closer analysis of cluster M's action plans suggests that this reflects a sector-wide absence of what 'good' KE looks like, rather than being reflective of their individual approach. Notably, most HE providers in cluster M received no funding through the Higher Education Innovation Fund (HEIF) or any other KE funding until 2021.[9]

HE providers in cluster V consistently scored themselves higher than average for all engagement principles, with this being the only cluster that had an average above 3.0 for any principle. Their action plans suggest they have a more developed approach to KE and are relatively better resourced in terms of their KE funding, activities and output.

Findings by stage of KE development

HE providers are at different stages of KE development, but all providers demonstrated a clear sense of clarity about their KE mission, the next steps for implementation and how KE relates to their overall institutional strategy.

[8] See 4: Methodology above for an explanation of KE clusters.

[9] See UKRI £2.5 billion investment to support government's R&D ambitions Press Release 30 September 2021

HE providers in cluster M, most of which are smaller institutions with a focus on teaching, scored themselves on average lower across all principles. This is a reflection of where they believe they are in terms of their approach to KE, as well as their KE development and implementation. HE providers in cluster V, predominantly research-intensive institutions that receive large amounts of KE funding, were focused on enhancing and improving their KE activity in all areas, having introduced KE policies years before. A few evaluators noted that HE providers reliant on a single source of KE funding (eg, HEIF or the Connecting Capability Fund (CCF)) need to expand and diversify their KE income in order to sustain and embed their KE activity.

The variance in KEF cluster self-scoring was highest for Principle 2 (Policies and processes), with HE providers in cluster V self-scoring an average of 3.0 and HE providers in cluster M self-scoring an average of 2.2. Activities aligned with Principle 2 varied from developing new policies to reviewing and embedding them throughout the HE provider. This varied activity is indicative of the different levels of maturity in approach to, and understanding of, KE across different institutions.

Despite the different stages of maturity, all HE providers have dedicated significant time and resources to meeting new objectives. Policy development and clarity of mission are areas of strength across all HE providers and were shown to be a priority to get right before HE providers move on to later stages of KE development.

Timeline for priority actions

All HE providers submitting action plans recognised areas for development and growth, and submitted the priority actions they plan to take to achieve this. A total of 560 priority actions were submitted. HE providers were advised to indicate one of five timelines for each of their five priority actions (see Figure 3).[10]

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[10] 0–6 months, 6–12 months, 12–18 months, 18–24 months or 24+ months

Figure 3: Number of priority actions, by implementation timeline and KE Concordat principle
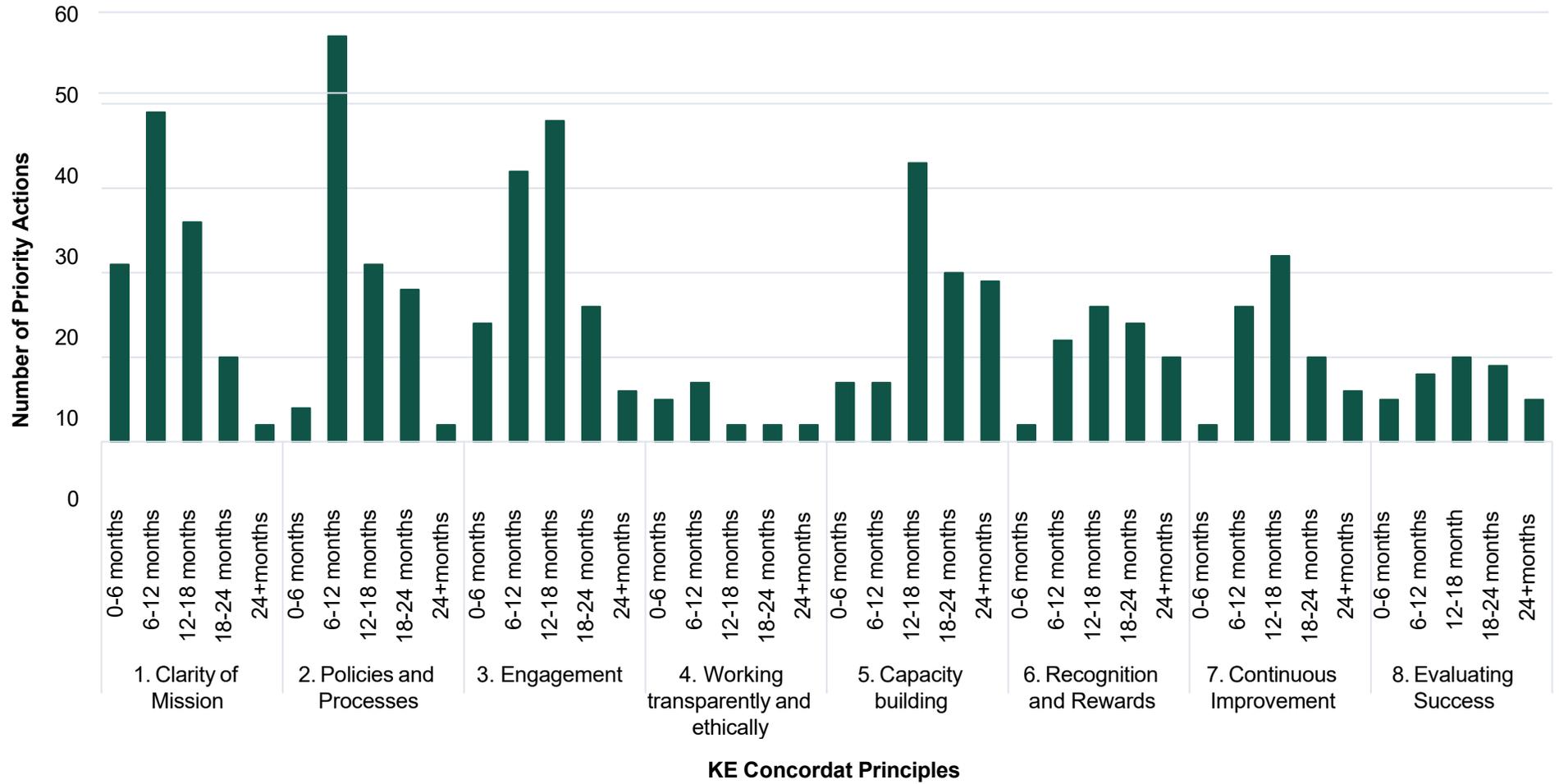
Main findings

Actions to establish greater clarity of mission, better policies and processes and strengthened engagement were expected to be delivered fastest.

