

# Policy Framework

## Section 1 - Preamble

(1) The Council, as Charles Darwin University's (the University) governing body, is responsible for confirming that the provision of higher education, vocational education and training, and research training and the conduct of research, whether by the University or through an arrangement with another party, are governed by the University's institutional policies, and the operations of the University and any associated party(ies) are consistent with those regulatory requirements set out in Section 6.1 of the [Higher Education Standards Framework \(Threshold Standards\) 2021](#), the legislative component of the [VET Quality Framework](#), the [Education Services for Overseas Students Act 2000](#) and all other relevant governing legislation.

## Section 2 - Purpose

(2) This Policy Framework governs the development and review of policy and policy related documents at the University to:

- a. ensure that they are consistent with the University's objectives and relevant governing legislation;
- b. provide guidance for adherence to the University's regulatory obligations;
- c. ensure that the policy and procedures and are kept current and relevant;
- d. define responsibilities for the development, review and implementation of policies; and
- e. sets out steps to ensure that policies are effectively implemented and well understood across the University.

(3) Elements of the Policy Framework are:

- a. this Policy;
- b. the Policy Document Development and Review Procedure and associated templates;
- c. the Governing Policy review schedule;
- d. the University Governance Document Library;
- e. the University's Glossary; and
- f. guidance information on policy development.

## Section 3 - Scope

(4) All University policies and procedures must be developed, reviewed and implemented in accordance with this Policy Framework.

## Section 4 - Policy

## Part A - CDU Governance Framework

(5) Policies form part of a governance framework of rules and standards for University operations comprising:

- a. the [Charles Darwin University Act 2003](#);
- b. University by-laws and rules;
- c. policies;
- d. procedures; and
- e. local guidelines, work instructions and other policy related documents.

(6) Levels (a) and (b) in clause 4.1 are collectively known as 'University legislation'. The Northern Territory Government is responsible for the authorisation of all by-laws. The University Council is responsible for drafting University by-laws and rules and for providing legal advice on University legislation.

(7) Levels (c) and (d) in clause 4.1 are collectively known as 'University policy' and are the preferred levels for managing the University's activities and operations. Policy must be consistent with University legislation. Reviews of policy must have regard to relevant University legislation to ensure consistency.

(8) All policy is published on the University's Governance Document Library and applies across the University.

(9) Level (e) in clause 4.1 are local guidelines, work instructions, manuals, handbooks, checklists or similar information maintained locally by an organisational unit. These must be consistent with all documents higher in the regulatory framework set out at clause 4.1. Where two documents in the hierarchy conflict, the document higher in the hierarchy takes precedence.

## Part B - Policy Standards

(10) The University develops and implements policies to:

- a. embed principles for the operation of the University consistent with legal requirements and community expectations;
- b. promote behaviours and practices in line with the University's values and objectives; and
- c. achieve a consistent approach across the University to essential University activities including research, teaching and operations.

(11) The University maintains clear and streamlined policies that enable efficient operations and decision making, achieved by:

- a. consolidating policies where possible;
- b. introducing new policies only where required to meet one or more of the objectives set out at clause 4.6; and
- c. regular review of policies and the revocation of those no longer required.

(12) Policy must comply with the University's policy template and set out:

- a. policy purpose;
- b. scope of application;
- c. links to any University legislation providing authority for the policy and any external legislation whose compliance obligations the policy supports;
- d. policy content;
- e. any schedules forming part of the policy;

- f. any associated information providing further information on the policy or supporting its implementation; and
- g. the titles of the Approval Authority, Responsible Executive and Implementation Officer for the policy.

(13) In addition to the template requirements policy must:

- a. be relevant to University objectives;
- b. use clear and inclusive language;
- c. focus on the key information required for compliance with the policy;
- d. avoid excessive detail and material belonging in work instructions or operating processes;
- e. minimise administrative burden; and
- f. refrain from repeating information covered in other policies.

(14) Policies will contain statements of principle to guide and enable decision making. Procedural steps to implement a policy may either be part of the policy itself or set out in a separate procedure, depending on which approach is most conducive to clarity and ease of reading. Separate procedures are implementation oriented and do not contain matters of policy principle. The repetition of information between policies and procedures must be minimised.

(15) Schedules have the same force as their parent document but should only be used where the information is essential to the policy and they are the best method for communicating the relevant information. In other circumstances schedules should be avoided to prevent readers having to consult multiple levels of documentation. Any schedules must conform to the Digital Accessibility Guidelines.

