

Policy Development and Review Procedure

Section 1 - Governing Policy

(1) This Procedure is governed by the [Policy Development and Review Policy](#).

Section 2 - Scope

(2) This Procedure sets out the requisite steps for implementation of the [Policy Development and Review Policy](#).

(3) All ACU staff involved in the policy or procedure development and review process should ensure compliance with this Procedure.

(4) A reference to a defined term in this Procedure should be read in conjunction with Section 4 (Definitions) of the [Policy Development and Review Policy](#).

Section 3 - Policy and Procedure Development and Review Cycle

Policy and Procedure Development and Review Cycle

(5) The policy and procedure development and review cycle involves six steps:

Development or Amendment	establishing the need for development or amendment, identifying the Responsible Officer who will then undertake research and analysis, undertaking benchmarking, and drafting the policy or procedure.
Consultation:	the Responsible Officer conducts appropriate consultation, and redrafts the policy or procedure as appropriate.
Review and Finalisation:	the Responsible Officer will seek expert advice as required.
Endorsement and Approval:	the Governing Authority endorses the policy or procedure, which is then considered and approved by the Approval Authority (Vice-Chancellor and President or delegate).
Communication and Implementation:	the Responsible Officer will communicate and implement the policy or procedure, and publish the policy or procedure on ACU's Policy Content Management System.
Continual Improvement and Review:	the Responsible Officer will ensure there is periodic monitoring and reviewing of the policy and/or procedure.

Development or Amendment

(6) To establish the need to develop or review a policy or procedure, staff should determine:

- a. that there is no existing policy or procedure for the specified area;

- b. where there is an existing policy or procedure, minor or major amendments (as defined) have been identified through internal processes or because of changes in external legislative or regulatory requirements;
 - c. whether the action required is at the policy level or the procedure level. For example, if the identified need is likely to require frequent amendment, then it is most likely procedural rather than a policy matter;
 - d. notify the Legal, Assurance and Governance Directorate in order to ensure that no other area of the University is developing a similar document and to provide early guidance on the process. The Legal, Assurance and Governance Directorate will register that a new policy is under development or undergoing amendment.
- (7) Staff should also ensure that the Responsible Officer, Governing Authority and Approval Authority are identified.
- (8) When undertaking research and analysis, the Responsible Officer will:
- a. gather further relevant information on the issue and ensure consistency with 'best practice' in the area via benchmarking exercises (as defined);
 - b. review legislative and regulatory requirements which may include different legislative frameworks (for example those relating to off-shore campuses);
 - c. adhere to and comply with the definitions included within the [Policy Development and Review Policy](#);
 - d. ensure consistency with existing policies and the strategic directions of the University as identified in the [ACU Strategic Plan](#);
 - e. determine whether any related policies or procedures need to be revised or rescinded;
 - f. develop a plan to manage the implementation of the policy or procedure, potentially involving identifying tasks, assigning responsibility, liaising with staff and establishing timeframes; and
 - g. seek advice from individuals or groups that have expertise or responsibilities related to the particular topic, which may include the Office of General Counsel or People and Capability.
- (9) When drafting the policy or procedure (new or revised), the Responsible Officer must:
- a. use the ACU [Policy template](#) or [Procedure template](#) cover page (as appropriate);
 - b. ensure the word 'DRAFT' is included as a watermark on all new and revised policies or procedures prior to approval;
 - c. complete all the fields, including metadata, on the cover page; and
 - d. ensure that the draft document is only available internally until final approval.
- (10) To rescind policies or procedures which have not been replaced but are no longer required to be in force, the Responsible Officer should seek approval from the Governing Authority.

Consultation

- (11) Consultation should be appropriate and allow sufficient time for feedback and analysis. It will provide a way to consider options and concerns, and identify any gaps that may have been overlooked.
- (12) In order to ensure that policy or procedure meets the stakeholder requirements, the Responsible Officer will need to consult the relevant stakeholders, which could be groups or targeted individuals. For example, all policies that potentially impact workplace relations, human resources and other staffing matters should be referred to People and Capability for consultation with staff as appropriate.
- (13) The Responsible Officer will collate feedback and revise the draft policy or procedure as appropriate. If the feedback leads to significant changes to the policy or procedure, the Responsible Officer may consider a second period of consultation or revise the plan for implementing the policy or procedure.

Review and Finalisation

(14) The Responsible Officer will:

- a. seek expert advice, as appropriate, to ensure compliance with any legislative and regulatory requirements;
- b. ensure that the revised draft document is aligned with the [ACU Strategic Plan](#);
- c. ensure that the revised draft policy or procedure adheres to the [Policy Development and Review Policy](#); and
- d. finalise the draft policy or procedure, including the format.