Principle 1 (Clarity of mission), Principle 2 (Policies and processes) and Principle 3 (Engagement) had the most priority actions, with forecasted timelines of 0–6 months and 12–18 months. Very few actions aligned with these three principles went beyond 18–24 months. Priority actions aligned to Principle 1 (Clarity of Mission) included establishing or refreshing the KE policy or strategy and developing communications around KE to raise awareness both internally and externally. Examples of priority actions aligned to Principle 2 (Policies and processes) included implementing a risk assessment and due diligence process around KE projects, developing or updating the IP policy, and mapping relevant policies and processes to make a clear offer for engagement teams and partnerships. Finally, examples of priority actions aligned with Principle 3 (Engagement) included developing clear communications with external partners, either through a website or customer relationship management (CRM) tools, and developing consistency across departments to ensure KE expertise, processes and systems are streamlined. Overall, this demonstrates that HE providers were focusing on developing and implementing their KE strategy or aligning it with their institutional strategy in the short term.

Findings by institution type

There is little variation in the timeline for priority actions to be delivered across institutions.

All HE providers used timescales of 0–6 months or 6–12 months for their priority actions, suggesting that overall, activities are being prioritised. Where timelines were longer, there was a sense that these may require significant input, engagement or buy-in from across the HE provider. This was true for priority actions related to Principle 5 (Capacity-building) and Principle 6 (Recognition and rewards).

Findings by stage of KE development

Many actions were identified to build KE capacity, but these were expected to take time to deliver.

Principle 5 (Capacity-building) had the greatest number of priority actions with longer timescales. Few priority actions were due to be completed within 12 months. Most were set to complete within 24 months. Examples of priority actions related to Principle 5 included plans to launch a KE academy to train staff in business engagement, or offering multi-route career pathways from recruitment to grow capability in KE. The range of priority actions suggests that HE providers, regardless of the stage of KE maturity they have reached, may perceive that capacity-building is an area that requires significant engagement and buy-in and that therefore,

timescales are longer for priority actions aligned with this principle. The same is true for priority actions related to Principle 6, where institutional actions cross a number of departments and areas of implementation and institutions may perceive that a long-term approach is necessary to engage staff and integrate new processes and policies.

Evaluators' comments on action plans

Evaluators provided extensive feedback on action plans to help HE providers strengthen their activities. To allow for analysis, NCUB adopted a novel technique to systematically analyse evaluator feedback on all 112 HE provider action plans through a Natural Language Understanding (NLU) programme.[11] The NLU programme was used to test feedback for the level of overall positivity or negativity. The average weighted sentiment score for a HE provider could range between -4 and +4, where -4 is entirely negative and +4 is entirely positive.[12] This analysis was supplemented by a qualitative review of evaluator feedback to the 41 sampled institutions.

Main findings

Evaluator feedback was predominantly positive.

All sentiments were predominantly positive across all principles, with no comments on an action plan as a whole scoring below 1 (see Figure 4). Notably, positive evaluator sentiment was not affected by the stage of HE provider KE development.

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[11] NLU is a branch of artificial intelligence that uses computer software to understand input in the form of sentences using text or speech. It was used as part of the methodology in this review to supplement the research team's understanding of evaluator sentiments about each of the sample providers' action plans.

[12] These scores were added for each of the four sections of the action plan (KE objectives, self-evaluation report, principles and action points) and weighted by the number of evaluators (which varied between three and five for each action plan).

Figure 4: Evaluator sentiment analysed by KE Concordat principle
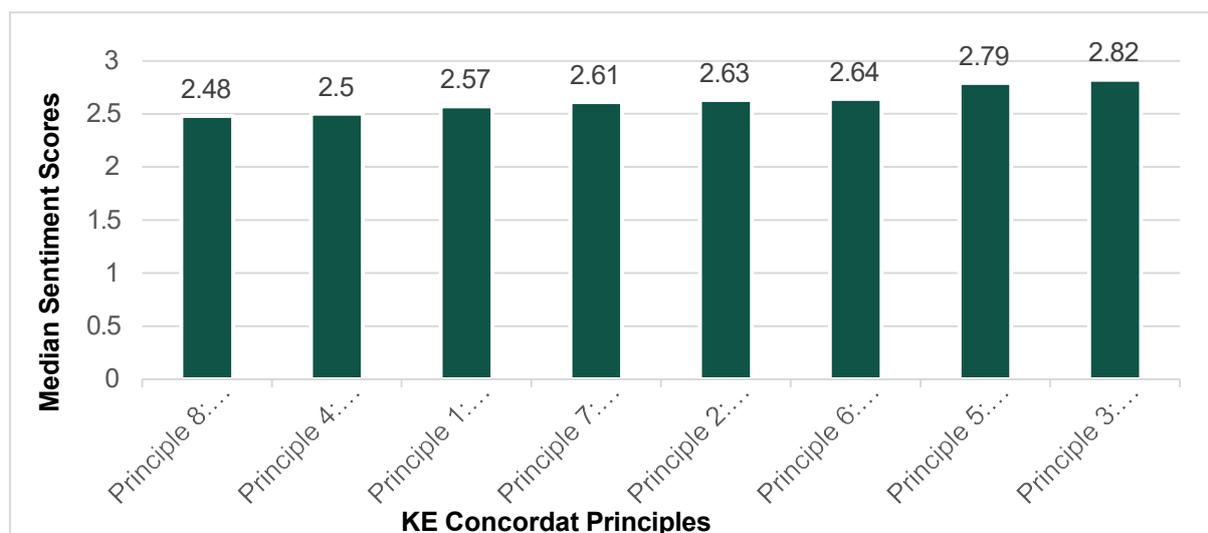
In large part, evaluator comments on action plans were thought to be clear and based on open and honest HE provider self-evaluation. The NLU analysis showed that less positive sentiment from evaluators generally related to whether the HE provider had dedicated appropriate resourcing to their objectives, and whether actions fully aligned with the gap analysis and the HE provider's ambition in setting their objectives, given their mission and focus. These comments were few, however, leading to an overall positive sense from evaluators.

