Policy Framework Procedure

<table>
<thead>
<tr>
<th>Version</th>
<th>Approved by</th>
<th>Approval date</th>
<th>Effective date</th>
<th>Next full review</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.2</td>
<td>Director of Governance</td>
<td>23 March 2018</td>
<td>23 March 2018</td>
<td>August 2020</td>
</tr>
</tbody>
</table>

**Procedure Statement**

**Purpose**

To describe the processes that apply to developing, reviewing and revising University-wide Codes of Conduct, Policies, Standards, Procedures and Guidelines. This Procedure should be read in conjunction with the UNSW Policy Framework Policy.

**Scope**

This Procedure applies to all University-wide Codes of Conduct, Policies, Standards, Procedures and Guidelines, and to all staff of the University who are engaged in the development, review and retirement of such Documents.

**Are Local Documents on this subject permitted?**

☒ Yes, however Local Documents must be consistent with this University-wide Document

☐ No

**Procedure Processes and Actions**

This Policy Framework Procedure operates within the UNSW Policy Framework which is a structure for managing and maintaining the University’s Codes of Conduct, Policies, Standards, Procedures and Guidelines. It should be read in conjunction with the Policy Framework Policy. This Procedure describes the processes for developing, reviewing and amending the University’s Codes of Conduct, Policies, Standards, Procedures and Guidelines (University-wide Documents, collectively referred to from this point as ‘Document/s’).

Figure 1 depicts the UNSW Document Development Cycle. It is categorised into five steps. In some cases progression through the Document Development Cycle will occur in a chronological order. In other cases, the actions embedded within each step may occur simultaneously. For example, implementation actions (step 4) will be identified as a Document is scoped (step 1) and drafted (step 2). Some steps may be dependent upon the completion of actions in earlier steps of the cycle.

*Figure 1: UNSW Document Development Cycle*

Typically, Document Managers and Responsible Officers seek to develop a new Document, review an existing Document, or amend an existing Document. These may require different starting points in the Document Development Cycle, as described in Table 1.
Table 1: Sections relating to Developing, Reviewing and Amending a Document

<table>
<thead>
<tr>
<th>Developing a new Document or conducting a full revision of an existing Document?</th>
<th>Reviewing an existing Document and determining whether: a) a full update, b) a minor amendment, c) no change, or d) retirement is required?</th>
<th>Amending an existing Document?</th>
</tr>
</thead>
<tbody>
<tr>
<td>See Section 1</td>
<td>See Section 5(a)</td>
<td>See Section 5(b)</td>
</tr>
</tbody>
</table>

1. Identify and Scope

(a) Identify a Responsible Officer and Document Manager

When developing a new Document or conducting a full review of an existing Document, a Responsible Officer and Document Manager must be assigned (see Definitions). Recruitment to these roles will vary depending upon the Document being developed. Table 2 provides some examples:

Table 2: Example Responsible Officers and Document Managers

<table>
<thead>
<tr>
<th>Role¹</th>
<th>Policy</th>
<th>Standard or Procedure</th>
<th>Guideline</th>
</tr>
</thead>
<tbody>
<tr>
<td>Responsible Officer</td>
<td>DVC/PVC/VP</td>
<td>Director</td>
<td>Director or Manager</td>
</tr>
<tr>
<td>Document Manager</td>
<td>Director or Senior Manager</td>
<td>Manager</td>
<td>Subject matter expert</td>
</tr>
</tbody>
</table>

¹ Only one Responsible Officer and one Document Manager is required.

A summary of the responsibilities that these roles confer is provided in the ‘Definitions and Acronyms’ section at the end of this Procedure.

When assigning these roles, consider the likely approval pathway, as described in Section 4 of the Register of Delegations. This varies according to the subject content of the Document.

