



Policy and Procedure Manual

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1.0 Introduction

This Manual is designed to assist with the development, implementation and review of policy and procedure at the University of Southern Queensland (USQ).

The Policy and Procedure Framework ('the Framework') defines policy as:

"Concise formal statements of principles that indicate how the University will act in a particular aspect of its operation. In this way, policies regulate and direct actions and conduct. In the absence of a university-defined policy, any existing statutes and regulations constitute the policy."

The Framework defines procedure as:

"Procedures describe in detail the process to implement a policy. Procedures are written in sequential order at a relatively high level and assign responsibilities. Generally, a procedure refers to the process rather than the result."

Policy and procedure are used by the University to:

- articulate management decisions
- provide clarity and consistency
- improve decision making
- inform judgements and guide actions
- manage risks and entitlements
- explain why things need to be done or need to change
- fill gaps not covered by legislation or to impose conditions or constraints not defined elsewhere
- implement legislation, regulations and standards
- assist to achieve the aims of the Strategic Plan
- specify standards for research, teaching and corporate services at USQ.

For policy and procedure to be effective, it needs to be fair (in the public interest), practical (able to be implemented) and measurable.

At USQ, policy and procedure are developed, approved and reviewed using the [Policy and Procedure Framework](#). The Framework is essentially a 'policy on policies' which explains how policy and procedure operate. It is useful to read the Framework in conjunction with this Manual.

Policy and procedure assist to set the tone in an organisation. Thus it is important that policy and procedure are:

- written in language that is accessible (plain English)
- welcoming, enabling and supportive
- practical
- enabling of staff to do their jobs by not being more prescriptive than necessary
- able to guide to sound decision making
- positive and optimistic as far as practicable.

2.0 Assistance from the Manager (Policy Services)

USQ has appointed a Policy Coordinator to:

- coordinate the development and review of policies and procedures across the university
- put in place structures and systems to assist with policy and procedure development and review
- provide advice and coaching to staff tasked with drafting, implementing or reviewing a policy or procedure
- maintain the Policy and Procedure Register, Policy and Procedure Development and Review Schedule, Definitions Dictionary and the Policy and Procedure Library
- train staff in how to develop, implement and review policies and procedures
- assist staff with access to policy and procedure related resources
- provide staff with advice on the interface between policy and procedures.

The [Manager \(Policy Services\)](#) is also available to provide individual support.

3.0 The Policy and Procedure Framework

The Policy and Procedure Framework is a document which sets out how policy and procedure operate at USQ. All policies and procedures at USQ must be developed, approved, implemented and reviewed in accordance with the Framework. Unless a policy or procedure conforms to the Framework, it cannot be approved.

The Framework establishes:

- the hierarchy of policy and procedure types
- the overarching principles in relation to the content, process, procedures and presentation
- the responsibilities of parties involved in the policy
- standards for record keeping, style and presentation
- reporting requirements.

It is important to note that, while Local Procedures are covered by the Framework, work instructions and similar types of documents which are not directly linked to a policy or procedure are not covered by the Framework.

3.1 Why does the University have a Policy and Procedure Framework?

The Policy and Procedure Framework provides a systematic approach separating the five levels of policy and procedure noted in Section 4.0. This approach helps those using policy and procedure in the following ways:

- All University-wide documents will be available on one site in the online Policy and Procedure Library: a comprehensive, single, structured database of all University-wide policies and procedures presented in a consistent format and style.
- As a result of the consistent use of document categories, users will know what kind of information (e.g. broad intention, procedural steps, operational instructions, or good practice advice) can be found in a document with a particular title (such as 'Policy', 'Procedure', 'Schedule', 'Form').
- Policy and procedure developers will understand the appropriate level of generality or detail required, and will include all relevant fields of information.

3.2 Why separate policies and procedures?

Policies reflect the guiding principles or standards governing the implementation of USQ processes. In this way, policies regulate and direct actions and conduct – the 'what'. As such, policies should not often need to change.

Procedures describe the process to implement a policy and should evolve over time as new tools emerge, new processes are designed, and the risks associated with an area change in response to internal or external environmental changes. Generally, a procedure refers to the process rather than the result – the 'how'. It is mandatory to comply with University procedures.

The following checklist details the main differences between policy and procedure:

Policy versus procedure checklist

Policy	Procedure
Is short and concise	May be quite long and detailed
Stands alone	Is pursuant to a policy
Needs to be approved at a higher level than procedure	Is approved at a lower level than a policy
Provides a mandatory statement of guiding principle(s) used to set direction or a general standard of behaviour	Outlines a series of steps and actions that need to be followed (and by whom) in order to implement the principle(s) detailed in the policy
The outlined principles are flexible in that they prescribe general standards of behaviour or an overarching approach to an issue	The outlined actions are less flexible as they describe the activities that need to be undertaken and what positions are responsible for those actions
The material will not frequently change	The material will change frequently as new tools emerge and new processes are designed

4.0 Policy and procedure types

The Policy and Procedure Framework consists of five levels and one additional policy type which falls outside of the framework. The level in which the policy falls within the hierarchy determines the policy type and the resulting approval pathway.

Policies and procedures at lower levels in the hierarchy must support the content of policies or procedures with which they interface at a higher position in the hierarchy. If a policy or procedure does not uphold the content of a higher level policy or procedure, it cannot be approved. For example, the Examination Procedure must uphold the content of the Assessment Policy and the Travel Booking Procedure, which interfaces with multiple policies, must uphold the content of the Travel Policy, Procurement Policy, Delegations of Authority Policy and Records Management Governance Policy.