Evaluators commented that KE and institutional objectives were generally well aligned, and priority actions were addressed where there were significant gaps identified in the self-evaluation, consistent with institutional objectives.

Evaluators were most positive about actions to improve engagement and capacity-building.

Evaluators' comments scored highest in the sentiment analysis for Principle 3 (Engagement) and Principle 5 (Capacity-building). Based on their comments, these were areas where evaluators found HE providers' actions particularly relevant, clear and well resourced.

Evaluator sentiment came out lowest against Principle 8 (Evaluating success), which was also an area where HE providers scored themselves lower. Noting that evaluation is historically weak, this may suggest that HE providers would welcome further advice and support in refining and targeting their proposed action to strengthen evaluation.

Findings by institution type

Evaluators were positive overall about action plans, but there was slight variation in the level of positivity across HE providers.

Evaluators' comments on HE providers' action plans in the STEM cluster (2.66), and clusters V (2.65) and J (2.61) had the highest median sentiment score, and those in the Arts cluster were slightly lower (2.36) (see Figure 5).

Figure 5: Sentiment analysis scores of all action plans, by cluster
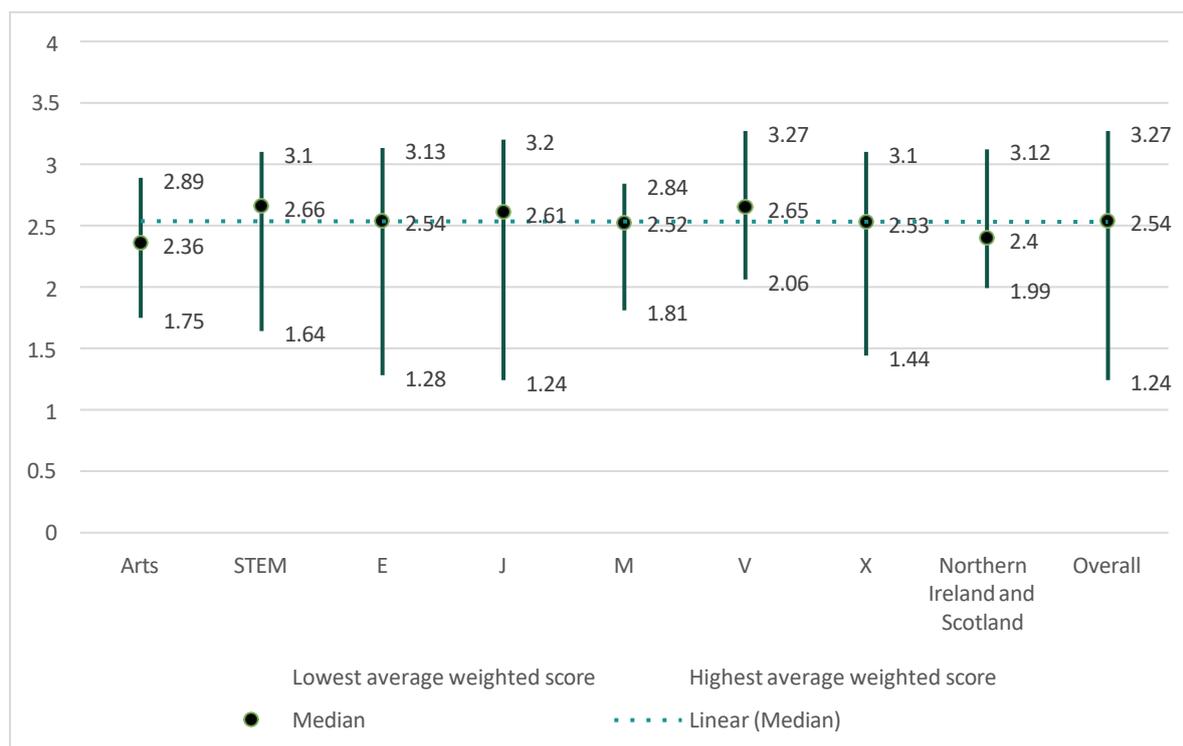
A higher sentiment scoring from evaluators for the STEM cluster was reflected in their comments about HE providers' overall ability to make strong connections between research specialisms and KE. Most of the sampled HE providers demonstrated a strong international dimension to their KE objectives. Across all four sampled HE providers in this cluster, evaluators also noted the evidence of encouraging student entrepreneurship and engagement with local businesses.

The action plans of HE providers in clusters V and J tended to score slightly higher in the sentiment analysis. This is reflected in the evaluators' comments about HE provider missions and objectives being clearly and logically set out and ambitious, and there being a clear alignment between gaps and priority actions. Evaluators across all five sampled HE providers in cluster V also noted a wide variety of self-reported innovative approaches to KE. These may have been innovative at institutional or wider levels. Some (for example, developing a KE internet portal)

reflected innovation at the institutional level, while setting up innovation districts may have been recognised as notable beyond the institution.

HE provider action plans in the Arts cluster had a relatively lower median score, although this was too small to be statistically significant. Where evaluator comments may have influenced scoring is linked to there being mixed views about the clarity and ambition of the plans reviewed. For example, one plan was consistently highlighted as being appropriate and proportionate to the size of the HE provider and as having clear and logical actions; another institution was praised for its clear, mature, ambitious and positive strategy. On the other hand, there were some examples where evaluators in the Arts cluster expressed concerns about the resourcing of some plans as this had not been detailed. In addition, evaluators noted that objectives were not SMART (specific, measurable, achievable, realistic and timebound) and that there were some objectives that could be streamlined and simplified.

5. Findings by KE Concordat principles

The ways in which HE providers are developing their KE activity against increased funding and KE-focused policy initiatives and how these can be strengthened further are areas of increasing interest among government and policymakers alike. The findings across the KE Concordat principles indicate the extent to which HE providers are meeting the aims of each, where their strengths and areas for development lie, and the implications for both HE providers and policymakers to strengthen and develop these activities.

In this section, information from both the quantitative analysis of all 112 action plans and the more in-depth review of 41 sampled action plans is used to draw insights into how HE providers are performing against each of the KE Concordat principles.

