

MASTERS' UNION

Annual Ethics Committee Report

Institutional Governance, Conduct and Ethical Practice

Reporting Period: April 2025 - March 2026

Prepared for publication by the Office of Institutional Governance

Executive Summary

This Annual Ethics Committee Report records the work undertaken by Master's Union to uphold ethical conduct, fair process, confidentiality, and accountability across institutional operations. It is grounded in the Code of Ethical Business Conduct Policy, which sets expectations for employees, interns, consultants, contractors, partners and other stakeholders, and defines the process for reporting and reviewing ethical conduct concerns.

During the reporting year, the Committee's work moved beyond case disposal. It reviewed individual submissions, identified recurring risk patterns, routed specialised matters to the appropriate forum, and strengthened operating guardrails around grievance escalation, data use, confidentiality, workplace conduct, conflicts of interest, and stakeholder-facing communications.

Year in Review

12 scheduled meetings held	21 submissions reviewed	5.8 days average turnaround	91% average attendance
4 expedited reviews	9 formal claims or complaints	10 advisory / preventive reviews	3 process changes introduced

1. Institutional Mandate and Policy Basis

The Ethics Committee operates within the institutional framework established by the Code of Ethical Business Conduct Policy. The policy affirms that Master's Union is committed to a high level of ethical conduct in its dealings with employees, partners, customers and other stakeholders, and expects the same standard from employees, interns, consultants and others working in or with the organisation.

The Committee's mandate is organisational rather than research-specific. It reviews ethical concerns relating to governance, internal processes, workplace conduct, confidentiality, conflicts of interest, responsible use of institutional assets, grievance escalation, and other forms of misconduct covered by the policy.

Policy areas informing Committee review

- prohibition of discrimination, retaliation;
- business ethics, gifts, solicitation and stakeholder conduct;
- confidentiality, security and protection of company, personal and third-party information;
- financial irregularities, misappropriation, fraud, misuse of resources and conflicts of interest;
- acceptable use of company assets, e-mail, internet and communication systems;
- workplace hygiene, safety, violence prevention, smoke-free and drug- and alcohol-free workplace expectations;
- outside employment, personal relationships, related-party reporting and perceived favouritism;
- employee grievance escalation and fair-process review;
- general misconduct, including unauthorised data transfer, false records, malicious statements and breaches of institutional policies.

Operating principle

Where uncertainty exists, employees are expected to seek guidance from their reporting manager or HR before proceeding. Where misconduct is alleged, the institution may investigate the matter and, where required, refer it to the Ethics Committee for fair and unbiased inquiry.

2. Committee Constitution and Composition

The Code of Ethical Business Conduct Policy provides for an Internal Ethics Committee comprising two permanent members, one floating member and one chairperson. The floating member is included to provide functional expertise depending on the nature of the matter under review.

Committee position / representation	Composition for reporting purposes
Chairperson	Sudhanshu Garg
Permanent Member	Parinita Kaur
Additional permanent member	Designated institutional representative as per internal records
Floating member	Functional expert invited based on the subject matter
HR / People Operations interface	Supports grievance intake, employment-related review and disciplinary coordination
Specialist referral forum	Legal, data, finance, academic, HR or operations teams, as applicable

The Committee may invite additional participants where specialist inputs are required, while maintaining confidentiality, avoiding conflicts of interest, and limiting access to information on a need-to-know basis.

3. Meeting Schedule, Attendance and Participation

The Committee follows a regular monthly meeting cycle. Urgent or sensitive matters may be reviewed through expedited meetings or written circulation where waiting for the next scheduled meeting would create avoidable risk, delay or harm.

Governance measure	2025-26 position
Planned monthly meetings	12
Meetings held	12
Meeting adherence	100%
Average attendance	91%
Expedited reviews	4
Matters requiring specialist participation	2
Composition changes during the year	No structural change; floating member varied by subject matter

Participation was strongest in matters requiring cross-functional review, particularly those involving data protection, confidentiality, grievance escalation, student-facing processes, or workplace conduct. The floating-member model allowed the Committee to bring subject expertise into the review without expanding the standing committee unnecessarily.