(b) Identify the need, objective and scope and consider context

Decide if a new Document is required and identify its objective and scope. To assist decision making:

i. Appraise the content of existing Documents dealing with the same or related subject-matter including Documents on the Governance Policy List, and those published on UNSW websites. Consider whether an amendment to an existing Document could address the issue and whether a proposed new Document would be consistent with existing Documents.

ii. Ask Governance if the subject matter overlaps with other draft Documents on their register.

iii. Gather background information to explain why the subject-matter of the proposed Document needs to be considered now. Examples could include a change in legislation or government policy, a new strategic direction for the University or that the subject matter has not been addressed in existing Documents.

iv. Identify the key stakeholders involved and consider who will be affected by the new Document. Conduct an initial consultation to:

   a. test the need for a new Document;
   b. determine whether the proposed aims and objectives are feasible and consistent with the University’s current strategic objectives; and
   c. assess likely implementation challenges, how they might be met, who is likely to oversee implementation and if early advice should be sought from them (see Section 4(b)).

A Working Group may be convened for this purpose - see Section 1(d).
v. Consider what approval pathway might be required and whether early advice should be sought from the potential Approver (see Section 3).

vi. Consider the application of the *Equity, Diversity and Inclusion Policy* to the subject matter.

vii. Decide if advice is required from the Legal Office. Consider for example the requirements of the Policy and/or Procedure and its application to specific groups, such as disabled people, volunteers and visitors.

viii. Consider what type of Document is required: a Policy, Standard, Procedure or Guideline (or combination of these Documents - see the Definitions section at the end of this Procedure for details). Note: Local Documents are described in Section 6 of this Procedure.

**c) Prepare and submit Approval Form for approval by the Responsible Officer**

Where it is determined that the development of a new or revised Document is required, complete the *Phase One Approval Form – Authority to develop draft Document* available on the Governance website and submit it to Governance for review (policy@unsw.edu.au), prior to it being approved by the Responsible Officer.

The Approval Form provides authority to commit University resources to the progress and development of the Document. It requires information about:

- the proposed membership of a Working Group (see 1(d) below);
- any potential implementation issues (see the *Implementation Plan*); and
- the likely endorsement pathway (see the Register of Delegations at: https://www.gs.unsw.edu.au/registerofdelegations/).

**d) Establish a Working Group / methodology to assess need for Document**

Convene a Working Group to assist the Document Manager to gather any information that is required for the purpose of ascertaining the parameters of the content and confirming or refuting that a new Document is required. This may include benchmarking, a content analysis of Documents from other universities or institutions, and a preliminary consultation exercise.

The size and composition of the group should be determined by the Document Manager, however, it should comprise the Document Manager, a range of members who will be affected by the Document, and relevant academic or research representation.

The Document Manager is responsible for recordkeeping which includes filing draft Documents circulated, feedback received and any meeting notes or other relevant information.

**e) Gather findings and confirm need for Document**

The Document Manager should:

- assess the information that has been gathered and determine whether changes to the approach set out in the Phase One Approval Form is required;
- conclude whether an amendment to an existing Document or development of a new Document is required;
- confirm their decision to the Responsible Officer and Governance.

If a new Document is required follow Sections 2 to 4 below.

Where a review of, or amendment to an existing Document is required, follow Section 5 below.

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**2. Develop Draft Document, Consult and Finalise**

The Document Manager is responsible for all actions in this step, however a Working Group may provide assistance.

**a) Develop a draft**

- Draft the Document, and *an Implementation Plan*;
- Approved templates must be used (available on the Governance website).
• All drafting must comply with the principles stated in the Policy Framework Policy and the requirements in Section 4 of that Policy.

(b) Consult and revise

• Identify key stakeholder groups and individuals that will be consulted and determine the consultation methods to be used. A consultation plan should be completed and the version available on the Governance website may be used for the purpose of recording and responding to consultation feedback.

• Consider whether planned consultation dates coincide with periods when key stakeholders are likely to be absent (e.g., school holidays or University shut-down).

• Plan the endorsement pathway. This will differ in relation to the type of Document and subject matter (see Section 2(c)). Where required seek advice from Governance.