Principle 1: Clarity of mission

Principle 1 refers to KE as a recognised part of the overall institutional strategy, with a clear understanding of its institutional role and purpose. Staff, students and external organisations need to understand the aims and priorities of the institution's senior leaders and governors in relation to the whole range of KE activities undertaken by the institution.

Clarity of mission is generally seen as a strength across HE providers and timelines for priority actions are short.

HE providers are generally confident in the clarity of their KE mission. Evaluators also responded positively to actions and examples of innovative practice identified against this principle, suggesting that many HE providers do not just have confidence in their current clarity of mission, but also know how to develop this further within a short timeframe. The scale and diversity of a HE provider's activities vary, depending on the size and mission of the institution, but both the action plans and the evaluators' comments suggest that HE providers' current levels of provision (resources and funding) are appropriate and reflect their KE maturity and ambition.

Examples of good practice identified by the evaluators included:

- linking the KE mission with departmental and faculty goals

- developing more inclusive ways of engaging students in KE, as well as professional and academic staff

- creating a shared definition of KE to inform CRM

- involving early career researchers in creating a KE strategy

Actions to improve are focused on defining objectives, raising awareness of KE priorities and aligning the KE mission with overall institutional strategy

Despite broadly positive self-evaluation scores against Principle 1, providers still recognise that there are opportunities to strengthen the clarity of their mission further. Priority actions identified include:

— defining and developing a distinct KE mission or strategy and associated objectives

— raising awareness

— ensuring that the KE mission is aligned with the overall institutional strategy

Across all HE providers, there was a general belief that they can make progress against these actions, with most priority actions due to be completed within 18 months.

To improve performance against Principle 1 (Clarity of mission), evaluators made several recommendations to HE providers, including the need for institutions to consider:

— embedding KE in institutional strategy further and clearly articulating the HE provider's approach (directed at HE providers who were identified to be at stage 1 of KE maturity)

— providing a view of strategic goals that combines institutional strategic objectives that rely on KE for delivery with key organisational development objectives

— identifying KEF or other metrics upon which to focus improvement

— ensuring that gaps, priority actions and strategic objectives connect or align

HE providers at different stages of KE maturity have different priorities for clarity of mission

Different HE providers are at different stages of KE maturity, and this is appropriately reflected in their priority actions. HE providers recognise that getting Principle 1 right is fundamental to moving to the next phase of maturity.

HE providers in cluster M, which are generally at stage 1, often do not have a KE policy or strategy in place, so their priority action is to develop one. Some HE

providers in the Arts and STEM clusters cited the need to align KE across their institutional strategy, whereas HE providers in clusters E, V, X and J were more specific about the next stage of their KE development (stage 3), such as improving KE visibility across the HE provider, aligning it within departmental planning or improving accountability for KE.

This variation based on KE maturity is to be expected, and importantly, evaluators generally fed back that measures proposed were appropriate and reflective of HE provider's stage of KE maturity.

Principle 2: Policies and processes

Principle 2 (Policies and processes) refers to the need for clear policies on all types of KE undertaken with staff, students, collaborators and beneficiaries so that the policies are understood and operationalised. Institutions should provide evidence of a clear set of policies covering those areas of KE that are central to the provider's mission and values, and consistent with their charitable status and aims.

Many HE providers have confidence in their KE policies and processes, but recognise that implementation and coordination are particularly challenging

Generally, HE providers reported confidence in the policies and processes they have in place for KE activities, although coordination and alignment of their KE policies and processes are a key concern for many. Detailed analysis suggests that this is primarily due to a dispersal of responsibility across different parts and functions of HE providers for different policies and processes.

Some HE providers had implemented good practice to reduce this challenge, including the use of a KE road-mapping tool. Many HE providers particularly considered their IP policies in their submissions, recognising this as a key area of focus for KE and commercialisation activity. An example of good practice was using trained IP champions across centres and faculties to support and refer cases to the central IP team as a means of improving communication between schools and the central team.

A range of actions to improve KE policies and processes was identified, but evaluators caution that their implementation must be sufficiently resourced

HE providers carefully considered mechanisms to improve their KE policies and processes, identifying a range of specific priority actions to improve their approach. Developing and improving IP policy and tailoring it for students were two areas of recurring focus in action plans.

Many HE providers recognise that strengthening policies and supporting their implementation require external engagement. Many HE providers identified a need to set up new and improved governance structures. Reviewing, refreshing and improving transparency and awareness of KE policies also featured prominently amongst the priority actions for Principle 2.

Evaluators generally fed back that the priority actions identified were appropriate, although they cautioned that HE providers would need to dedicate appropriate resource to ensuring that policies are implemented consistently.

To improve performance against Principle 2, evaluators made several recommendations to HE providers, including the need to consider:

— developing an IP policy and setting out ways in which IP might incentivise more KE engagement both internally and externally

— clearly identifying who is accountable for priority actions

— ensuring that actions are appropriately resourced, for example, through allocating core budget to provide additional KE capacity and diversifying income streams such as through consultancy to avoid over-reliance on HEIF funding

— using the National Coordinating Centre for Public Engagement (NCCPE) EDGE tool to develop a KE strategy[13]

— making objectives SMART

— developing an institution-wide approach to KE that is not just concentrated in one central team

— ensuring senior buy-in to KE

— identifying sources of expertise to support the policy and process review

Different HE providers are at different stages of developing KE policies and processes

Principle 2 had the greatest institutional variance in self-evaluation scores of any principle, demonstrating that HE providers have significantly varying confidence in their KE policies and processes. HE providers in cluster V self-scored on average 3.0, and HE providers in cluster M self-scored an average of 2.2. This variance reflects the fact that HE providers are at different stages of their KE development,

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[13] www.publicengagement.ac.uk/support-engagement/strategy-and-planning/edge-tool

with clusters J and M emphasising the need to develop more specific KE policies (stage 1). Clusters X and V were focused on developing formal policies to improve business gateways and the 'front door', as well as standardising data collection (stage 3).

Sampled HE providers in Scotland and Northern Ireland focused on policies aimed at improving access to KE across staff and students through recognition, reward, training and skills development. The Arts and STEM clusters were more focused on where they may have gaps in their policies and the need to improve KE monitoring and governance.

Principle 3: Engagement

Principle 3 (Engagement) refers to the need to build effective relationships by having clear routes to access information and expertise across the institution, with engagement mechanisms and policies developed to suit the needs of a wide range of beneficiaries and partners.