4.1 Governance Policy

Governance policy fulfils one or more of the following purposes in relation to the operation of Council and its committees and the governance of corporate management:

- sets standards for behaviour
- establishes high level structures and processes
- sets fundamental requirements, limits and allocates responsibilities
- establishes control mechanisms, and /or
- is subject to external reporting requirements.

Examples of governance policies include Codes of Conduct, Fraud and Corruption Control, Delegations of Authority, Honorary Awards and Titles and Public Interest Disclosures.

4.2 Academic Quality Policy

Academic quality policy fulfils one or more of the following purposes in relation to the quality and quality assurance on academic matters:

- sets standards for behaviour
- establishes high level structures and processes
- sets fundamental requirements, limits and allocates responsibilities
- establishes control mechanisms, and /or
- is subject to external reporting requirements.

Examples of academic quality policies include Assessment Policy, Enrolment Policy and Academic Integrity Policy.

4.3 Executive Policy

Executive Policy provides directions or guidance or establishes responsibilities on matters which are the responsibility of corporate management rather than Council.

Examples of executive policies include Space Management Policy, Work Health and Safety Policy, and Pricing, Costing and Income Distribution Policy.

4.4 Regulated Policy and Procedure

There are two unique groups of policy/procedure in the University which exist as a result of external regulatory requirements; namely, Human Resource (HR) policy and procedure and Finance policy and procedure. These two groups of policy and procedure do not easily conform to the Policy and Procedure Framework and, therefore, sit outside the Framework with a unique development and approval pathway. As per the Schedule of Delegations pursuant to the Policy and Procedure Framework, the Chief Financial Officer is accountable for financial policy and the Executive Director, Human Resources is accountable for human resource policy. This enables each area to quickly respond to changes in the external environment and to ensure that HR policy and procedure complies with the requirements of USQ's Enterprise Bargaining Agreement.

4.5 University Procedure

A University procedure is a procedure which applies to the whole University and describes in detail the process or steps to be taken in order to implement a policy. It is mandatory to comply with University procedures and the majority of procedures at USQ are at University level. Local procedure will be developed only in exceptional circumstances therefore the default position is a University procedure.

Procedures will evolve over time in response to internal or external environmental changes.

A University procedure implements one or more governance, academic quality, executive or regulated policies and must uphold the principles of the Framework and the policies to which it is pursuant. A University procedure may or may not have local procedures with which it interfaces. A University procedure cannot override or conflict with governance, academic quality or executive policies or regulated policies and procedures.

A University procedure may include schedules and forms as appendices to the procedure. Appendices follow the same development and approval pathways as procedures.

Examples of University procedures include Examination Procedure, Visitors on University Sites Procedure and Personal Protective Equipment Procedure.

4.6 Local Procedures

Local procedures apply to a specific area, faculty or campus of the University. Local procedures are less common than University procedures and the use of local procedures should be minimised in favour of the use of University procedures.

Examples of local procedures may include specific security arrangements for a certain campus or specific procedures for processing student assignment extension requests for different courses or programs where this impacts on work placements.

A local procedure must interface with, but may not override or conflict with, governance, academic quality or executive policies, regulated policies and procedure or University procedures.

Refer to Appendix A for a summary of document types, their purpose, function content and format, along with approval authority and level of availability.

5.0 Policy and procedure principles

USQ has adopted a set of overarching principles in relation to policy and procedure. All policies and procedures must uphold these principles in order to be approved.

Before gazetting a policy for all-staff consultation and before approval of draft University procedures, the Manager (Policy Services) will review all drafts to ensure that the principles are upheld. The Supervisor of the Head of the Organisational Unit is responsible for ensuring the principles are upheld for any local procedures which they approve.

The principles concern content, process, procedures and presentation.

5.1 Content

The content of policies and procedures will:

- uphold the University's Code of Conduct, core values, mission and strategic goals
- ensure compliance with legislative and industrial requirements
- be consistent with existing University statutes, standards, regulations and policy
- provide a clear and discernible separation between corporate and academic governance, and between governance and management responsibilities
- clearly articulate expectations and consequences
- not be unnecessarily burdensome
- assign responsibility for actions and decisions required under the policy
- show due consideration of risk mitigation
- consider the precautionary principle in order to minimise potential harm.

5.2 Process

The process of development, implementation and review of policies and procedures will:

- be appropriately consultative
- be informed by the principles of continuous improvement
- not be unnecessarily burdensome
- be informed by prevailing legislative requirements, sector best practice and the University's Strategic Plan
- be appropriately communicated.

5.3 Procedures

Procedures will:

- uphold applicable policies
- clearly articulate roles and responsibilities
- be informed by continuous review and improvement
- not be unnecessarily burdensome.

5.4 Presentation

All documentation will be:

- stored according to the prevailing standard
- centrally registered
- accessible
- current and accurate
- clear and comprehensible.