• All draft Documents, excluding minor amendments, will require a period of online University-wide consultation on the Governance website for no less than three weeks:
  − Submit a Word version of the draft Document to Governance at policy@unsw.edu.au. Governance will prepare a notice for Inside UNSW and myUNSW advertising the period of online consultation.
  − Ensure that the draft is circulated widely during the three weeks that the Document is on the Governance website.

• Appraise feedback and where appropriate, revise the draft Document accordingly. Where feedback leads to significant revision, a second period of online consultation will be required.

(c) Endorsement

The Document may require endorsement from one or a number of Committees, including:

• University Committees
• Executive Team
• Academic Board. Note: Academic policies and procedures and all policy developed under the Research Policy Framework and Higher Degree Research Policy Framework require consideration by the Academic Board.

• Management Board
• Council Committees.

Governance can offer advice on the endorsement pathway on a case-by-case basis.

(d) Finalise the Document

Submit the Document to Governance for final review to address any typographical or template issues: policy@unsw.edu.au.

3. Approve

| The Document Manager is responsible for step 3(a). The Responsible Officer is responsible for step 3(b) and 3(c). |
| A Document has effect from the date of its approval or a determined date following approval. |

(a) Prepare approval form

The Document Manager should complete the Approval Form (Phase Two Approval Form), attach the final draft Word Document and send it to the Responsible Officer for their review and signature.

(b) Submit for approval

The Responsible Officer should ensure that the signed Approval Form and final Word Document is sent to the relevant Approver in accordance with the University’s Register of Delegations.
Where a Policy and Procedure have been developed together, the overarching Policy must be approved by the President and Vice-Chancellor prior to, or on the same day as, the Procedure.

(c) Post-approval
The Responsible Officer must ensure that the signed Approval Form and final Word Document are sent to the Document Manager and to Governance (policy@unsw.edu.au).

4. Communicate, implement and monitor feedback

| Governance is responsible for step 4(a). The Implementation Officer is responsible for step 4(b). The Contact Officer is responsible for step 4(c) |

(a) Publish
Upon receipt of the signed approval form and final Word Document Governance will publish the Document in the Policy repository and archive any versions superseded by the new Document.

(b) Communicate and Implement
Governance will assist with University-wide communication by arranging a notice in Inside UNSW and myUNSW.

An Implementation Officer should be appointed (see the Implementation Plan) to:
- Consider any transitional issues that need to be addressed and how to manage these.
- Remove all older versions superseded by the new Document from publications/websites and ensure that all links to the Document use the Governance Policy repository online address/URL.
- Activate and monitor the Implementation Plan, including specific communication requirements.
- Communicate approval of the Document to all stakeholders.

(c) Consider ongoing feedback
The Contact Officer is the day-to-day contact for questions about the Document and should monitor and log feedback. Some feedback could prompt a review of the Document ahead of the due date.

5. Review

| The Responsible Officer is responsible for review. |
| The Contact Officer is responsible for amendments - see Section 5(b). |

(a) Review
Documents should be reviewed three years after the original effective date to ensure the content remains current and relevant. Examples of what a review should consider include a:
- Change in legislation or in Government policy
- New strategic direction for the University that: a) is not reflected in the Document or b) conflicts with the content of the Document
- Change or gap in the subject area that: a) is not reflected in the Document or b) conflicts with the content of the Document
- Need to align content with another new or amended Document.

In some cases it may be necessary to review a Document before three years.

The Responsible Officer is responsible for review.

Governance will provide:
- Annual review reports to the Responsible Officer
- Advice to the Contact Officer when a Document is due for review
- Feedback which Governance has received relating to the Document
• A review checklist via the Governance website.