4. Public Access and Submission Procedure

The institution maintains defined routes through which employees and relevant stakeholders may raise ethical conduct concerns, grievance matters, misconduct allegations, or requests for guidance. The procedure is designed to encourage early resolution where appropriate, while preserving access to formal review where a matter is serious, unresolved, sensitive, or involves possible misconduct.

4.1 Who may submit

Submissions may be raised by employees, interns, consultants, contractors, partners or other stakeholders working with or affected by institutional processes. Student-facing or stakeholder-facing concerns may also be routed to the relevant institutional team for screening and referral where they fall within the Committee's remit.

4.2 Routes for raising concerns

- Direct manager: employees are encouraged to raise operational or interpersonal grievances first with their direct manager where it is safe and appropriate to do so.
- Skip-level manager: where the concern relates to the manager, or the manager is unable to resolve the matter, the employee may approach the skip-level manager.
- Head of Department and HR Department: unresolved or serious matters may be escalated to the Head of Department and HR.
- HR Head: where the matter remains unresolved after departmental and HR review, it may be referred to the HR Head.
- Ethics Committee members: ethical conduct-related complaints may be sent to one or all members of the Ethics Committee.
- Specialist forums: matters falling under legal, data protection, finance, academic discipline or other specialised processes are referred to the relevant forum while preserving appropriate confidentiality.

4.3 Information expected in a submission

- name and contact details of the person submitting, unless anonymity is permitted under the applicable reporting route;
- brief description of the concern, including dates, people involved and relevant context;
- policy area or ethical issue involved, where known;
- supporting documents, communications, data records, screenshots or other evidence, if available;
- whether the matter has already been raised with a manager, HR, department head or another forum;
- any immediate risk, confidentiality concern, retaliation risk or urgency requiring expedited review.

4.4 Review process

Stage	Procedure
Acknowledgement and screening	The submission is acknowledged and screened to determine whether it falls within the Ethics Committee remit or should be referred to another process.
Conflict and confidentiality check	Access is limited to relevant reviewers; conflicts of interest are identified and managed.
Preliminary assessment	The Committee or designated reviewer assesses facts, urgency, policy relevance and potential risk.
Inquiry, where required	Where the institution decides that an inquiry is required, the case may be referred to the Ethics Committee for fair and unbiased inquiry.
Opportunity to respond	Normally, sanctions are imposed only after an inquiry or after giving the concerned employee an opportunity to explain their conduct, subject to the nature and severity of the matter.
Evidence summary and findings	A concise summary of evidence and arguments is recorded; the inquiry report specifies findings.
Decision and action	The Committee determines whether misconduct occurred and recommends or communicates appropriate disciplinary or corrective action, where applicable.
Closure and follow-up	Closure may include guidance, process correction, referral, monitoring, training, policy clarification or disciplinary action.

If an employee refuses or fails to attend or participate in an inquiry, the matter may proceed ex parte, consistent with the policy and applicable law. The institution may also suspend employment, with or without allowance, for part or all of the inquiry period depending on the seriousness and circumstances of the matter.