There is a range of good practice against Principle 3, with HE providers focused on ways to improve engagement processes and communication

Evaluator sentiment scoring came out the highest for Principle 3, related largely to the high number of innovative approaches they had identified. Examples of good practice include having a clear KE alumni strategy and contact base, use of third-party brokers such as INPart,[14] and public engagement activities such as hackathons[15] and citizen science.[16]

Many HE providers were keen to improve consistency in engagement with external partners. Examples of HE provider improvement activity included better information and knowledge capture through, for example, a CRM system or a business gateway designed to act as a front door for business engagement. Many HE providers recognise that their websites are more orientated towards prospective students, making it challenging for businesses and others to access information about engagement opportunities. Many priority actions therefore included improving

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[14] IN-PART | Connecting universities and companies to unlock innovation

[15] A hackathon is a design-sprint event, in which computer programmers and others involved in software development work together. It is recognised as an innovative way to bring tech students and the local tech community together.

[16] Citizen science is where members of the public have a greater role in research and contribute insights that a researcher may not typically have.

websites and wider communication material to make a better offer, and setting up incubators to bring more entrepreneurs on site.

Where HE providers identified areas for improvement, their priority actions were viewed by evaluators as relevant. Generally, these actions had short timescales, suggesting they required less time and resource to complete or were further along in the progress towards achieving the institution's KE objectives.

Evaluators noted that there are opportunities to engage external partners, staff and students more in feedback

Many HE providers' priority actions relate to engagement in existing KE activity. Evaluators challenged that there may be more opportunities for HE providers to consider how to include staff and students in KE feedback mechanisms.

To improve performance against Principle 3, evaluators made several recommendations to the sampled HE providers, including the need to consider:

— promoting KE both internally and externally

— understanding and communicating the demands and benefits of KE for internal and external stakeholders, including how they can engage with and shape KE

— increasing student KE engagement

— involving external partners more in defining, shaping and prioritising KE

— including staff and students in feedback mechanisms and in further strategy development

Good practice in engagement can be found across the sector, and lessons against Principle 3 could be learnt across HE providers.

HE providers demonstrate different engagement strengths. Those in the Arts cluster, cluster M and sampled HE providers in Scotland and Northern Ireland demonstrate good practice and innovative ways of engaging locally through regional groups, using Innovation Fellows to act as brokers between academics and industry and the implementation of PURE.[17] Many HE providers from other clusters aspire to grow

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[17] PURE is a generic research information system (www.elsevier.com/en-gb/solutions/pure).

their local engagement, and they might value some of the good practice originating from specialist institutions and institutions in cluster M.

Larger HE providers in clusters E, V, X and J recognise the complexities of having many types of partners and interactions. They are generally focused on improving the ways in which they coordinate and manage their engagements through a single point of contact or a CRM.

Principle 4: Working transparently and ethically

Principle 4 (Working transparently and ethically) refers to the need for HE providers' partners and beneficiaries to understand the ethical and charitable regulatory environments in which the institution operates, including a commitment to inclusivity and equality.

HE providers self-scored highly on working transparently and ethically, with fewer priority actions identified against Principle 4

Across all HE providers, average self-scoring came out highest for Principle 4, with fewer priority actions identified. HE providers demonstrated a variety of innovative practices aligned with Principle 4, including improving visibility and communication of KE processes and policies in order to increase transparency. There were few priority actions proposed, but where they were, these were aligned with:

— embedding equality, diversity and inclusion (EDI) within KE activities

— developing or improving the research code on ethics and safeguarding

— building awareness of IP opportunities

— standardising IP procedures among students and staff

Evaluators challenge that there is more to do to improve equality, diversity and inclusion

While HE providers are confident in their approach to Principle 4, evaluators consistently commented that HE providers should be giving more thought to their approach to EDI in KE. Evaluators identified some examples of good practice among HE providers. For example, one HE provider in the STEM cluster was highlighted by evaluators for setting up an EDI committee, and two HE providers among the seven sampled in cluster E were praised for their approach towards establishing an

integrity champion embedded in each school and for using the Lambert Toolkit for partnership agreements.[18]

To improve performance against Principle 4, evaluators made several recommendations to the sampled HE providers, including the need to consider:

— increasing the visibility and prominence of social justice and EDI

— appointing a head of equality and inclusion, or where such a role already exists, ensuring involvement in thinking about EDI in the context of KE

— establishing a specific capacity-strengthening research centre as an example of sharing good practice with international organisations

— ensuring that IP revenue is shared appropriately with staff, if not already in place

— reviewing and refining policies and processes towards working transparently

— increasing the diversity of the committee responsible for KE

Principle 4 was identified as a strength across all HE providers, with a focus on similar themes

Across all HE providers, Principle 4 was identified as a strength. Most HE provider action plans in the samples were focused on similar themes of better ethical working processes and IP policies, increasing the visibility of KE both internally and externally, and enhancing and embedding EDI into KE practices.

Principle 5: Capacity-building

Principle 5 (Capacity-building) refers to the need to ensure that staff and students are developed and trained appropriately to understand and undertake their roles and responsibilities in the delivery of successful KE.

While HE providers generally self-scored highly against Principle 5, they did identify many priority actions with comparatively long timeframes for completion

Most HE providers self-scored highly on Principle 5, and identified more priority actions against this principle than any other. The majority of the priority actions

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[18] Intellectual Property Office (2016/2022) **Error! Hyperlink reference not valid.**

identified have longer timelines. This suggests that capacity-building is an area where HE providers plan to commit significant resource and effort.

Large numbers of actions were proposed against Principle 5. These were focused on awareness-raising, reward schemes for staff, systematic training and development across both academic and KE professional staff, and embedding KE into the curriculum for students. Some HE providers referenced the need to embed KE into their recruitment practices, promotional criteria and succession planning, as well as offering academics time for KE activity. Embedding KE in researcher training was also a focus for many HE providers.

Evaluators responded positively to the actions proposed by HE providers against Principle 5

Evaluators generally responded positively to the variety of actions proposed by HE providers against Principle 5, believing the proposals to be well developed and resourced. Although the timelines proposed were longer, evaluators generally thought this was appropriate for the types of actions being undertaken.