The Responsible Officer and Contact Officer should make a decision as to which of the following review outcomes should occur:

**Review Outcomes**

The following outcomes may result from a review:

### i. No change

If the review process concludes that the Document does not require amending, the Responsible Officer or Contact Officer must notify Governance to ensure that this is recorded. A no change outcome will require a Phase Two Approval Form signed by the relevant Approver in accordance with the University’s Register of Delegations.

### ii. Minor amendment

Refer to step 5(b).

### iii. Full revision of the Document

If the review process concludes that a full revision of the Document content is required, the Document Development Cycle should recommence from step 1(a).

### iv. Retire

A Document may be retired if it is no longer required, for example, as a result of legislative, strategic or compliance changes. To retire a Document, the Responsible Officer should:

- Identify the need to retire. Notify Governance (policy@unsw.edu.au) of the proposed Document retirement.
- Seek advice from the Legal Office to help establish any risks associated with retiring or not retiring the Document.
- Communicate the Document retirement to relevant stakeholders and consider the stakeholder impact of retiring the Document. Where the impact may be significant, consult with representative stakeholders to assess whether the Document should be retired.
- Remove references to the Document in other existing Documents or links on University webpages. This may require an amendment to a Document - refer to step 5(b).
- Consider whether any Document content should be retained or transferred to another Document.
- Check for existing delegations within the Document and ensure they remain published elsewhere.
- Ask Governance for a Retire Document Approval Form to remove the Document from the Governance Policy repository.
- Provide endorsement to retire the Document, and seek approval for the retirement from the Approver.
- Forward the signed Approval Form to Governance.
- Following confirmation from Governance, advise relevant stakeholders that the Document has been retired.

### (b) Amendment

Amendment to an approved Document may be required as part of a three year review, or before. The Contact Officer, or their nominee, should:

- Obtain the current Word version of the published Document from Governance: policy@unsw.edu.au.
- Amend the Word Document using mark-up/tracked changes.
- Send the amended Word Document to Governance policy@unsw.edu.au for review. Governance will determine the type of amendment. The key categories follow:
i. **Administrative updates**

Administrative updates may be authorised at the discretion of the Director of Governance and could include the following:

- Changing the name and details of a staff member
- Changing the name of a position, unit, Document, publication, address (including URL), legislation or entity
- Updating an Appendix attached to a Document that does not affect the meaning or application of the Document
- Correcting grammar or spelling.

ii. **Minor amendment**

Minor amendments are small changes, outside the scope of an administrative update, that do not affect the meaning or application of the Document. Minor amendments cannot occur where the amendment would:

- Be contentious, complex and/or novel;
- Require a substantial change to current practice which has not been endorsed by senior management; or
- Significantly impact on roles and responsibilities.

These circumstances are categorised as Major amendments (see Section 5(b)iii).

Minor amendments require approval by the Responsible Officer and Approver. Consultation with key stakeholders may be necessary prior to approval, however university-wide consultation is not mandatory.

*Prepare approval form*

The Contact Officer should complete the Approval Form ([Phase Two Approval Form](#)), attach the final draft Word Document and send it to the Responsible Officer for their review and signature.

*Submit for approval*

The Responsible Officer should send the signed Approval Form and final Document to the relevant Approver in accordance with the University's [Register of Delegations](#).

Where a Policy and Procedure have been developed together, the overarching Policy must be approved by the President and Vice-Chancellor prior to, or on the same day as, the Procedure.

*Post-approval*

The Responsible Officer must ensure that the signed Approval Form and final Word Document are sent to the Contact Officer and to Governance ([policy@unsw.edu.au](mailto:policy@unsw.edu.au)).

Upon receipt of the signed approval form and final Word Document Governance will publish the Document in the Policy repository and archive any versions superseded by the amended Document.

iii. **Major amendments**

If amendments, other than those described above, are necessary the Document Development Cycle **recommences from step 1(a) and** Governance must be notified.

Where there are imminent changes that require a fast-tracked development process, such as a new legislative directive, [Governance](#) must be consulted to determine how this should be managed.
6. Local Documents

Local Documents are approved by a **Dean** (for Faculties), a **Head of School** (for Schools) or a **Director** (for Divisions).