6.0 Responsible parties

The following parties have specific responsibilities in the development and management of policies and procedures:

Party	Role
<p>Manager (Policy Services)</p>	<p>The Manager (Policy Services) is responsible for the overall coordination of the development and review of policies and procedures across the University. The Manager (Policy Services) is responsible for checking that final drafts of policies and procedures conform to the Policy and Procedure Framework, and for gazetting policies for a two-week period and forwarding any feedback received to the Accountable Officer. Upon approval of a policy or procedure, the Manager (Policy Services) will ensure that Records Manager records and metadata are updated and the policy or procedure is successfully published to the Policy and Procedure Library.</p> <p>The Manager (Policy Services) is available to provide advice and coaching to staff tasked with scoping, drafting, implementing or reviewing a policy or procedure and assists staff with access to policy and procedure related resources.</p> <p>The Manager (Policy Services) is not responsible for drafting, preliminary consultation, gaining endorsement and approval, or deploying a policy or procedure.</p>
<p>Policy Coordination Team</p>	<p>The Policy Coordination Team is responsible for assessing the Policy/Procedure Development Proposal and determining the correct hierarchy level and subsequent approval pathway.</p>
<p>Accountable Officer</p>	<p>The Accountable Officer is responsible for scoping and producing the initial draft of a policy either by self-nominating or identifying an individual or group to take on the role of Drafter. The Accountable Officer facilitates the consultation process and subsequent refinement of the policy and definitions, as determined by stakeholder input, and oversees its progress through the endorsement and approval pathways. The Accountable Officer is responsible for completing the Deployment Plan and gaining approval.</p> <p>The Accountable Officer is accountable for the implementation of the policy and for initiating and leading the review of a policy or procedure and definitions. In the case of Executive policies, the Accountable Officer will be the relevant VCE member and this role may not be delegated.</p> <p>Accountable Officers for each policy type are listed in Schedule of Delegations pursuant to the Policy and Procedure Framework.</p>

Party	Role
Responsible Officer	The Responsible Officer is nominated via the Policy Deployment Plan by the Accountable Officer for the overarching policy. The Responsible Officer may or may not be the same person as the Accountable Officer. The Responsible Officer is responsible for scoping and producing the initial draft of each procedure pursuant to a policy. More than one Responsible Officer may be assigned depending on the number and nature of the procedures. Accountability for the procedure, however, still rests with the Accountable Officer.
Drafter	The Drafter is appointed by the Accountable Officer and is the person or group responsible for leading the initial drafting and subsequent refinement of the policy or procedure, including research and writing. The Drafter may or may not be the Accountable Officer.
Endorsing Body	The academic or management position or group or other formally delegated authority (often a sub-committee of Council or Academic Board) with responsibility for endorsing a policy and submitting policy to the approving body.
Approval Authority	The delegate or body responsible for approving a policy, and notifying the Manager (Policy Services). The approving bodies for University policies are Council and Vice-Chancellor's Executive (VCE). The approving delegate for University procedure is the relevant member of Vice-Chancellor's Executive (VCE) or the Executive Director Human Resources in the case of HR policies.
Corporate Records	Records Management is responsible for maintaining records of all policies and procedures in the Records Manager System.
Committee Support Officers	Committee Support Officers for endorsing and approving bodies are responsible for providing the relevant Accountable Officer with feedback and information on decisions made in relation to policies and procedures at meetings, and the Manager (Policy Services) with the final approved policy or procedure for publication, and extracts of the minutes recording the approval for corporate record keeping purposes.

7.0 The policy and procedure cycle

USQ uses the four stage Approach–Deployment–Results–Improve (ADRI) quality process for policy and procedure development, implementation and review.

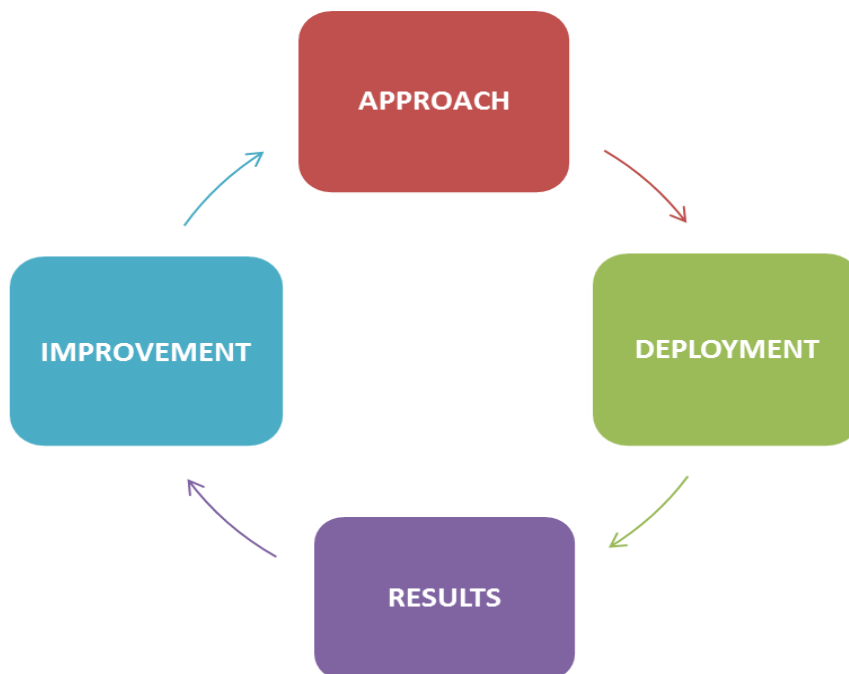


Figure 1: ADRI Cycle

7.1 Approach

Step 1: Alignment

Confirm need and liaise with the Manager (Policy Services)

All policy and procedure drafting work takes place within the Policy Library Records Manager system, and all resources and templates are stored in Records Manager, therefore it is important to ascertain in the first instance whether or not installation of the Records Manager System is required. If Records Manager has not been installed, contact the [Records Manager Help Desk](#) in Corporate Records to organise installation. Please note that Administrator access to the computer is required in order for Records Manager to be installed. If assistance with Administrator access is required, contact the ICT Help Desk on x1900. Further details are provided in Section 8.0.