To improve performance against Principle 5, evaluators made several recommendations to the sampled HE providers, including the need consider:

— working with external partners to develop expertise

— using apprenticeship partnerships with external stakeholders to support capacity-building

— ensuring that continuing professional development (CPD) is available to professional and academic staff

— ensuring that students are supported and engaged

— ensuring all staff understand the importance of KE

— including professional staff and soft skills, such as in leadership or communications, in KE training

— consolidating staff training by establishing internal working groups in business engagement

— factoring KE into workforce planning

Capacity-building was a focus for HE providers in clusters E, V and X and the STEM cluster

HE providers in clusters E, V, X and the STEM cluster saw KE capacity-building as central to their KE strategies, particularly as a means to increase their commercialisation activity. They had linked it to upskilling and training in IP, contract management and spin-out activity.

HE providers with comparatively less KE funding and resources had fewer targeted actions around training and perhaps viewed it as an activity for a later stage in their KE development. While some training activities in cluster M were identified as innovative good practice in the four HE providers sampled, there was mainly a sense that limited resources meant KE-specific training was not prioritised. Three out of the four HE providers sampled in cluster M had actions to review what they did, including a possible induction module and means of sharing good practice internally.

Principle 6: Recognition and reward

Principle 6 (Recognition and reward) emphasises the need to recognise and reward the achievements of staff and students who perform high-quality KE activities.

Principle 6 (Recognition and reward) is an area where many HE providers see opportunities to develop

On average, HE providers self-scored lower against Principle 6 than the other principles, identifying recognition and reward as an area for improvement. There were also fewer priority actions identified against Principle 6. One interpretation of this might be that while HE providers have identified this as an area for development, they are still determining which actions to take.

Many HE providers reported that plans were already in place to improve recognition and reward, but these had not yet taken place or had not yet been applied across the institution

Evaluator comments noted that although there were many examples where plans were in place to improve recognition and reward for KE, this had still not taken place or was not applied consistently across the HE provider.

Almost all HE providers sampled were keen to introduce annual KE awards for both staff and students, both internally and externally, as a way of recognising and celebrating an individual's or partner's KE contribution. HE providers found that few existing means of rewarding and recognising staff were tied to KE.

Some HE providers were keen to review existing practice among their actions, including creating a bespoke KE progression pathway and exploring opportunities for staff to take sabbatical leave to pursue spin-out or impact opportunities. A number of

HE providers also wanted to explore how KE could be incorporated into staff workload models, and appraisal and allocation systems.

To improve performance against Principle 6, evaluators made several recommendations to the sampled HE providers, including the need to consider:

— setting clear success criteria or clearer actions, recognisable to participating staff, students and external partners

— giving KE parity with research and teaching by increasing KE visibility at senior committee levels and/or in workload allocation models, alongside greater internal and external communication of KE activity

— recognising and celebrating students' KE work

— ensuring that the criteria for success in KE-based awards goes beyond income generation and monetary value, but also considers impact and other important factors

— including academics in HE providers' KE working groups so that academic progression, incentives and accountability can be taken into account

— keeping surpluses generated from KE activity to fund internal awards for KE activity

— considering KE contributions as part of the promotions process

— partnering with other institutions to share learning

There was little variation across HE providers against Principle 6

Despite there being few variances across providers, what is of note is that HE provider activities in the STEM cluster and all four HE providers sampled in cluster M wanted to improve metrics, understanding and definitions of what constitutes high-quality KE and the recording and reporting of such towards developing a transparent and open approach to KE recognition and rewards.

Principle 7: Continuous improvement

Principle 7 (Continuous improvement) highlights how HE providers should proactively strive to share good practice with peers and have established processes for learning from this.

HE providers believe they can do more to learn from and share KE practice with others

Generally, HE providers self-scored lower against Principle 7 than the other principles, showing that they recognise that there is more they can do to share good practice and learn from others. HE providers at all stages in their KE maturity were keen to collect better feedback both internally and externally to underpin and inform continuous improvement. A significant majority were concerned with developing improvements to their data collection, including reflecting on their KEF and Research Excellence Framework (REF) impact case studies and developing benchmarks to expand existing reporting procedures to include KE measures.

To improve performance against Principle 7, evaluators made several recommendations to the sampled HE providers, including the need to consider:

— engaging senior leaders so that sharing and exchanging KE experiences at senior levels becomes commonplace

— engaging with external experts such as PraxisAuril or NCCPE to test and improve the quality of KE activity

There were no notable variances across HE providers, which suggests that although HE providers will be at varying stages of implementation and strategy, continuous improvement is consistently challenging across all HE providers.

Principle 8: Evaluating success

Principle 8 (Evaluating success) demonstrates how HE providers should undertake regular institutional and collective monitoring and review of strengthening KE performance through regional, national or international benchmarks.

HE providers are keen to more consistently evaluate the success of their KE activities

HE providers' average self-scoring was lower for Principle 8, suggesting they may be less confident in their approach to evaluating success. Evaluators noted that very few HE providers had consistent approaches to M&E of KE activities and that more or improved evidence (including feedback) needed to be gathered against a good understanding of how the HE provider valued KE.

In their action plans, most sampled HE providers had committed to improving their provision by reviewing their existing policies and processes, and exploring the creation of new ones. Priority actions included adopting more formal reviews of KE performance (including establishing feedback mechanisms to inform benchmarking and KPIs), and developing the use of KEF dashboards and the Higher Education -

Business and Community Interaction (HE-BCI) survey statements.[19] Almost all HE providers reflected on the need to gather evidence to support impact appraisal as an area for improvement.

Evaluators commented that HE providers must consider how feedback and evaluation would inform future strategy or activities

While many action plans considered how success could be evaluated more effectively, evaluators also challenged HE providers to consider how this feedback would be used to inform future strategy and practice.

To improve performance against Principle 8, evaluators made several recommendations to the sampled HE providers including the need to consider:

— regularly monitoring progress towards improving KE visibility

— introducing a risk assessment and due diligence process on new projects, to include EDI

— ensuring that feedback and self-evaluation are based on broader internal and external views

— establishing an agreed definition of success that will feed into a wider range of success measures, include metrics linked to graduate outcomes

— improving KE self-evaluation approaches to address gaps, consistency and prioritisation

All HE providers identify evaluating success as an area for development, but some do appear to be further along in achieving this ambition

HE providers in cluster E appeared to be further along in their plans to develop accountability methods, but still had plans to make these more specific to KE. HE providers in clusters J and V were recognised by evaluators for their innovative approaches to evaluating success through feedback by professional, statutory and regulatory bodies or the use of externally validated awards.

