

La Trobe University Policy on Policies

Section 1 - Background and Purpose

- (1) Policies are a statement of intent or principle that explains the University's official position on an issue or matter. Policies should be consistent with our Strategic Plan and TEQSA Standards, address a perceived problem, a legislative requirement or gap, are designed to reduce or manage institutional risk and must include strategies for implementation and monitoring compliance.
- (2) Procedures outline the interrelated steps required to implement and monitor a policy and includes the allocation of tasks and responsibilities and compliance reporting requirements.
- (3) This Policy and Procedure establishes the framework for developing, approving, reviewing, implementing, compliance monitoring and managing La Trobe University policy and procedures.

Section 2 - Scope

(4) This Policy applies to all La Trobe University policies and procedures.

Section 3 - Policy Statement

- (5) University policy should reflect and promote qualities that are consistent with La Trobe University's core values.
- (6) Policy documents should be concise, readable, easily applied and interpreted, and expressed using plain English and inclusive language.
- (7) Policies and procedures are mandatory and enforceable by the University and are considered valid and continuing until they are replaced, updated or approved for revocation.
- (8) Each policy and procedure has an identified Responsible Policy Officer and author, responsible for undertaking any required change processes. Refer to the <u>Policy Framework Schedule of Accountabilities</u>.
- (9) New and major revisions to policy and procedure are approved only following consultation with the University community and relevant stakeholders.
- (10) Policies and procedures should produce accountability by identifying officers and areas with responsibilities, with appropriate regard for the regulatory and administrative burden of implementation on organisational units, groups and individuals across the University.
- (11) University policies shall be approved by University Council (Council) or by a body delegated by Council to do so (e.g. Academic Board, Vice-Chancellor through Senior Executive Group (SEG) or a Council Committee).

Section 4 - Procedures

Part A - Policy Development and Consultation

(12) Policy development, design and construction must be consistent with the Policy Framework and should include:

- a. benchmarking for best practice against similar policies or procedures provided by other Universities or relevant organisations;
- b. review of appropriate legislation (University, State and Commonwealth, including University statutes and regulations and any external codes and standards;
- (13) Policies and procedures should follow the prescribed format provided in the <u>Policy Template</u>. In instances where more than one procedure is required under a single policy, the procedures must be named in association with the relevant policy, for example Course Lifecycle Policy Course Closure and Suspension Procedure.
- (14) A draft editable copy of the approved policy and procedures (if not already developed and revised in the Policy Database) should be forwarded to Governance Services for addition to the University Policy Library.

New and Major Revisions

- (15) All new and major revisions to policies and procedures are provided on the University Policy Bulletin Board for consultation with the University community. A consultation period of at least two weeks is required.
- (16) Consultation with relevant stakeholders is also recommended during the development and research stages of policy preparation. This may include referral to College Committees, the Compliance Office and Governance Services for feedback as appropriate.
- (17) The Policy Advisor, Governance and Policy Services, facilitates targeted and community consultation processes by working with the relevant Responsible Policy Owner to deliver communications to key stakeholders, and posting open consultation calls for feedback on the University Newsletter.
- (18) At the conclusion of the consultation period, a report of feedback is provided to the Responsible Policy Owner for review and any necessary actions prior to proceeding to the approval process.

Part B - Approval Process

Minor and Administrative Revisions

- (19) An amendment is considered an administrative amendment or a non-contextual change if it simply reflects editorial changes, updates to internal or external references (URL's), or updates to position titles or names of organisational units i.e as a result of an organisational restructure. Administrative amendments do not require formal approval and can be undertaken directly with the Policy Advisor in Governance and Policy Services.
- (20) A minor revision is a change that is of an insubstantial nature, is not contentious, has no impact on resources or compliance and does not affect the meaning or intent. Minor revisions need to be endorsed by the Responsible Policy Officer and be provided in writing to the Policy Advisor in Governance and Policy Services for actioning in the University Policy Library.

New and Major Revisions

(21) Central committees receiving policies and procedures for referral to the approval body will appraise the Policy

Coversheet and policy and procedures to ensure consistency with:

- a. requirements for consultation
- b. relevant internal and external legislation
- c. delegations and governance arrangements
- d. existing policies and procedures
- e. the stated policy outcome/s and the compliance measures outlined in the procedures
- (22) All new and major revisions to policies and procedures need to be presented for approval using the requisite <u>Policy Coversheet</u>.
- (23) Policies and procedures affecting course development, admissions, teaching, learning or research activity are approved by Academic Board following advice from a relevant sub-committee.
- (24) Policies and procedures affecting administrative activities such as facilities, finance and human resource management are approved by the Vice-Chancellor on the advice of the Senior Executive Group.
- (25) In cases where a policy or procedure may cross academic and administrative activities, advice regarding approval pathways should be sought from the Policy Advisor, Governance Services. In some cases, both Academic Board and Vice-Chancellor's approval may be required.
- (26) The Vice-Chancellor, Academic Board or a Council committee will refer policies to University Council for approval at their discretion and in accordance with University legislation. Council may choose to delegate powers of approval of policies to another body, including Council committees, the Academic Board or the Vice-Chancellor.
- (27) Matters of governance and compliance that cannot be delegated must be referred to Council. These include policies with significant strategic, financial or reputation risk attached.

Part C - Implementation and Monitoring

Implementation Process

- (28) An all staff email will be circulated with details of any newly approved policies and procedures by the Policy Advisor, Governance Services, however any targeted communications or necessary training are the responsibility of the Responsible Policy Officer.
- (29) Responsible Policy Officers are responsible for ensuring that policies are reviewed on a cyclical basis to ensure currency and relevance.
- (30) Reviews and monitoring of compliance may also be instigated by approval bodies, such as a sub-committee of Academic Board.

Part D - Policy Exemptions

(31) Requests for exemptions from policy and procedures would normally be made to the relevant governing body. In the case of academic policies, requests for exemption must be endorsed by the relevant Policy Committee prior to Academic Board approval. In the case of administrative policies, requests for exemption should be endorsed by the Executive Director of the business area who is generally the Responsible Policy Officer. Any request will be reviewed on a case by case basis, and must demonstrate exceptional circumstances.

Section 5 - Definitions

(32) For the purpose of this Policy and Procedure:

- a. Academic policy/procedure: a policy or procedure affecting course development, admissions, teaching, learning or research activity are approved by Academic Board following advice from a relevant sub-committee.
- b. Administrative policy/procedure: a policy or procedure relating to administrative activities or academic support.
- c. Approval body: has authority to approve policies and procedures in accordance with the requirements of the Policy Framework i.e Council, Academic Board and the Vice-Chancellor.
- d. Compliance: adhering to the requirements of legislation, external and internal standards, policy principles and procedures.
- e. Core values: responsibility; relevance; critical inquiry; integrity; participation, and excellence.
- f. Endorsing body: The academic or administrative committee with responsibility for endorsing a policy and procedure and then submitting the documents to the approval body.
- g. Policy Contact: is often the author of a policy or procedure and acts as the contact person for enquiries relating to the content of the document.
- h. Policy Custodian: is a Principal Officer and a member of the University's Senior Executive Group who has overarching responsibilities for the policies and procedures in their portfolio and includes the Chancellor, Vice-Chancellor, Deputy Vice-Chancellors, Vice-Presidents and Pro Vice-Chancellors.
- i. Responsible Policy Officer: a senior position, often the Unit or Divisional Head that is responsible for managing policy development, review, maintenance and operationalising the policy and procedure.

Status and Details

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