To assist new users to navigate the Policy Library Records Manager system, a series of *Camtasia* files are available in Records Manager Folder 13/PL/1-1. These provide an introduction to the system and cover topics such as how to search and sort records and how to send an email to Records Manager. These procedures are also available in the same location in narrative form as a PDF for easy reference.

Prior to commencing drafting a majorly amended policy or procedure, the first step is to consult with the [Manager \(Policy Services\)](#) to discuss the current status of the policy or procedure. In the case of new policies and procedures, the [Manager \(Policy Services\)](#) should be contacted to establish a new Records Manager folder in which drafting work will take place, and appropriate access permissions.

Policy – The Accountable Officer must complete a Policy Development Proposal using the relevant template and submit it to the Policy Coordination Team (PCT), via the [Manager \(Policy Services\)](#). The template can be found in Records Manager Folder 13/PL/1 or on the [Policy Library](#) website. This is to make certain that operational units affected by the policy are aware that work is commencing, eliminate duplication and ensure that thought has been given to flow on effects. The Manager (Policy Services) may also be able to provide relevant information that may assist the process.

The Policy Development Proposal is a short briefing paper which outlines:

- the rationale for the policy and its scope
- the intended hierarchy level and the interface with other policies and procedures
- names of key parties, for example, the Drafter(s) and Accountable Officer
- the preliminary consultation approach
- resourcing and risk management impacts
- whether or not there will be changes to Delegations of Authority.

The Manager (Policy Services) will maintain the Policy and Procedure Development and Review Schedule to reflect decisions made by the PCT.

Procedure – The Accountable Officer for the policy to which the procedure is pursuant should consult the policy's Deployment Plan in the first instance. The Deployment Plan will detail the procedures which need to be developed, including any mandatory requirements specified in the policy, and whether or not individual Responsible Officers have been assigned.

Minor amendment – A minor amendment to a policy or procedure is a change of an insubstantial nature, not affecting the general meaning, intent or scope, such as a change to the approved name of a role, position, faculty or administrative unit, or a typographical error or hyperlink requiring correction. In most cases, minor changes can be made without the need for broad consultation.

A minor amendment can be approved by the Accountable Officer, in consultation with the Manager (Policy Services). Refer [section 7.4 Improvement Step 2 Upgrade](#).

Step 2: Direction

Consider alignment issues and undertake research

Before commencing drafting the policy or procedure, it is important to consider alignment issues and undertake background research such as:

- identification of gaps and overlaps across or between policies and procedures
- consideration of the interface between policy and pursuant procedures
- checking the Issues Register in Records Manager folder 13/PL/1 maintained by the Manager (Policy Services) to see if any issues have been logged in relation to the matter being addressed in the policy or procedure
- checking if there are any audit reports or similar on the subject matter
- confirming if there is legislation, regulation, standards or industry codes that require consideration
- finding good examples of policies or procedures on a similar subject from other universities or organisations
- determining what is seen as best practice in relation to addressing the subject matter and assessing if this is practical in the context of USQ
- reviewing USQ's strategic and operational plans to see if these provide direction on the matter
- liaising with subject matter experts
- undertaking research using other sources, such as:
 - the USQ Enterprise Agreement
 - the USQ Act and Statutes
 - authoritative texts and professional publications
 - industry bodies and professional associations
 - the Strategic Plan, Operational Plan and similar guiding documents
 - relevant State and Commonwealth policies, programs and similar
 - relevant websites.

Research can also involve gathering information directly from individuals, communities and organisations such as:

- student unions/guilds
- professionals
- prominent individuals
- community representatives
- community groups
- professional organisations and associations
- academics
- industry groups
- unions
- educational institutes
- end-users of the policy (e.g. student, staff or stakeholder survey).

The above list is not intended to be exhaustive but serves as a guide regarding where information may be sourced.

Step 3: Dialogue

3.1 Commence producing the initial draft

Once relevant alignment issues have been considered and background research has been completed, the next step is to commence writing the initial draft using the relevant template in Records Manager folder 13/PL/1 or on the [Policy Library](#) website. Drafting is usually the most time consuming step of the entire policy/procedure development process and it is essential to the smooth operations of the University that it results in a well-crafted policy or procedure. The initial draft may be produced by an individual or by a stakeholder reference group appointed by the Accountable Officer.

All records relating to development of the policy and procedure must be created and stored in an appropriately named folder in Records Manager. This includes the policy or procedure and documents related to the development, consultation and implementation. To have a folder created in Records Manager, contact the [Manager \(Policy Services\)](#) who in turn will ensure that a folder which follows policy and procedure naming conventions is created by Corporate Records.

In drafting the policy or procedure, it is important to use USQ standard definitions as contained in the Definitions Dictionary (under development – please liaise with [Manager \(Policy Services\)](#)). If terms specified in the Definitions Dictionary are used, they must be listed exactly as they appear in the Definitions Dictionary, in the Definitions section of the template with each term on a separate line. Terms will be automatically hyperlinked to the relevant definition in the Definitions Dictionary upon publication but can be inserted during drafting to aid those involved in the drafting process. If additional definitions need to be used which are not listed in the Definitions Dictionary, or if the definition needs to be revised, this must be done as part of the policy or procedure drafting process. It is recommended that brief consultation takes place with the [Manager \(Policy Services\)](#) to ensure that similar or identical definitions are not being developed simultaneously in another policy space.