4.5 Confidentiality and non-retaliation

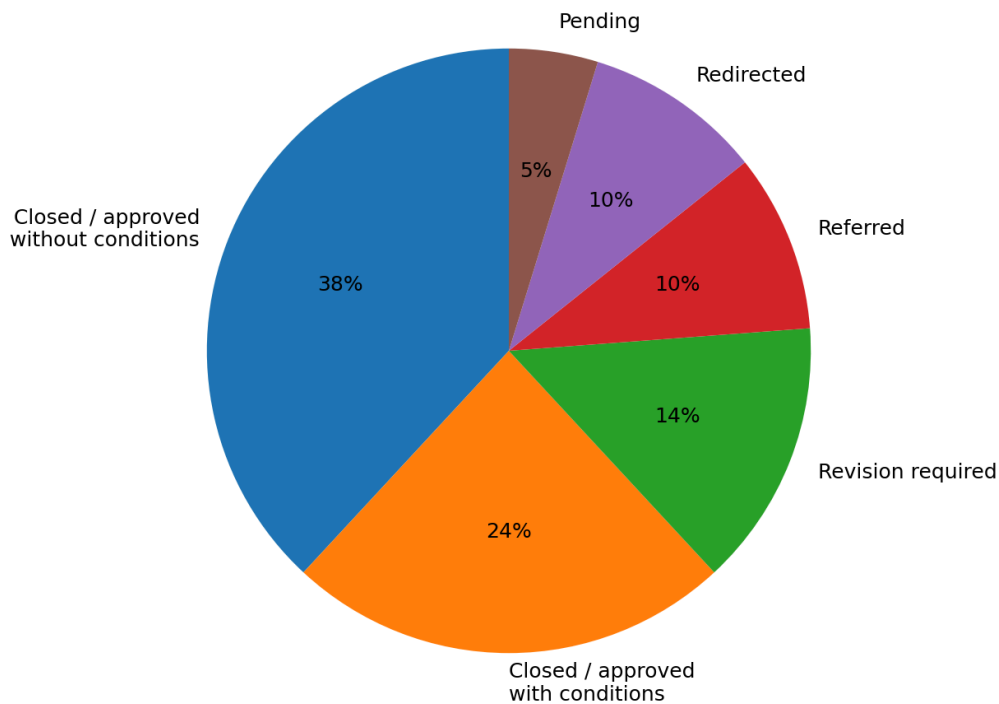
The identity of an individual making a report is protected as far as practical. Retaliation, intimidation, pressure to withdraw a case, or threats for reporting, testifying or participating in an inquiry are prohibited. Individuals who believe they are facing retaliation may report the concern to their manager or HR for review and appropriate action.

5. Workload, Throughput and Decisions

The Committee reviewed 21 submissions during the reporting year. These included formal complaints, advisory reviews, preventive reviews, policy clarifications and matters redirected to specialised forums. The volume indicates that the Committee functioned both as a review forum and as an early-warning mechanism for institutional risk.

Submission category	Count	Purpose
Formal claims / complaints	9	Matters alleging grievance, misconduct, process unfairness, retaliation risk or breach of policy.
Advisory and preventive reviews	10	Requests for guidance before an activity, campaign, data use, partnership or process was finalised.
Redirected / out-of-scope	2	Matters routed to another forum because they did not fall within the Committee remit.
Total submissions reviewed	21	Total annual workload across formal and preventive channels.