(16) In accordance with clause 4.9(c) and 4.9(d) detailed background information must be excluded from policy but can be linked to policy documents as associated information.

## **Categories and approval authorities**

(17) There are three policy categories:

- a. University governance policies approved by the University Council related to the functions of the University retained by the Council. These include:
  - i. risk management,
  - ii. investment management,
  - iii. complaints, corruption and whistle-blowing,
  - iv. legal, contractual and corporate entities,
  - v. academic and ceremonial dress,
  - vi. commercial activities,
  - vii. honorary awards and recognition, and
    - other policies regarding University governance.;
- b. academic governance policies approved by the Academic Board and listed in the Academic Policy Framework; and
- c. management policies concerning the management or administration of the University and approved by the Vice-Chancellor or delegate.

(18) The approval authority for each policy must be listed in the Governance Document history and version control.

(19) The relevant approval authority must approve the introduction, amendment or revocation of policies within their category of responsibility, except:

- a. a minor amendment; or

- b. an administrative amendment.

(20) A minor amendment or administrative amendment:

- a. is a change which:
  - i. is consistent with the objectives of the existing policy;
  - ii. is a clarification, correction or editorial change including an adjustment required to align with University legislation; and
  - iii. does not raise any issues requiring the process of policy review and consultation set out at 5.1-5.3 and 5.9-5.13; and
- b. may be approved by the Responsible Executive or the University Secretary.

(21) The Governance Document Library must maintain a record of all policy amendments.

## **Part C - Roles and Responsibilities**

(22) The Responsible Executive for a policy is the member of the Vice-chancellor's Advisory Committee whose portfolio covers the policy area.

(23) The responsibilities of the Responsible Executive are to:

- a. appoint an Implementation Officer;
- b. oversee the approval process for policies in accordance with the requirements of the relevant approval authority, as follows:
  - i. for University governance policies by recommendation to University Council from the relevant committee of Council;
  - ii. for academic governance policies by recommendation to the Academic Board from the relevant committee of the Academic Board; or
  - iii. for management policies by recommendation to the Vice-Chancellor or delegate using the Request for Approval form; and
- c. approve minor amendments in accordance with clause 4-16.

(24) The Implementation Officer will be a staff member with management responsibility for the activity addressed by the policy.

(25) The responsibilities of the Implementation Officer are to:

- a. be the primary contact officer for the policy;
- b. draft and review the policy or oversee that drafting and review;
- c. ensure that key stakeholders are consulted in the drafting and review of the policy;
- d. obtain and implement advice from the University Secretary regarding legal compliance if the policy relates to:
  - i. a right or obligation under University legislation; or
  - ii. implementation of a requirement from external legislation;
- e. lead the implementation of approved policies, including providing information or training to assist staff, students and associates to understand:
  - i. changes resulting from any new or amended policy;
  - ii. compliance requirements; and
  - iii. how to provide feedback to the Implementation Officer on the policy and any compliance concerns;

- f. provide advice to the University community on the operation of the policy;
- g. monitor and report on compliance with the policy, including any reporting required under the Compliance Management Policy;
- h. advise the Responsible Executive about any issues or problems arising with the implementation of the policy and proposed remedial actions; and
- i. recommend minor amendments to the Responsible Executive for consideration and, if appropriate, approval in accordance with clause 4-16.

(26) The Responsible Executive and Implementation Officer for each policy will be listed on the Governance Document history and version control.

(27) The University Secretary is responsible for the management of the Policy Framework and must:

- a. publish policies on the Governance Document Library;
- b. consider and, if appropriate, approve administrative amendments in accordance with clause 4-16;
- c. publish the University's policy template and supporting information;
- d. provide advice to University staff on the operation of this Policy Framework and on the drafting and review of policies;
- e. consult regularly with the Academic Board Secretary on the academic policy review schedule to ensure that there is a coordinated approach across the University to keeping policies in all categories up to date;
- f. consult regularly with the University Council Secretary on the Governing policy review schedule to ensure that there is a coordinated approach across the University to keeping policies in all categories up to date; and
- g. meet at least annually with Responsible Executives about their policy portfolios to:
  - i. ensure that the correct Responsible Executive and Implementation Officers are listed for each policy;
  - ii. advise the date of the most recent review of each policy;
  - iii. identify policies to be reviewed in the coming year; and
  - iv. identify any policies to be considered for consolidation or revocation in accordance with clause 4.7.