There are a number of resources available to assist in drafting a policy or procedure including annotated templates, information sheets, flowcharts and the Policy and Procedure Style Guide. These resources are stored in Records Manager folder 13/PL/1 or on the [Policy Library](#) website. It is also important to consider the principles of the [Policy and Procedure Framework](#) in drafting the document. The Framework principles must be upheld by all policies and procedures at all times. If the principles do not conform, the policy or procedure will not be approved.

3.2 Conduct preliminary consultation

Consultation is a genuine process of exchanging views and seeking input from key stakeholders. In the case of policy, the key stakeholder groups to be consulted will be guided by the Policy Development Proposal and any feedback received from the PCT.

Consultation is essential to the successful development of policy and procedure and helps to ensure:

- it is effective and meets the needs of users
- users understand the need for, and purpose of, the policy or procedure
- that the policy or procedure “fits” within existing systems and processes as much as possible, i.e. the policy or procedure does not create unnecessary additional work or red-tape

- any additional issues are identified
- that the policy or procedure is holistic and does not represent a single view of the world
- that practical, easy to understand language is used and that the terminology is understood by users.

Successful consultation assists to:

- increase the likelihood of acceptance of the policy or procedure
- reinforce legitimacy in the decision making process
- reduce conflict
- increase stakeholder satisfaction.

If significant revisions are required as a result of preliminary consultation, these should be negotiated with key stakeholder groups and the draft refined accordingly. This step may need to be repeated several times.

It must be noted that for all policies and procedures which impact employee or human resources matters, it is an industrial requirement that consultation must include the University's Staff Consultative Committee. If the policy or procedure references these matters, advise the Manager (Policy Services) who will liaise with Human Resources to action this consultation.

7.2 Deployment

Step 1: Review

Once the draft is completed, the Accountable/Responsible Officer will submit the draft to the Manager (Policy Services) to be quality assured. When undertaking this check, the Manager (Policy Services) will ensure that:

- the policy or procedure interfaces well with other policies and procedures
- the policy or procedures upholds the Framework principles
- the policy or procedure conforms with the USQ Act, Statutes, and other government legislation and regulations
- the policy or procedure complies with the Policy and Procedure Style Guide and definitions from the Definitions Dictionary have been used.

If the Manager (Policy Services) signals that changes are necessary in order to comply with the Policy and Procedure Framework, these revisions should be made prior to undertaking broader consultation.

Step 2: Consultation

Undertake broad consultation and refine the draft policy or procedure

Now that the policy or procedure is drafted, the next step is to undertake broad consultation.

Policy – The Manager (Policy Services) will gazette the completed policy draft, and any new or revised definitions, for a period of two weeks on the University intranet. During this period, all staff members will have the opportunity to provide

comments and feedback. Gazettal is a mechanism to ensure that no key groups have been overlooked and is an opportunity to communicate that a new policy or procedure will soon be approved and implemented. At the end of the period, the Manager (Policy Services) will collate and forward feedback to the Accountable Officer.

On the basis of feedback received and in consultation with the key stakeholder groups involved in the preliminary consultation stage, the Accountable Officer will oversee any necessary revisions to the draft. Where significant content revision is deemed necessary, the draft policy may need to go through another iteration of consultation and refinement.

Procedure – The completed procedure draft should be circulated by the Responsible Officer to a wider group of stakeholders for feedback: for example, circulation to relevant committees and sections which may be affected by implementation. Amendments to the draft should be made on the basis of feedback received from the stakeholder groups.

Records of the consultation process for policies and procedures, including relevant emails or excerpts from meeting minutes, should be stored in Records Manager. These records will document how and why the University has taken a particular approach to the matter.

Step 3: Prepare the Deployment Plan

All new and majorly amended policies and procedures must have a Deployment Plan prepared using the relevant template stored in Records Manager folder 13/PL/1 or on the [Policy Library](#) website. Minor amendments and local procedures do not require a Deployment Plan.

The Deployment Plan will be finalised and approved subsequent to approval of the policy or procedure and contains information on how the policy and procedure will:

- affect systems and processes
- affect governance arrangements
- affect publications, websites and other documents
- impact on other policies and procedures
- be communicated to parties affected by it
- be budgeted for
- be implemented by staff
- be evaluated and improved going into the future.

Depending on the subject matter, the Deployment Plan may be quite succinct or it may be a more extensive document. It is possible that during the later consultation stages, the Deployment Plan may also become available for consultation and this should be considered during the drafting process. The Manager (Policy Services) is available to assist in preparing the Deployment Plan.

Step 4: Endorsement

The draft policy or procedure, including any revisions, is now ready for the Accountable Officer to submit to any endorsing body. The Manager (Policy

Services) can provide guidance regarding the appropriate endorsement pathway however the table below provides an overview:

	Governance Policy	Academic Quality Policy	Executive Policy and Regulated Policy and Procedure	University Procedures
Committee	Chancellor's Committee	Education Committee and/or Research Committee via Chair of Academic Board	Relevant management committee	Vice-Chancellor's Executive (VCE), if determined by Accountable Officer
		Academic Board	Vice-Chancellor's Executive (VCE)	
Contact	Executive Officer (Council)	Administration Officer (Academic Board)	Relevant Committee Services Officer as detailed in the USQ Meeting Schedule	Senior Executive Officer (Governance and Management)

The endorsing body/delegate considers the policy/procedure/definitions and determines whether the policy/procedure/definitions need further refinement or whether they are ready to proceed for further endorsement or to the Approval Authority. If revisions or clarifications are required, the endorsing body should communicate these to the Accountable Officer in a timely manner and provide a record of any formal discussions or decisions in relation to the policy/procedure.