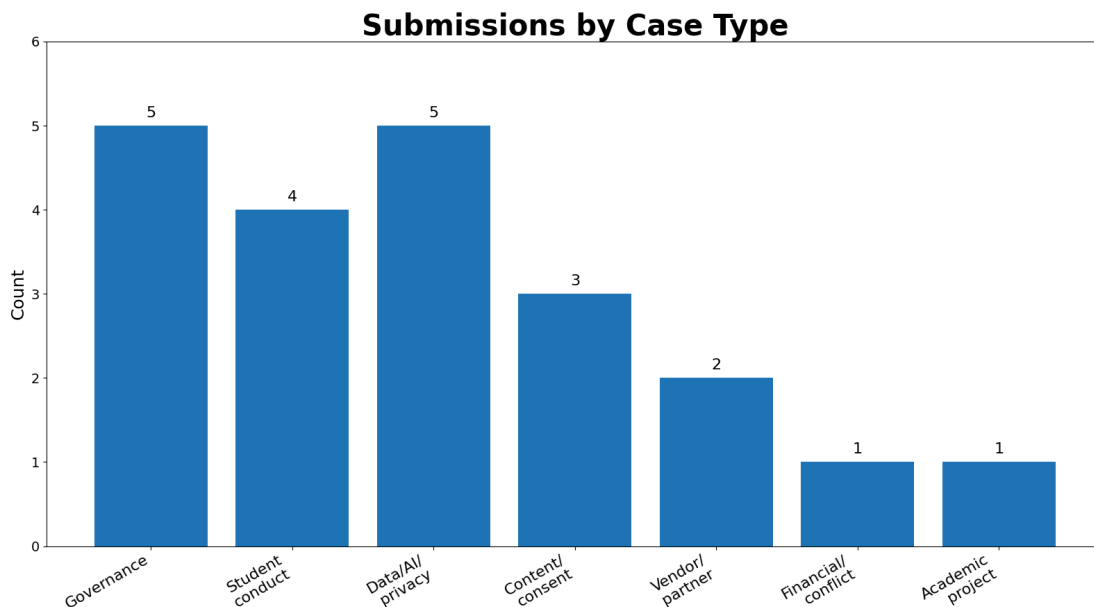
Review Outcomes



Outcome	Count	Interpretation
Closed / approved without conditions	8	Matter resolved or approved without additional control requirements.
Closed / approved with conditions	5	Allowed to proceed after corrective controls, revised language, consent, access controls or process changes.
Sent back for revision	3	Returned because submission lacked sufficient facts, consent design, safeguards or documentation.
Referred to specialist process	2	Routed to HR disciplinary, legal, data, finance or academic forum.
Redirected / out of scope	2	Redirected to normal operational ownership.
Pending at year-end	1	Under review or awaiting documentation at close of reporting year.

6. Types of Matters Reviewed

The Committee's workload was concentrated in five areas: process fairness, student and staff conduct, data and confidentiality, stakeholder-facing consent, and workplace conduct and non-retaliation risk. This spread reflects the breadth of the Code of Ethical Business Conduct Policy and the increasing complexity of institutional operations.

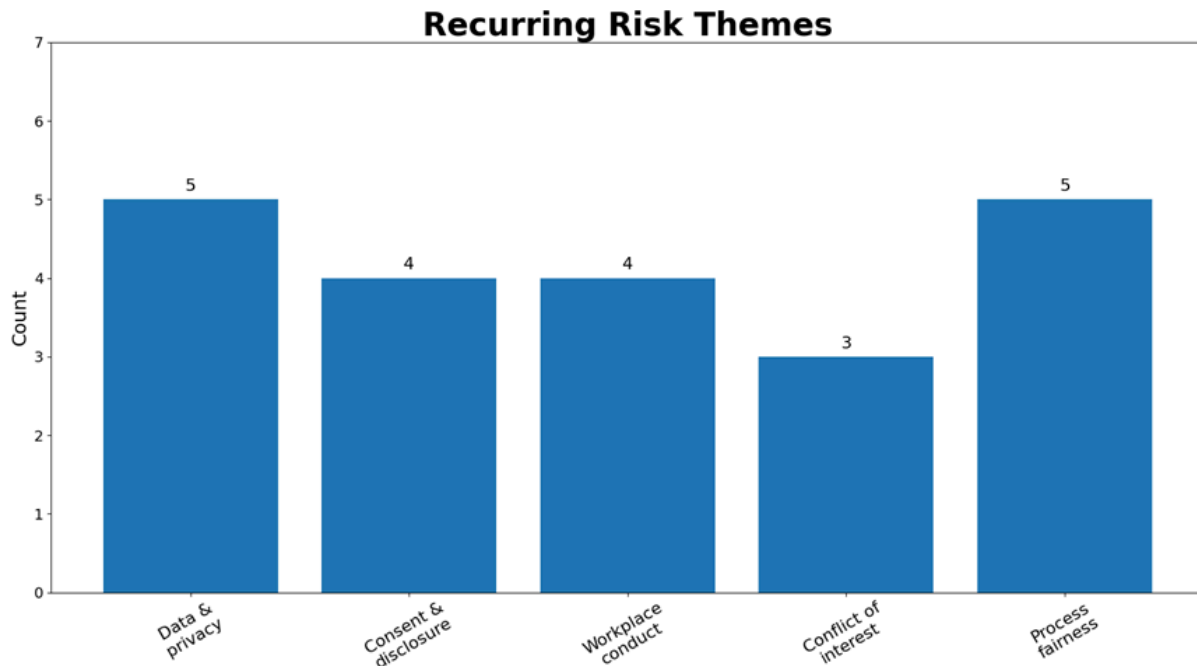


Case type	Count	Examples of issues reviewed
Process and governance concerns	5	Escalation route clarity, decision transparency, internal approvals, documentation gaps.
Student conduct / learning environment	4	Classroom conduct, peer dynamics, fair access to support or opportunities.
Data, AI and privacy reviews	5	Use of personal data, internal datasets, AI tools, external platforms, confidentiality safeguards.
Content, communications and consent	3	Use of student images, testimonials, survey wording, participant disclosures.