Local Documents:
- are Standards, Procedures or Guidelines that are specific to a particular Division, Faculty or School (i.e., they differ in their scope of application, compared to University-wide Documents)
- have the same compliance status as for University-wide Standards, Procedures and Guidelines (see Definitions below) — for example, compliance with a Procedure is mandatory whether the Procedure is a University-wide Document or a Local Document
- must not be inconsistent with University-wide Codes of Conduct, Policies, Standards, Procedures and Guidelines covering the same, or similar, subject-matter
- must include local Division, Faculty or School branding and clearly state which Division/Faculty/School or other business unit they apply to
- must be approved by a Dean (for Faculties), Head of School (for Schools) or Director (for Divisions) and be documented in an auditable recordkeeping system.

When developing Local Documents it is not mandatory to follow the detailed procedures that are required for the development of other Documents, however it is strongly recommended that the key steps depicted in the Document Development Cycle (see Figure 1) are followed, along with the following actions:

- Identify the reason the Local Document is being proposed and:
  - consider legislation and government policy relating to the proposed content;
  - conduct a benchmarking exercise by looking at available examples from other comparable institutions;
  - assess whether a University-wide Document already covers the particular subject matter, and, if so, whether it permits the creation of a Local Document covering the same or similar subject-matter.
- Draft the Local Document and ensure it is consistent with any University-wide Documents covering the same or similar subject-matter.
- Obtain input from relevant subject-matter experts.
- Seek Division-, Faculty-, or School-wide comment during the drafting process.
- Consider if the Local Document requires endorsement by a Faculty Committee or other body.
- Communicate the content of the approved Local Document to all those staff and other people (e.g., students) specified in the scope of its application and consider whether training is required to assist the implementation of the Local Document (consulting relevant staff within your Division, Faculty or School).
- Assign implementation actions (see Section 4(b) above) and ensure they are completed.
- Review the Local Document regularly, and in particular when a related University-wide Document is approved or revised.

Contact Governance for advice: [policy@unsw.edu.au](mailto:policy@unsw.edu.au)
### Accountabilities

<table>
<thead>
<tr>
<th>Responsible Officer</th>
<th>Vice-President, Strategy and Quality</th>
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<tbody>
<tr>
<td>Contact Officer</td>
<td>Director of Governance</td>
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### Supporting Information

<table>
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<tr>
<th>Legislative Compliance</th>
<th>This Procedure supports the University’s compliance with:</th>
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<tbody>
<tr>
<td></td>
<td>University of New South Wales Act 1989 (NSW)</td>
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| Parent Document (Policy) | Policy Framework Policy |

<table>
<thead>
<tr>
<th>Supporting Documents</th>
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<tbody>
<tr>
<td>Template – Policy</td>
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<tr>
<td>Template – Standard</td>
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<tr>
<td>Template – Procedure</td>
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<tr>
<td>Template – Guideline</td>
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<tr>
<td>Phase One Approval Form – Authority to develop draft Document</td>
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<td>Phase Two Approval Form</td>
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<td>Consultation Plan</td>
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<td>Implementation Plan</td>
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<td>Flowchart: Developing University-wide Policies, Standards, Procedures and Guidelines</td>
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<table>
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<td>UNSW Register of Delegations</td>
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<table>
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<tr>
<th>Superseded Documents</th>
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<td>Policy Framework Procedure, v2.1</td>
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<tr>
<th>File Number</th>
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<tr>
<td>2016/12088</td>
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### Definitions and Acronyms