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[19] www.hesa.ac.uk/data-and-analysis/business-community

6. Summary

The KE Concordat recognises a wide range of activity aimed at strengthening HE providers' approaches to both engagement and collaboration. This analysis demonstrates that the focus of KE activity can vary by HE provider size and mission, and is a reflection of each HE provider's KE development and maturity. The findings across principles demonstrated that all HE providers are committed to going further.

HE providers were praised by evaluators for their open and honest self-evaluation of their strengths and areas for development. It was clear that HE providers were dedicated to improving and building on their success, identifying where there were gaps and addressing these with appropriate resources.

Despite the diverse size and mission of HE providers across the sector, all demonstrated confidence in their approach to developing or strengthening their KE policy and the next steps to embedding it into institutional strategy. Even where this had not yet taken place, HE providers prioritised the development of a bespoke KE policy within their action plan as the next stage of their KE development.

Overall, HE providers were found to be confident in their approach to engagement, having well-developed mechanisms for engaging with external partners, while also recognising there is still more they could be doing, such as working with SMEs and other local partners and applying consistency across different parts of the institution in their approach.

Still, HE providers recognise that there are areas where more development is needed. priority actions were in place to address this. For example, capacity-building and reward and recognition were acknowledged by evaluators as needing significant buy-in and resource input from across the HE provider, and the longer timelines for priority actions reflected this.

Where HE providers identified inconsistencies in implementation, or where HE providers acknowledged they were less confident in their approach in relation to evaluating impact and continuous improvement, suggestions for sharing good practice, learning from others, enhancing or improving feedback mechanisms and developing KPIs were a common focus.

7. Conclusion

Strengthening KE between higher education institutions and their external partners has a significant impact on the UK's social, economic and cultural growth. The KE Concordat was developed to recognise and strengthen this impact, helping HE providers to enhance their KE activity through a sector-led KE Concordat. The KE Concordat has provided a framework by which HE providers have been able to identify their KE strengths and areas for improvement, and to consider specific action plans to improve their activities.

It is clear from the sophistication and level of detail in each action plan that all participants have invested significant time and effort into this exercise, which is testament to participating HE providers' commitment to improving KE and reaffirms its importance within the sector. On the whole, KE Concordat action plans suggest HE providers are making a significant social, cultural and economic impact through their KE and broader activities. Greater insight would be gained through specific investigation of the key areas of interest and, further down the line, an explicit consideration about activities related to these areas.

The analysis and recommendations presented throughout this report are intended to help HE providers, policy makers and funders to suggest interventions and engagement that will help HE providers on their journey to improve and develop their KE activities. The commitment of HE providers to continue to improve upon and expand their KE activities against the eight principles, is apparent across all of the action plans and reflected in the breadth of activity demonstrated throughout.

The emerging considerations suggest that HE providers are at varying stages in their KE development and maturity but that there is a commitment across all HE providers to do more. The action plans demonstrate that HE providers are considering the type and effectiveness of current activities, in addition to identifying new activities, to ensure their overall approach to KE provides the best support for its academics and wider staff. The varying stages suggest that there is more that can be done to ensure consistency, embedding and evaluation approaches are built into activities from the outset. Supporting HE providers to share good practice and to learn from each other is also recommended.

Annexes

Annexe 1: Glossary

Term	Definition
CCF	Connecting Capabilities Fund
CPD	continuing professional development
CRM	customer relationship management
EDI	equality, diversity and inclusion
GuildHE	British membership organisation representing the heads of higher education institutions
HE-BCI	Higher Education - Business and Community Interaction
HEFCW	Higher Education Funding Council for Wales
HEIF	Higher Education Innovation Fund
HESA	Higher Education Statistics Authority
IP	intellectual property
KE	knowledge exchange
KEF	Knowledge Exchange Framework
KPI	key performance indicator
Lambert Toolkit	A toolkit that helps institutions and industrial partners carry out collaborative research projects
M&E	monitoring and evaluation
NCCP	National Coordinating Centre for Public Engagement

NCUB	National Centre for Universities and Business
NLU	Natural Language Understanding
REF	Research Excellence Framework
RWIF	Research Wales Innovation Funding
SMART	specific, measurable, achievable, realistic and timebound
SME	small and medium-sized enterprises
STEM	science, technology, engineering and mathematics
UKRI	UK Research and Innovation
UUK	Universities UK

Annexe 2: Knowledge Exchange principles and descriptors

Principle	Descriptor
Principle 1: Clarity of mission	Knowledge exchange is a recognised part of the overall institutional strategy and is valued for the social, cultural and economic outcomes it helps us achieve. We have a clear understanding of the institutional role and the purpose of KE, including the recognition of the needs and interests of potential and current partners and beneficiaries, ensuring a commitment to inclusivity and equality. Clarity of mission is essential for efficient and effective KE. Staff, students and external organisations need to understand the aims and priorities of the institution's senior leaders and governors in relation to the whole range of KE activities undertaken by the institution.
Principle 2: Policies and processes	Where appropriate, we have clear policies on all types of KE that we undertake and work with staff, students, collaborators and beneficiaries so that the policies are understood and operationalised. A well-defined set of relevant policies ensures that all parties engaged in KE have a good mutual understanding of how the institution values KE activity. Institutions should provide evidence of a clear set of policies covering those areas of KE central to the institution's mission and values, and consistent with its charitable status and aims.
Principle 3: Engagement	We build effective relationships by having clear routes to access information and expertise in the university with engagement mechanisms and policies developed to suit the needs of a wide range of beneficiaries and partners working with institutions as publicly funded bodies.
Principle 4: Working transparently and ethically	We make sure that our partners and beneficiaries understand the ethical and charitable regulatory environments in which our institution operates, including a commitment to inclusivity and equality, and we take steps to maximise the benefit to them within that context.