## Part D - Document Development and Review Procedure

### Consultation

(28) Policies typically affect many areas of the University. Under the leadership of the Implementation Officer policy drafters must consult with relevant areas affected by the policy to obtain their input and benchmark with other like institutions.

(29) No single method of consultation is prescribed by this Policy Framework but useful methods include:

- a. a working group with representatives from different areas;
- b. circulation of drafts by email to different areas;
- c. posting drafts for comment on a website;
- d. appropriate committee review including but not limited to:
  - i. academic policies to be reviewed by relevant subcommittee of Academic Board;
- e. meeting and discussion groups or networks.

(30) Whatever method of consultation is used the Responsible Executive must be satisfied that adequate and effective consultation has been completed before endorsing a policy for approval by the approval authority.

## Approval

(31) All policies must be endorsed by the Vice-chancellor's Advisory Committee before being submitting to the relevant approving authority.

(32) Submissions for the approval of policies in accordance with clause 4.19(b) above must:

- a. explain the changes proposed;
- b. identify any requirements for consequential amendments to or revocation of any existing policy;
- c. attest that:
  - i. appropriate consultation has occurred and feedback integrated as required; and
  - ii. legal advice has been obtained where required by clause 4.21(d); and
- d. stipulate the date the changes are to come into effect, being either:
  - i. the date when the policy is published on the Governance Document Library; or
  - ii. a specified future date.

(33) The approval authority may:

- a. approve the policy as submitted;
- b. approve the policy subject to specified changes being made;
- c. approve the policy to come into effect for a limited period and subject to further work being completed during that period;
- d. request that the policy be resubmitted for approval after specified concerns have been addressed; or
- e. reject the proposed policy on grounds including, but not limited to, that it:
  - i. is not needed;
  - ii. would impose administrative inefficiency; or
  - iii. does not meet the standards set out at clauses 4.6-4.12.

## Publication on the Governance Document Library

(34) To promulgate approved policies the University Secretary must receive:

- a. the approved policy; and
- b. evidence of approval such as a completed approval form or minute of meeting.

(35) The University Secretary is responsible for:

- a. publishing approved policies on the Governance Document Library within five working days of receipt unless unusual circumstances exist; and
- b. including, amending or abbreviating the document history and version control in excess of 7 years, as a table within the document.

## Review

### Review of New Policies

(36) The Implementation Officer must ensure that any new policy is reviewed within one year of being introduced to ensure that:

- a. the policy is operating as intended; and

- b. any mechanisms to report on compliance with the policy are functioning effectively.

## **Review of Established Policies**

(37) To ensure that established policies are kept current:

- a. the Implementation Officer must advise the Responsible Executive of the need for the immediate review of policy for reasons including but not limited to:
  - i. evidence that an existing policy is imposing unnecessary administrative burden; or
  - ii. a change in the operating or regulatory environment; and
- b. review schedules for all policies must be maintained by:
  - i. the University Secretary for University governance and management policies; and
  - ii. the Secretary of the Academic Board for academic governance policies.

(38) Policies and procedures must be reviewed at least every three years.

(39) The Implementation Officer must oversee the review of established policies. The purpose of the review is to examine whether the policy remains relevant and useful to the needs of the University and whether it conforms to the standards set out at clauses 4.6-4.12.

(40) Any proposed changes arising from policy review must undergo the drafting, consultation, approval and publication steps set out at clauses 5.1-5.8.

## **Section 5 - Non-compliance**

(41) Non-compliance with Governance Documents is considered a breach of the [Code of Conduct - Staff](#) and is treated seriously by the University. Reports of concerns about non-compliance will be managed in accordance with the applicable disciplinary procedures.

(42) All staff members have an individual responsibility to raise any suspicion, allegation or report of fraud or corruption in accordance with the Fraud and Corruption Control Governance Framework, [Fraud and Corruption Control Policy](#) and [Whistleblower Reporting \(Improper Conduct\) Procedure](#).

## Status and Details

<b>Status</b>	Historic
<b>Effective Date</b>	15th January 2022
<b>Review Date</b>	24th June 2024
<b>Approval Authority</b>	University Council
<b>Approval Date</b>	24th June 2021
<b>Expiry Date</b>	5th May 2022
<b>Responsible Executive</b>	Brendon Douglas Vice-President Governance and University Secretary
<b>Implementation Officer</b>	Brendon Douglas Vice-President Governance and University Secretary
<b>Enquiries Contact</b>	