Step 5: Approval

Draft policy or procedure

The draft policy or procedure, including any revisions, is now ready for the endorsing body to submit to the Approval Authority, in accordance with the table below. The approval pathway for policies and procedures, including any new or revised definitions, is also detailed in the table below:

Type	Approver of Policy or Procedure	Approver of Deployment Plan
Governance Policy	Council	Vice-Chancellor
Academic Quality Policy	Council via Academic Board	Vice-Chancellor
Executive Policy	Vice-Chancellor's Executive (VCE)	Vice-Chancellor or relevant member of VCE
Regulated Policy and Procedure	Vice-Chancellor's Executive (VCE)	Chief Financial Officer (Finance) or Executive Director, Human Resources (HR)
University Procedures	Vice-Chancellor or nominee recorded in Schedule of Delegations for Policy and Procedure*	Vice-Chancellor or nominee recorded in Schedule of Delegations for Policy and Procedure
Local Procedures	Supervisor of Head of organisational unit to which the local procedure applies	N/A

** Where such a delegation exists, as listed in the Schedule of Delegations pursuant to the Policy and Procedure Framework, the policy can be submitted directly to the senior staff member with the delegated authority for approval. For procedures where no delegation exists, the procedure is to be submitted to the Vice-Chancellor for approval. Whether or not the procedure is to be endorsed by the Vice-Chancellor's Executive (VCE) in the first instance is a matter for decision by the Accountable Officer.*

The Approval Authority may:

- approve the endorsed policy/procedure
- ask for revisions to be made and the policy/procedure resubmitted
- reject the policy/procedure and decide on alternative course of action.

It should be noted that at any time an Approval Authority can choose to elevate the approval of a policy or procedure to a higher level, if they so choose. Likewise, Council may request to elevate the approval level of any policy to Council, if deemed appropriate. It is expected that this authority will be rarely used but may be exercised in relation to highly contentious matters.

Deployment Plans

Approval is as per the table above, after approval of the relevant policy or procedure.

Notifying the Manager (Policy Services)

Once the policy or procedure is approved, the Approval Authority must notify the Manager (Policy Services) of the approval and supply the Manager (Policy Services) with:

- the final approved copy of the policy or procedure
- a record of the approval, such as an email or extract from committee minutes.

Once the Deployment Plan is approved, the Approval Authority must supply the Accountable Officer with the final approved copy of the Deployment Plan. A copy should be added to the relevant Records Manager folder for record keeping purposes.

Step 6: Publication

Publication of the document in the Policy and Procedure Library

Upon receiving the approved policy or procedure, the Manager (Policy Services) will:

- Update the Policy and Procedure Development and Review Schedule, as appropriate;
- Upload the approved document to Records Manager according to the local work instruction for publication of new and revised policies, including locking the approved policy or procedure as a corporate record;
- publish the approved document to the Policy and Procedure Library;
- Repeal documents in Records Manager, as appropriate and as per the approval advice;
- Remove relevant documents from the Policy and Procedure Library; and

- File all relevant approval evidence to Records Manager.

Step 7: Communication

After publication, the Manager (Policy Services) will advise University staff members of the new or revised policy or procedure via the website and the Policy Newsletter. Any other special requirements regarding communication of the policy or procedure should be detailed in the Deployment Plan and actioned by the Accountable Officer or Responsible Officer.

Step 8: Implementation

The Accountable Officer (policy) or Responsible Officer (procedure) is responsible for coordinating the deployment of the policy or procedure as per the approved Deployment Plan, including undertaking training and education and awareness activities. These activities may be delegated to an appropriate nominee.

Throughout the deployment of the policy or procedure, it is the responsibility of the Accountable/Responsible Officer, or nominee, to monitor the implementation and address issues which arise. The Accountable/Responsible Officer, or nominee, is responsible for establishing a Deployment Issues Register in Records Manager to record any issues that may arise, and to gather data on the success of the policy or procedure and its implementation. Usually these methods will have already been identified as part of the Deployment Plan.

7.3 Results

Step 1: Initiate the Review

Regular review of policy and procedure is necessary to determine if the policy or procedure is:

- still required
- effective
- current
- relevant.

All new or substantively amended policies and procedures should initially be reviewed 12 months after approval. Thereafter, the default review period for policies will be three years from the date of the last review, or the date the policy comes into effect, unless an instrument specifies or a risk assessment undertaken by the Manager (Policy Services) in conjunction with the Accountable Officer requires an earlier date. The review should be completed before the due date.

If legislative changes or changes to codes, standards or similar affect the policy or procedure, the Accountable/Responsible Officer, or nominee, must notify the Manager (Policy Services) and initiate a review. It is the responsibility of the Accountable/ Responsible Officer, or nominee, to stay abreast of relevant issues.

Step 2: Undertake the Review

The Policy and Procedure Review Form (under development) stored in Records Manager folder 13/PL/1 must be used for reviews. This checklist is also useful for reviewing other policies when undertaking research for policy development.

All policies and university procedures will normally be reviewed by a working group consisting of the following:

- Accountable/Responsible Officer, or nominee
- person/s with in-depth knowledge of the subject area
- other relevant persons as appointed by the Accountable/Responsible Officer, or nominee.

It is the choice of the Responsible Officer, or nominee, as to how and who reviews a local procedure however the Review Form must still be used.