Case type	Count	Examples of issues reviewed
Partnership / vendor ethics	2	Data ownership, vendor access, confidentiality, stakeholder representation.
Financial irregularities / conflicts / assets	1	Conflict disclosures, misuse of assets, gift or quid pro quo concerns.
Academic project ethics	1	Human-participant project requiring consent and anonymisation controls.

7. Risks and Pressure Points Observed

The Committee's most important contribution was not only resolving cases, but identifying the pressure points that repeatedly created institutional risk. The following themes shaped the year's work.



Risk theme	Observed pressure point	Committee response
Data and confidentiality	Personal or institutional data being shared without clear access control, retention limits or ownership clarity.	Required tighter access approvals, anonymisation, limited sharing and clearer accountability.
Consent and disclosure	Student-facing surveys, testimonials, recordings or content sometimes lacked sufficiently clear consent language.	Introduced standard consent expectations and revision requirements before publication or data use.
Workplace conduct and non-retaliation	Some matters required screening to distinguish general conduct concerns from grievance, HR or disciplinary issues.	Referred appropriate cases to HR or the relevant review forum while monitoring systemic learning for workplace culture.
Conflict of interest	Outside engagements, vendor relationships, reporting-line sensitivities or related-party situations created perceived or actual conflicts.	Required disclosure, recusal or manager/HR approval before proceeding.
Process fairness	Escalations often arose when decision routes, evidence requirements or appeal points were unclear.	Clarified escalation paths and improved documentation of decisions and follow-up actions.

8. Case Snapshots

The following anonymised snapshots illustrate the Committee's review approach. They are included to show decision logic while protecting confidentiality.

Case	Ethical concern	Committee decision / impact
Student survey using sensitive information	A student-led survey collected sensitive personal information without sufficiently clear consent and anonymisation protocols.	Approval was granted only after revision of participant information, removal of unnecessary identifiers and addition of anonymised reporting safeguards.
Use of AI tool with institutional data	A team proposed using an external AI tool to process internal student and placement-related information without clarity on data retention.	The Committee required restricted data fields, no upload of sensitive identifiers, and documented approval before external tool use.
Workplace conduct and retaliation concern	A grievance raised concerns about interpersonal conduct and perceived pressure after escalation.	The matter was screened for retaliation risk, routed through HR review, and followed by guidance on escalation hygiene and non-retaliation expectations.
Vendor partnership involving learner data	A vendor engagement created uncertainty regarding data ownership, access rights and confidentiality obligations.	The Committee required clearer contractual safeguards, limited access, and defined accountability before operational rollout.

9. Decisions, Institutional Impact and Process Changes

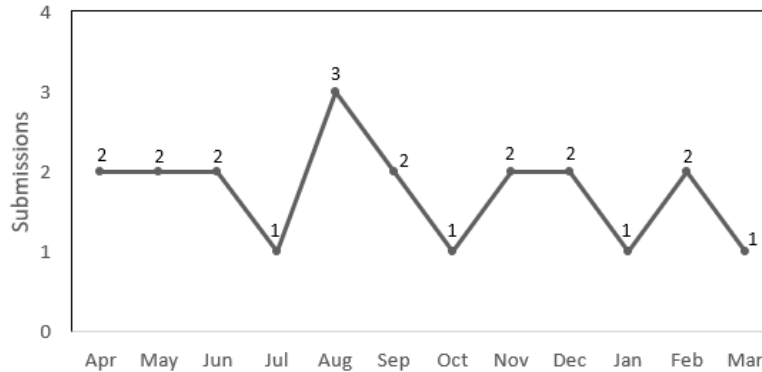
Several reviews resulted in broader process improvements. These changes indicate that the Committee functioned as a preventive governance mechanism, not merely a complaint-handling body.

