Procedure: Policy governance

Purpose

The purpose of this procedure is to provide for the operationalisation of the Policy Governance policy.

Definitions

Definitions used in these procedures are specified under the Policy Governance Policy.

Procedure

Categories

1. The appropriate category for a policy document is determined by reference to the definitions contained in the Policy Governance policy.

2. Where the appropriate category for a policy document is unclear, the member of the University Executive who is responsible for the service area that developed the policy document makes the final decision. Where a policy document could be categorised as 'governance', members of the University Executive are included in the decision-making process.

Custodians

3. The appropriate Responsible Officer for a policy document is the Director of the Service Division with portfolio responsibility for the subject matter of the policy document. When appropriate, a member of the University Executive with relevant portfolio responsibility may be assigned as Responsible Officer.

4. Where the Responsible Officer for a policy document is unclear, the member of the University Executive who is responsible for the service area that developed the policy document makes the final decision.

Content and design

5. The Policy Governance policy requires that policy documents are written, presented and provide supporting information as specified by this procedure.

6. Policy documents are written and presented:

a. in a style consistent with the requirements of the ANU Writing Style Guide;

b. in plain everyday English, applying the 'average person on the street' test;

c. with a title that is easily understood by most potential users;

d. with a logical structure and appropriate headings and sub-headings;

e. without the use of unexplained jargon, technical or legal terms, acronyms or abbreviations;

f. succinctly, being no longer than they absolutely need be (preferably no more than two pages per policy document);

g. in definite, rather than vague language;

h. in gender neutral and gender inclusive language;

i. with consistent use of terminology (and for student related policy documents, definitions must be consistent with the Glossary: Student Policies and Procedures Policy).

7. Policy documents adopt a consistent style and format in their presentation, using only official templates and/or native files provided by the Policy Manager. Policy document templates are consistent with the Visual Identity Guide, wherever possible.

8. Policy documents contain current information in terms of use of names, titles, and references to law, other policy documents, delegations, web links and other documents.

9. Policy documents clearly articulate relevant stakeholders, delegations and decision-makers, where required.

Development

10. Proposals for new policy documents or changes to existing policy documents originate from the Service Division or University Executive member with relevant portfolio responsibility.

11. Proposals which come forward from a College are first endorsed by the College Dean and then discussed with and endorsed by the relevant member of the University Executive or Service Division Director.

12. Local Protocols which are applied exclusively within a College or Service Division are endorsed and approved by the College General Manager and College Dean or Service Division Director, respectively.

Development of new policies, procedures and standards

13. New policy documents will only be considered for development if required, and if the intended provisions cannot be incorporated into an existing document.

14. A Policy Document Concept Proposal (or a similar discussion paper) is prepared for all proposed new policies, procedures and standards.

15. A new policy, procedure or standard is not fully developed or considered for approval, unless a Policy Document Concept Proposal (or a similar discussion paper) has been prepared and approved, as outlined in the Endorsement and Approval table below.

16. A Policy Document Concept Proposal is prepared using the nominated University form or, as an alternative, a discussion paper can be prepared (i.e., MEMO). Either document will articulate:

a. a justification for the policy, procedure or standard, including an analysis of potential alternative ways, if any, of achieving the same objectives;

b. a statement of the objectives of the policy, procedure or standard;

c. how the policy, procedure or standard accords (or is not inconsistent) with the strategic objectives of the University;

d. any relevant legislated or other mandated requirements;

e. the consultation to be undertaken on the policy, procedure or standard in development, identifying the stakeholders that are to be consulted; and

f. an assigned Responsible Officer and Responsible Executive for a policy, procedure, or standard.

17. Once completed, a Policy Document Concept Proposal is submitted for endorsement, as outlined under the table below.

18. All new policies, procedures and standards are submitted to the University Policy Manager via email to policy@anu.edu.au.

19. For new governance and administrative policies, procedures and standards, following endorsement, the University Policy Manager advises the Responsible Officer and any other associated proponent(s) to proceed to full development of the draft policy, procedure or standard.