7.4 Improvement

Step 1: Outcomes of the Review

All documentation relating to the review is to be saved in the relevant policy/procedure folder in Records Manager and assigned a 'review' status.

Depending on the complexity of the policy or procedure and the success of its deployment, the review may be in depth or completed quite quickly.

Once the review is complete, the Accountable/Responsible Officer, or nominee, must inform the Manager (Policy Services) and communicate the outcomes of the review.

Step 2: Upgrade

Should evaluation of the policy or procedure recommend major amendments (for example, changes to the scope, purpose, definitions or content), the policy must be re-drafted as outlined in 'Approach' Step 3: Dialogue. The remaining steps of the cycle should be followed and approval must be gained as per the instructions in 'Deployment' Step 5: Approval.

Should the review recommend minor amendments to the policy or procedure (for example, updating reference details, formatting, correcting inconsistent use of names or titles, making the writing easier to understand), the policy or procedure does not have to be re-approved and minor amendments may be approved by the Accountable Officer, in consultation with the Manager (Policy Services).

Approved changes will need to be provided to the Manager (Policy Services), together with a copy of the completed Checklist. Upon receiving these items, the Manager (Policy Services) will:

- archive the previous version of the policy or procedure
- update a new version of the policy or procedure in Records Manager to reflect the minor changes
- update the version number to the relevant sub-version number (for example, 1.1, 1.2, 1.3)
- update the review date, and Policy and Procedure Development and Review Schedule, as appropriate

- update Records Manager filing, including locking the approved policy or procedure as a corporate record
- publish the approved document to the Policy and Procedure Library.

Should the review of the policy or procedure find that no changes need to be made, the Accountable/Responsible Officer, or nominee, should note this and provide the Manager (Policy Services) with a copy of the Policy and Procedure Review Form (under development) for storage in Records Manager. The Manager (Policy Services) will then update the review date of the approved policy or procedure, as appropriate, and also update the Policy and Procedure Development and Review Schedule accordingly.

8.0 Record keeping

The Accountable/Responsible Officer is responsible for ensuring that there are adequate records to:

- meet legislative requirements
- provide evidence of conformance to requirements
- provide historical information for process review and improvement.

Records must be kept of:

- the draft policy or procedure
- any versions of the policy or procedure that were circulated for consultation
- the final version of the policy or procedure
- documents associated with the development of the policy or procedure
- how any input/feedback gained through consultation was dealt with using the Consultation Record Template located within Records Manager folder 13/PL/1 or on the Policy Library website
- responses provided to groups or individuals who provided input or feedback
- the Deployment Plan
- evidence of the approval of a new policy or procedure or changes to an existing policy or procedure (e.g. excerpt from minutes or a written authorisation)
- the Policy and Procedure Review Form (under development) and associated documents
- evidence of the repeal of a policy or procedure (e.g. excerpt from minutes or a written authorisation or the Deployment Plan of another policy or procedure where implementation includes an authorisation to repeal a policy)
- any other relevant documentation.

8.1 Storage of records and publications

All records must be stored within the Records Manager System.

Each policy and procedure (including non-approved drafts) will be assigned a folder in Records Manager and documents contained within assigned a status from one of the following mandatory status options:

1. Approved (restricted to Manager (Policy Services))
2. Approval Evidence
3. Archived (restricted to Manager (Policy Services))
4. Development
5. Repealed (restricted to Manager (Policy Services))
6. Review.

All existing policies and procedures, and policies and procedures already identified as being required, will already have a folder set up in Records Manager.

For any additional policies or procedures for which a need is identified, the Manager (Policy Services) will liaise with Corporate Records for the folder to be established and insert relevant templates into the folder.

When work is commenced on a policy or procedure, the Manager (Policy Services) will provide the Accountable/Responsible Officer with the Records Manager folder number.

Policies and procedures under development

When a new policy is being developed (i.e. prior to it being approved) the draft documents, Deployment Plan etc. should be created within the relevant policy or procedure folder and assigned a 'development' status.

Upon approval, the approved policy will be assigned 'approved' status by the Manager (Policy Services) and the 'development' documentation assigned 'archived' status. The 'approved' status may only be assigned by the Manager (Policy Services) and all approved documents are locked and cannot be changed as they are an official corporate record. Metadata relevant to the policy or procedure will be updated by the Manager (Policy Services) and the approved policy or procedure is then published to the Policy and Procedure Library website.

The record of the approval of the new policy or procedure will be stored in the relevant policy or procedure folder and assigned 'approval evidence' status.

Policies and procedures under review

When an existing policy or procedure is due for review, all the documentation related to the review should be assigned 'review' status in the appropriate policy or procedure folder.

When the policy or procedure is updated and the changes are approved, the previously 'approved' policy or procedure will be assigned 'repealed' status by the Manager (Policy Services) and the newly approved version loaded into Records Manager and assigned 'approved' status. Metadata relevant to the policy or procedure will be updated by the Manager (Policy Services) and the approved policy or procedure is then published to the Policy and Procedure Library website.

The record of the approval of the updated policy or procedure will be stored in the relevant policy or procedure folder and assigned 'approval evidence' status.

Repealed policies and procedures

Upon notification by the Approver, policies and procedures that are repealed will be assigned 'repealed' status by the Manager (Policy Services), metadata updated accordingly and the policy or procedure removed from the Policy Library.

The record of the approval of the repealed policy or procedure will be stored in the relevant policy or procedure folder and assigned 'approval evidence' status.