<table>
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<tr>
<th>Approver</th>
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<tbody>
<tr>
<td>A body or person with a delegation of authority to establish a Code, Policy, Standard, Procedure or Guideline. Establish includes the authority to create, approve, amend and retire a Document. Refer to Section 5 of the Policy Framework Policy.</td>
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<table>
<thead>
<tr>
<th>Codes of Conduct</th>
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<tbody>
<tr>
<td>Documents that express the behaviour that is expected and necessary to meet the core values and obligations of the University. Codes of Conduct are approved by Council and are always University-wide in their application. UNSW has three Codes of Conduct: a Staff Code of Conduct, a Student Code of Conduct and a Research Code of Conduct. Compliance with Codes of Conduct is mandatory.</td>
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<tr>
<th>Contact Officer</th>
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<tr>
<td>The person responsible for the day to day management of the Document, accepting and assisting with queries during the life of the Document. The Contact Officer is also responsible for amending and retiring Documents.</td>
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<tr>
<th>Document Manager</th>
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<tr>
<td>The person responsible for scoping, developing and drafting the Document.</td>
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<tr>
<th>Guidelines</th>
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<tr>
<td>Documents that provide detail and context for particular matters that are generally the subject of a University legislative obligation, or a Policy, Standard or Procedure. Guidelines provide a pathway for staff and students to follow. A Guideline may be a University-wide Document or a Local Document. Compliance with Guidelines is not mandatory, however staff and students are strongly encouraged to comply with Guidelines wherever possible.</td>
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<tr>
<th>Implementation Officer</th>
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<tr>
<td>Typically the same person as the Contact Officer and has oversight for the actions that have been agreed to in the Implementation Plan and will need to monitor and evaluate the effectiveness of the Document.</td>
</tr>
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</table>
### Local Documents

Standards, Procedures or Guidelines that suit the specific needs of a Division, Faculty or School. Where a University-wide Document and a Local Document cover the same or similar subject matter, the Local Documents must be consistent with the University-wide Document. A Local Document may be created using a Policy Framework template, but must have local branding.

### Policies

Documents that describe the principles that govern and guide conduct and decision making in a particular context. Policies are always University-wide Documents. They must be high-level and principles-based and express the objectives and intentions of the University. **Compliance with Policies is mandatory.**

### Procedures

Operational documents that describe the processes and actions that are required to enable the implementation of a Policy. A Procedure may also be developed to ensure compliance with legislative requirements. A Procedure may be a University-wide Document or a Local Document (where permitted under relevant University-wide Documents). **Compliance with Procedures is mandatory.**

### Responsible Officer

The person with the greatest overall responsibility for the subject area the Document relates to.

### Standards

Documents that specify operational criteria for products, services and systems to ensure that they are safe, reliable and consistently perform the way that they are intended to. They are often developed for the purpose of meeting legal or industry-related requirements. A Standard may be a University-wide Document or a Local Document (where permitted). **Compliance with Standards is mandatory.**

### Working Group

A group of subject matter experts formed to undertake and support research, benchmarking, preliminary consultation and/or analysis of the Document.

### Revision History

<table>
<thead>
<tr>
<th>Version</th>
<th>Approved by</th>
<th>Approval date</th>
<th>Effective date</th>
<th>Sections modified</th>
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<tbody>
<tr>
<td>1.0</td>
<td>UNSW Council</td>
<td>7 December 2015</td>
<td>1 January 2016</td>
<td>This is a new Procedure</td>
</tr>
<tr>
<td>2.0</td>
<td>President and Vice-Chancellor</td>
<td>21 August 2017</td>
<td>21 August 2017</td>
<td>Review with re-formatting and minor update to all sections.</td>
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<tr>
<td>2.1</td>
<td>Director of Governance</td>
<td>9 January 2018</td>
<td>9 January 2018</td>
<td>Administrative update. Responsible Officer title changed from Vice-President and Chief of Staff to Vice-President, Strategy and Quality</td>
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<tr>
<td>2.2</td>
<td>Director of Governance</td>
<td>23 March 2018</td>
<td>23 March 2018</td>
<td>Clarified the requirements for approving a Local Document in section 6. Changed News@UNSW to Inside UNSW in sections 2(b) and 4(b).</td>
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