- Consent language was standardised for student-facing surveys, testimonials, recordings and content-led activities.
- Data access reviews were routed through a clearer approval step where institutional, personal or third-party information was involved.
- AI-tool use was brought under a more cautious review approach, especially where student, placement or employee data could be processed externally.
- Grievance escalation routes were clarified so that employees could distinguish between manager-level resolution, HR escalation, Ethics Committee review and specialist referral.
- Conflict-of-interest concerns were addressed through earlier disclosure, recusal where required, and manager/HR review before proceeding.

10. Repeat Issues and Emerging Patterns

Three patterns stood out during the year. First, data- and AI-related questions increased as institutional teams and students used more external tools and digital workflows. Second, several concerns were preventable and arose from unclear consent, documentation or approval steps. Third, more matters were being raised early for advice rather than only after a complaint, suggesting improving awareness of ethical review as a preventive mechanism.

Monthly Submission Flow



- Data, AI and privacy formed the largest single technical risk cluster, appearing directly or indirectly in 6 matters.
- Consent and disclosure issues appeared frequently in student-facing projects, marketing content and surveys.
- Expedited reviews were most often used where delays could affect student communication, vendor activation, urgent process clarification or risk containment.
- Formal complaints were fewer than preventive reviews, indicating that the Committee was increasingly being used before issues escalated.

11. Forward Priorities for 2026-27

The Committee will focus on making ethics review easier to access, more consistent to administer, and more useful as an institutional early-warning system.

Priority	Time-bound action
Standard submission form	Introduce a common ethics submission form with risk categories by Q2 2026-27.
Turnaround targets	Set a target turnaround of 5 working days for standard matters and 48 hours for urgent screening.
Tracking dashboard	Build a basic register covering submissions, category, decision, referral, turnaround and closure status by Q3 2026-27.
Data and AI guardrails	Issue practical guidance on external AI tools, student data, third-party data, retention and anonymisation by Q2 2026-27.
Consent templates	Create standard consent and disclosure language for surveys, testimonials, recordings and student-facing campaigns by Q2 2026-27.
Training and awareness	Run an annual refresher on the Code of Ethical Business Conduct, grievance escalation and non-retaliation expectations.

Conclusion

The reporting year demonstrates that the Ethics Committee is an active institutional governance mechanism. Its work covered formal complaints, preventive reviews, policy interpretation, specialist referral and risk-pattern identification. The Committee's agenda reflected the practical ethical issues arising in a modern, high-growth education institution: data use, confidentiality, consent, fair process, workplace conduct, conflicts of interest and stakeholder trust.

The next phase of work will focus on stronger intake design, clearer routing, faster standard-case closure, improved data tracking and practical guardrails for teams. These steps will help ensure that ethical conduct remains embedded in everyday decision-making rather than addressed only after concerns arise.

Appendix A: Code of Ethical Business Conduct - Areas Mapped to Committee Oversight

Policy area	Relevance to Committee review
Discrimination, workplace conduct and retaliation	Screening, referral, non-retaliation safeguards and process review.
Business ethics, gifts and solicitation	Assessment of quid pro quo risk, inappropriate influence and stakeholder conduct.
Confidentiality and security	Controls around institutional, personal, customer, supplier and third-party information.
Financial irregularities	Review or referral of theft, fraud, misreporting, falsification, misuse of resources or financial conflicts.
Acceptable use of assets and technology	Use of computers, devices, networks, e-mail, internet and data in an ethical and lawful manner.
Workplace safety and violence prevention	Routing of threats, intimidation, coercion or conduct affecting safety.
Drug, alcohol and smoke-free workplace	Conduct expectations and disciplinary referral where required.
Outside employment and conflicts of interest	Disclosure, approval, reporting-line sensitivities, related-party concerns and recusal.
Employee grievance	Escalation from manager to skip-level, HOD/HR, HR Head and Ethics Committee as relevant.
General misconduct	Review of conduct prejudicial to the institution, unauthorised data transfer, false information and policy breaches.