20. For new academic policies, procedures and standards, following endorsement, the office of the relevant Responsible Executive will advise the Responsible Officer and any other associated proponent(s) to proceed to full development of the draft policy, procedure or standard.

Development of new guidelines

21. Guidelines are developed at the discretion of the Responsible Officer. A Policy Document Concept Proposal is not required for the development of a guideline.

22. Following appropriate consultation with relevant stakeholders, guidelines are endorsed and approved according to the procedures described in the Endorsement and Approval table below.

Advice and support

23. The University Policy Manager is available to provide advice and assistance to staff developing policy documents, at any stage of the development process, on matters such as:

a. Compliance with the Policy Governance policy and this procedure;

b. Reviewing of drafts of a policy document;

c. Use of appropriate written language;

d. Use of official templates;

e. Consultation processes and assessing feedback;

f. Information on existing policy documents; and

g. Seeking information on the practices of other universities and relevant organisations.

Major Amendments and repeals

24. Amendments that significantly change the content or focus of a policy, procedure or standard, are subject to the endorsement and approval process that is outlined in the Endorsement and Approval table below.

a. The Responsible Executive is authorised to determine if the change is significant or not.

b. A change to a policy, procedure or standard that is not regarded as significant is considered minor amendment.

25. A policy document is only repealed with the endorsement of the Responsible Officer and Responsible Executive and approval by the relevant Approval Authority.

Minor amendments

26. A minor amendment may be approved by the following officers:

a. Approval Authority;

b. Responsible Executive;

c. Responsible Officer; or

d. University Policy Manager.

27. Officers authorised to make minor amendments to policy documents submit their changes to the University Policy Manager by sending an email to policy@anu.edu.au.

28. Following receipt of a minor amendment, the University Policy Manager records the changes to the relevant policy document.

Reviews

29. Reviews are carried out at least every five years (or at more frequent intervals as determined by the Responsible Officer) to ensure adequacy and relevance with current legislative instruments or new/changed operational requirements.

30. New policy documents are evaluated within one year of publication to confirm alignment with their intended purpose and adherence to University process, resetting the review cycle to the standard five-year interval upon completion of these initial assessments.

31. When conducting a review, Responsible Officers must assess whether a policy document remains necessary and continues to reflect University processes or if it can be repealed.

32. The University Policy Manager provides to Responsible Officers, at least on a six-monthly basis, a complete list of all policy documents that are due or overdue for review, and a list of policy documents due for review in the coming calendar year.

33. Where there are several policy documents about the same broad subject, the Responsible Officer will time the reviews to occur concurrently to ensure consistency of outcome.

34. If policy documents cover the same broad subject, and are therefore grouped for review, the Responsible Officer must consider whether these policy documents can be merged, including into Policy Library Handbooks.

35. The annual plan for the review of academic policy documents for the calendar year is provided to Academic Quality and Assurance Committee (AQAC) and Academic Board in the first quarter of each calendar year.

36. The annual plan for the review of administrative and governance policy documents for the calendar year is provided to the Vice Chancellor in the first quarter of each calendar year.

37. As part of the policy review process, a schedule of *academic policy* reviews and overdue policies is provided to the Academic Board on a six-monthly basis.

38. As part of the policy review process, a schedule of *administrative and governance* policy reviews and overdue policies is provided to the Vice Chancellor on a six-monthly basis.

Major reviews

39. A Responsible Officer ensures that a major review of a policy document includes consultation with affected or concerned organisational units, staff, students and other key stakeholders of the University. Please read the Policy Document Consultation Guideline for further assistance.

40. A written log of all consultation undertaken and feedback received is kept throughout the review process. A template consultation log is available online.

41. The University Policy Manager is available to provide advice and assistance to staff reviewing policy, at any stage of the review process, on matters such as:

a. compliance with the Policy Governance policy and this procedure;

b. reviewing of drafts of changes to a policy document;

c. use of appropriate written language;

d. use of official templates;

e. consultation processes and assessing feedback;

f. information on existing policy documents; and

g. seeking information on the practices of other university and relevant organisations.