Endorsement and Approval

(15) Once the policy is finalised, the Responsible Officer will seek endorsement from the Governing Authority and approval from the Approval Authority. The Vice-Chancellor and President may have delegated the approval and amendment of policies or procedures to the relevant decision-making Committee or member of Senior Executive in accordance with the [Delegations of Authority Policy and Register](#). In cases such as this, the Responsible Officer should ensure that the Governing Authority is distinct from the Approval Authority.

(16) All requests for endorsement or approval must be accompanied by [Brief and Implementation Plan Template](#).

(17) At the point of seeking the necessary endorsement or approval, the 'DRAFT' watermark referred to in clause (9)b. can be removed from the policy or procedure as the accompanying brief referred to in clause (16) will indicate that the document is subject to approval.

(18) If the policy or procedure is not approved and there is a requirement to undertake further consultation and / or drafting then the watermark referred to in clause (9)b. must be re-instated.

(19) If the policy or procedure is approved with amendments, the Responsible Officer will be required to amend the policy or procedure as requested and, if appropriate, may need to resubmit the policy to the Governing Authority for endorsement and the Approval Authority for approval.

Communication and Implementation

(20) Upon approval of the new or amended policy or procedure, the Responsible Officer will:

- a. upload the latest document onto ACU's Policy Content Management System and ensure that all metadata fields have been completed; or
- b. seek assistance from Digital Operations (digital.requests@acu.edu.au) to undertake this action; and
- c. notify the Legal, Assurance and Governance Directorate that the Policy has been approved and provide a copy of the final approved policy and the implementation plan referred to in clause (16).

(21) Unless there is a business or security requirement, all policies and procedures should be made publicly available on the ACU website.

(22) The Responsible Officer will notify the Governing Authority, relevant stakeholders and the ACU community. In addition, if the Approval Authority is not the Vice-Chancellor and President, the Responsible Officer should ensure that the Office of the Vice-Chancellor and President is informed of the new or amended policy and / or procedure.

(23) The methods of communication may include placing a notice in relevant ACU staff channels and tabling the documents at relevant Committee meetings. The communication should include details of the effective date where appropriate. For example, with regard to the Academic Board, associated policy changes may be communicated through the Academic Board Minutes and Digest. For changes with University-wide implications, the Responsible Officer should publicise the changes at least once via the Staff Bulletin, and may consider further avenues for promotion such a short post on Workplace or organising information sessions

(24) Previous versions of the amended policy and procedure, or rescinded policies and procedures, that are no longer in force should be archived in accordance with the [Records and Archive Management Policy](#) and [Records Retention and Disposal Schedule](#).

(25) The Responsible Officer may need to develop and approve any necessary associated documents (e.g. Guidelines, Local Protocols) in line with the approved new or amended policy and / or procedure.

(26) The Responsible Officer will undertake all other actions identified in the implementation plan submitted in accordance with clause (16).

Continual Improvement and Review

(27) All policies and procedures will be scheduled for review every five years from the date of approval, or more frequently if appropriate.

(28) The revision of a policy or procedure must be conducted in line with the criteria outlined in Section 3 of this Procedure. This includes but is not limited to: consultation with stakeholders; assessment as to whether the policy is consistent with other documents in the policy hierarchy in Section 3 of the [Policy Development and Review Policy](#); consideration of the policy content and evaluation of implementation and compliance.

(29) For minor and major revisions, the Responsible Officer will ensure that the policy or procedure has obtained the necessary endorsement and / or approval in accordance with clause (5) of the [Policy Development and Review Policy](#).

(30) The Responsible Officer will liaise with the Legal, Assurance and Governance Directorate to ensure that the policy is reviewed prior to the scheduled date (Date of Policy Review).

Section 4 - Review of this Procedure

(31) As part of the [Policy Development and Review Policy](#), this Procedure will be reviewed every five years from the date of approval, or more frequently if appropriate.

(32) Refer to clause (9) of the [Policy Development and Review Policy](#), for definitions of editorial, minor and major amendments.

(33) Unless otherwise indicated, this Procedure will still apply beyond the review date.

Section 5 - Associated Information

(34) For related legislation, policies, procedures and guidelines and any supporting resources, please refer to the Associated Information tab.

Status and Details

Status	Current
Effective Date	14th March 2024
Review Date	30th April 2024
Approval Authority	Vice-Chancellor and President
Approval Date	14th March 2024
Expiry Date	Not Applicable
Responsible Executive	Diane Barker Director, Legal, Assurance and Governance
Responsible Manager	Matthew Charet National Manager, Governance
Enquiries Contact	Legal, Assurance and Governance Directorate