8.2 Numbering

Upon approval, each policy and procedure will be allocated a unique Records Manager record number which will remain static. This is to ensure that the current version of a policy can be identified by the same number and will ensure that the 'related records' function of Records Manager and relationships on the website are

not broken. The Records Manager record number will be recorded on the policy or procedure in the metadata at the bottom of the document.

8.3 Version numbers

At the time of first approval, all policies and procedures will be version number 1. Thereafter, the change to the version number will be made in accordance with the type of change made to the document.

8.3.1 Major amendments

Major amendments to a policy or procedure will result in a new version number, for example, version 1, 2, 3 etc.

Major amendments are any significant changes that affect the substance or the purpose of the policy such as changes to the definitions, scope and policy content. Should major amendments be made to a policy or procedure, the changes must be approved as per the approval process for the relevant policy or procedure category. The Manager (Policy Services) must be informed of any approved changes and be provided with a record of approval such as an extract from minutes or a written authorisation so that Records Manager can be updated and the latest version uploaded to the Policy and Procedure Library website

8.3.2 Minor amendments

Minor amendments will result in an increase in the sub-version number, for example version 1.1, 1.2, 1.3 etc.

Minor amendments are immaterial changes that do not affect the substance or purpose of the policy. Minor amendments include changes such as updating the contact officer or the format. Immaterial changes do not need approval. The Manager (Policy Services) must be informed of any changes so that Records Manager can be updated and the latest version uploaded to the Policy and Procedure Library website

Upon a review, if no changes occur, there will be no changes made to the version number.

9.0 Related documents

Documents related to this manual are stored in Records Manager folder 13/PL/1 and are as follows:

- Policy and Procedure Framework
- Key Roles and Responsibilities
- Responsibilities of Accountable Officer AQ Policy
- Policy/Procedure/Schedule/Form document Templates
- Policy Development Proposal Template
- Consultation Record Template
- Policy Deployment Plan Template
- Procedure Deployment Plan Template
- Policy and Procedure Style Guide
- Definitions Dictionary Process (under development)
- Flowchart - For Drafters: Current Process re Definitions
- Policy Issues Register
- Policy and Procedure Review Form (under development)
- Policy Development Flowchart
- Policy Development Information Sheet
- Annotated Policy Template
- Instructions for Writing a Policy
- Annotated Procedure Template
- Instructions for Writing a Procedure.

Policy Library Records Manager resources are stored in Records Manager folder 13/PL/1-1 and are as follows:

- Policy Library Records Manager Procedures 2013
- Policy Document Cheat Sheet
- Recommended Policy Library Training Plan
- *Camtasia* training video files
 - 1. Transition to the new Policy Library in Records Manager
 - 2. Introduction to the Policy Library in Records Manager
 - 3. Formatting columns in the Policy Library in Records Manager
 - 4. Searching and sorting records in Records Manager
 - 5. Sending the Records Manager link in an email
 - 6. Editing a document in the Policy Library in Records Manager
 - 7. Sending a document to Records Manager
 - 8. Sending an email to Records Manager.

APPENDIX A

	Purpose, functions and content	Format	Approval Authority	Availability
Policy <ul style="list-style-type: none"> University-wide applicability General 	<ul style="list-style-type: none"> States University position on key issues in a consistent and transparent manner, providing guidance for decision-making. Guides some aspect of University activities for foreseeable future and should change infrequently. 	Policy template	<ul style="list-style-type: none"> Governance Policy: Council Academic Quality Policy: Council via Academic Board <ul style="list-style-type: none"> Executive Policy: Vice-Chancellor's Executive (VCE) Regulated Policy and Procedure: as required by regulatory authority 	Publicly available Included in Policy and Procedure Library
University Procedures <ul style="list-style-type: none"> University-wide applicability More specific and detailed than the related policy 	<ul style="list-style-type: none"> Gives mandatory steps to implement and comply with a policy and meet its intent. Sets out responsibilities and accountabilities; gives detail on who does what and when. May include explanations of why a procedure needs to occur in a certain way. May include 'tools' such as checklists or forms. Usually reviewed and revised more frequently than policies. 	Procedure template	<ul style="list-style-type: none"> Relevant member of Vice-Chancellor's Executive (VCE) or Executive Director HR (HR policies) 	Publicly available Included in Policy and Procedure Library
Schedules <ul style="list-style-type: none"> University-wide applicability Pursuant to a procedure More specific than procedures 	<ul style="list-style-type: none"> Provides additional information and requirements, usually in the form of a table, flowchart, diagram etc. Must be in line with policy and procedures. Defines or constrains University operational practices. Are often system-based and can change in response to external constraints, new processes or technology, changes to administrative arrangements, or changes in the risks associated with an area. Often sets out individual steps to be followed in order to carry out a particular activity or process. Included as an appendix to a University procedure. 	Schedule Template	Relevant member of Vice-Chancellor's Executive (VCE) or Executive Director HR (HR policies)	Publicly available Included in Policy and Procedure Library
Forms <ul style="list-style-type: none"> Pursuant to a procedure 	Provides a form to be submitted as part of a particular process or requirement associated with a University procedure. May be provided as an online form or print version.	Form template	Relevant member of Vice-Chancellor's Executive (VCE) or Executive Director HR (HR policies)	Publicly available Included in Policy and Procedure Library
Local Procedures <ul style="list-style-type: none"> Limited to one organisational unit More specific than procedures 	Same purpose, functions and content as University procedures but applied only to a specific organisational unit, faculty or campus of the University. May be different versions across the University for different organisational units.	No template required	Supervisor of Head of organisational unit to which the procedure applies	Normally not publicly available