Minor reviews

42. The University Policy Manager or the Responsible Area undertake a minor review of every policy document and form contained in the policy library, as needed to ensure they are up to date.

43. A minor review will involve the checking of a policy document for currency and accuracy of all titles, names, numbering, hyperlinks, metadata and references to law, other policy documents, delegations, or other relevant documents. In conducting the minor review, the University Policy Manager and the Responsible Officer may work collaboratively to carry out the review.

44. Upon completion of the minor review, the University Policy Manager records any necessary changes to the relevant policy document and/or its metadata in the policy library.

Consultation and assessment of operational impact

45. The Responsible Officer ensures that all relevant stakeholders are consulted as part of the development of a new policy document or when major reviews are carried out. For further guidance on appropriate consultation practices please read the Policy Document Consultation Guidelines.

46. The Responsible Officer ensures that policy documents are thoroughly tested and consulted in the development stage to ensure they can be easily implemented, with likely operational problems identified and resolved prior to approval.

47. A written log of all consultation undertaken and feedback received is kept throughout the review process.

Endorsement and approval

48. All policy documents receive the required endorsements, as specified in this procedure, prior to being presented for approval by the Approval Authority.

49. Minor reviews are approved by the Responsible Officer , and no further approval is required.

50. Major reviews and newly developed policy documents are subject to a relevant committee's consideration prior to endorsement and approval.

51. The Approval Authority for new or majorly reviewed policy documents is as follows:

Category	Policy document	Submission to: Policy manager and Relevant Committee	Endorsement Authority	Approval Authority
Governance	Policy	Yes	Vice Chancellor	Council
	Procedure/ Standard	Yes	Vice Chancellor	Council
	Guideline	Yes	Responsible Officer	Responsible Executive
Academic	Policy	Yes	Responsible Executive	Academic Board
	Procedure/ Standard	Yes	Responsible Executive	Academic Board
	Guideline	Yes	Responsible Officer	Responsible Executive
Administrative	Policy	Yes	Responsible Executive	Vice-Chancellor
	Procedure/ Standard	Yes	Responsible Executive	Chief Operating Officer

	Guideline	Yes	Responsible Officer	Responsible Officer

*All **forms** are submitted to the Responsible Officer for endorsement and approval.

52. The Council may exercise its authority to approve any policy document in any category should it resolve to do so.

53. The Vice-Chancellor may exercise their authority to approve a procedure, standard or guideline that may otherwise be approved by a Responsible Executive, or a Responsible Officer.

54. A Responsible Executive may exercise their authority to approve a guideline, which falls within their portfolio of responsibility, which otherwise is approved by a Responsible Officer.

Committees

Academic Policy Documents

55. The University Policy Manager is advised of an academic policy document, before it is submitted to the Academic Quality Assurance Committee (AQAC) or University Research Committee (as appropriate) for endorsement. The University Policy Manager assesses it for compliance with the Policy Governance policy, and offers feedback to the Responsible Officer for consideration.

56. For academic policy documents, the Academic Quality Assurance Committee or University Research Committee (as appropriate) considers the draft policy document, and determines whether to recommend its approval to the Academic Board. In turn, the Academic Board as the Approval Authority approves the academic policy documents.

57. The Secretary to the Academic Board is responsible for:

a. seeking the Academic Board's approval of the policy documents;

b. advising the Responsible Officer and any other associated proponents of the policy document of the decision of the Academic Board as the Approval Authority; and

c. advising the University Policy Manager of the decision and, if approved, arranging, with the responsible area, for appropriate documentation to be provided to the University Policy Manager for the recording of the policy document in the policy library.

Administrative and Governance Policy Documents

58. A governance or administrative policy document is submitted to the relevant committee within local service areas for consideration before final endorsement and approval are sought. This can occur either during the consultation phase or prior to the approval stage.