Principle 5: Capacity-building	We ensure that our staff and students are developed and trained appropriately to understand and undertake their roles and responsibilities in the delivery of successful KE.
Principle 6: Recognition and rewards	We recognise and reward the achievements of staff and students who perform high-quality KE activities.
Principle 7: Continuous improvement	We proactively strive to share best practice with our peers and have established processes for learning from this.
Principle 8: Evaluating success	We undertake regular institutional and collective monitoring and review of our strengthening KE performance using this Concordat and through regional, national or international benchmarks to inform the development and execution of a programme of continuous improvement so that KE becomes more effective.

Each of the principles is underpinned by a series of enablers.[20]

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[20] See UUK and GuildHE (undated) Concordat for the advancement of knowledge exchange in higher education.

Annex 3: KE Concordat signatories by nation/KEF cluster in England

HE provider	KEF Cluster	Signatory
England		
Arts University Bournemouth	Arts Specialist	Development year
London Academy of Music & Dramatic Art (LAMDA)	Arts Specialist	Development year
Norwich University of the Arts	Arts Specialist	Development year
Plymouth College of Art	Arts Specialist	Development year
Royal College of Art	Arts Specialist	Development year
Royal College of Music	Arts Specialist	Development year
The Royal Central School of Speech and Drama	Arts Specialist	Development year
University of the Arts London	Arts Specialist	Development year
Liverpool Institute for Performing Arts	Arts Specialist	Principles
Ravensbourne University London	Arts Specialist	Principles
Trinity Laban Conservatoire of Music & Dance	Arts Specialist	Principles
Anglia Ruskin University	E	Development year

Aston University	E	Development year
Bournemouth University	E	Development year
City, University of London	E	Development year
Coventry University	E	Development year
De Montfort University	E	Development year
Goldsmiths, University of London	E	Development year
Kingston University	E	Development year
Liverpool John Moores University	E	Development year
Manchester Metropolitan University	E	Development year
Middlesex University	E	Development year
Northumbria University	E	Development year
Nottingham Trent University	E	Development year
Oxford Brookes University	E	Development year

Sheffield Hallam University	E	Development year
The Open University	E	Development year
University of Westminster, London	E	Development year
University of Bedfordshire	E	Development year
University of Bradford	E	Development year
University of Brighton	E	Development year
University of Central Lancashire	E	Development year
University of Greenwich	E	Development year
University of Hertfordshire	E	Development year
University of Huddersfield	E	Development year
University of Lincoln	E	Development year
University of Plymouth	E	Development year
University of Portsmouth	E	Development year

University of Salford	E	Development year
University of the West of England, Bristol	E	Development year
Birmingham City University	J	Development year
Canterbury Christ Church University	J	Development year
Leeds Beckett University	J	Development year
London Metropolitan University	J	Development year
London South Bank University	J	Development year
Teesside University	J	Development year
University of Derby	J	Development year
University of Northampton	J	Development year
University of Chester	J	Development year
University of East London	J	Development year
University of Gloucestershire	J	Development year

University of Roehampton	J	Development year
University of Sunderland	J	Development year
University of Wolverhampton	J	Development year
Staffordshire University	J	Principles
Bath Spa University	M	Development year
Bishop Grosseteste University	M	Development year
Buckinghamshire New University	M	Development year
Edge Hill University	M	Development year
Falmouth University	M	Development year
Leeds Trinity University	M	Development year
Liverpool Hope University	M	Development year
Newman University	M	Development year
Solent University	M	Development year
St Mary's University, Twickenham London	M	Development year

University of Cumbria	M	Development year
University of West London	M	Development year
University of Winchester	M	Development year
York St John University	M	Development year
University of Chichester	M	Principles
University of Suffolk	M	Development year
Cranfield University	STEM Specialist	Development year
Harper Adams University	STEM Specialist	Development year
Hartpury University	STEM Specialist	Development year
Liverpool School of Tropical Medicine	STEM Specialist	Development year
London School of Hygiene & Tropical Medicine	STEM Specialist	Development year
Royal Veterinary College	STEM Specialist	Development year
St George's, University of London	STEM Specialist	Development year
The Institute of Cancer Research	STEM Specialist	Development year

The Royal Agricultural University	STEM Specialist	Development year
Imperial College London	V	Development year
London Business School	V	Development year
Newcastle University	V	Development year
Queen Mary University of London	V	Development year
University College London (UCL)	V	Development year
University of Birmingham	V	Development year
University of Bristol	V	Development year
University of Leeds	V	Development year
University of Liverpool	V	Development year
University of Manchester	V	Development year
University of Nottingham	V	Development year
University of Oxford	V	Development year

University of Sheffield	V	Development year
University of Southampton	V	Development year
University of Warwick	V	Development year
Birkbeck, University of London	X	Development year
Brunel University London	X	Development year
Durham University	X	Development year
Keele University	X	Development year
Lancaster University	X	Development year
London School of Economics and Political Science (LSE)	X	Development year
Royal Holloway and Bedford New College	X	Development year
SOAS, University of London	X	Development year
University of Bath	X	Development year
University of East Anglia	X	Development year

University of Essex	X	Development year
University of Exeter	X	Development year
University of Hull	X	Development year
University of Kent	X	Development year
University of Leicester	X	Development year
University of Reading	X	Development year
University of Surrey	X	Development year
University of Sussex	X	Development year
University of York	X	Development year
Loughborough University	X	Principles
School of Advanced Study, University of London	Other	Principles
Northern Ireland		
Queen's University, Belfast	Northern Ireland	Development year
Scotland		
Queen Margaret University, Edinburgh	Scotland	Development year

Royal Conservatoire of Scotland	Scotland	Development year
University of Strathclyde	Scotland	Development year
Glasgow Caledonian University	Scotland	Principles
Robert Gordon University	Scotland	Principles
Scotland's Rural College	Scotland	Development year
University of St Andrews	Scotland	Principles
University of Stirling	Scotland	Principles
University of the Highlands and Islands	Scotland	Principles
University of the West of Scotland	Scotland	Principles
Wales		
Abertay University	Wales	Principles
Aberystwyth University	Wales	Principles
Bangor University	Wales	Principles
Cardiff Metropolitan University	Wales	Principles
Cardiff University	Wales	Principles
Swansea University	Wales	Principles
University of South Wales	Wales	Principles
University of Wales Trinity Saint David	Wales	Principles

Wrexham Glyndwr University	Wales	Principles