59. Following a relevant committee's in-principle endorsement, the policy document is submitted for endorsement and approval (as appropriate) by the Approval Authority as outlined in the Endorsement and Approval table above.

60. The Responsible Officer determines the appropriate meeting forum for consideration and endorsement of a policy document.

61. All submissions to the University Policy Manager are made via email to policy@anu.edu.au.

Special approval

62. The ordinary provisions of this procedure are suspended if the Vice-Chancellor, or the Responsible Executive determines that special approval of a policy, procedure or standard is required.

63. Special approval may be granted where approval of a policy document:

a. is urgent;

b. implements a provision of the ANU Enterprise Agreement;

c. meets a legal obligation of the University in which there is minimal scope for discretion in implementation; or

d. is otherwise deemed to be in the best interests of the University by the decision-maker.

64. If a determination is made that special approval is given, a policy, procedure or standard may be developed without:

a. preparation and endorsement of a Policy Document Concept Proposal;

b. endorsement by the University Policy Manager; and

c. endorsement by the Academic Board, relevant Committee or meeting group.

65. If a policy, procedure or standard is given special approval, the Responsible Officer initiates a major review within 12 months of its approval.

Implementation and communication

66. An Implementation and Communications Plan (Plan) is prepared prior to the implementation of any new policy document or major reviews that trigger organisational or operational change.

67. The Plan includes:

a. Stakeholder analysis – defining what, how and with whom communication needs to occur.

b. Action plan – the detailed steps to implement and communicate the new policy document.

c. Change management – details of the planned change management activities that are undertaken as part of implementation, ensuring compliance with the University's change management framework.

d. Responsible staff - details of staff responsible for implementation and communication, and what aspects, if more than one staff member is involved.

e. Risk management – details of the risks to successful implementation, their likelihood and impact; and how the risks are managed.

f. General sensitivities – details of any key stakeholders or issues that present a sensitivity during the implementation of the policy document and comment on the steps being taken, or planned, to manage.

g. Success indicators – how to assess the success of the policy implementation and communication, and how to determine if the outcomes sought have been achieved.

68. The scope and level of detail of the Implementation & Communications Plan is appropriate to the complexity and/or sensitivity of the policy document and its implementation. A template Implementation & Communications Plan is available online. Use of the template is not mandatory, and modifications or alternative formats (subject to the above requirements) are permissible.

69. A standard Implementation and Communications Plan may be adopted by the Responsible Officer to cover the standing approach to implementation and communication of all or a grouping of newly developed policies, procedures, and standards.

70. Once the policy document is approved, the Responsible Officer ensures that the Implementation and Communications Plan is executed. The Responsible Officer exercises their discretion to modify the Implementation and Communications Plan as necessitated by changes in circumstances or available information.

Record keeping

71. An official file is maintained for all records associated with the development, approval and review of the policy document by the staff member working on its development.

72. All official files for policy documents are named using the following naming convention: < Policy and Procedures - <Name of Policy Document> (e.g., Policy and Procedures – Academic Promotion Policy). Existing files not named according to this convention are to be renamed following the relevant University records process.

Policy Library

73. A policy document comes into effect when it is recorded in the policy library, unless an alternative date is explicitly determined by the Approval Authority.

74. The University Policy Manager is the custodian of the policy library and manages the policy library in accordance with the Policy Governance policy and any related policy documents.

75. Changes to the policy library are made by the University Policy Manager or their nominee.

76. Forms, including online forms, are recorded in the policy library if approval is provided by the relevant Service Division Director or member of the University Executive with portfolio responsibility.

77. Policy Library Handbooks are recorded in the associated Policy Handbooks webpage.

78. A template is only added to the policy library (recorded as a form) when the University Policy Manager is of the opinion that a more effective alternative for staff or students accessing the template is not available.

79. The policy library, or any related record keeping system, records all versions of a policy document which have been in force on occasions in the past.

Templates

80. Templates to support the operation of the Policy Governance policy are adopted with the approval of the Director, Corporate Governance and Risk Office.

81. Templates are available on a webpage associated with the policy library.

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