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## 1 PURPOSE

- 1.1 This framework establishes the process for developing, reviewing and managing CQUniversity [policy documents](#).

## 2 SCOPE

- 2.1 This framework applies to documents which are managed under the University's policy document framework and published on the University's policy website.

- 2.2 This framework does not apply to:

- Work instructions – these should be developed and reviewed in line with this framework; however will be managed by the business unit, and not approved or published as a policy document.

- Project boards or low-level committees – terms of references for these documents should be developed and reviewed in line with this framework; however, will be managed by the business unit, and not approved or published as a policy document.
- Forms – regardless whether associated with a policy document, all forms will be managed by the business unit, and not approved or published as a policy document. Forms should be published on the University’s internal [StaffNet Forms Page](#) if applying to employees only, or on the University’s student or public sites when applying to students and/or members of the public. All forms must have a relevant Collection Notice. Refer to the [Privacy page in StaffNet](#) for further information.

### 3 FRAMEWORK

3.1 CQUniversity policy documents perform an essential role in the University’s governance system. This framework assists the University to:

- meet its legislative and governance responsibilities
- achieve its organisational goals
- ensure continual improvement within the organisation
- ensure clarity, consistency, transparency and accountability in decision-making, and
- reduce the potential of risk.

#### Policy document framework

3.2 The University’s policy document framework is based on a hierarchy of policy documents. If two policy documents in the hierarchy are inconsistent, the document higher in the hierarchy will take precedence. [Appendix 1](#) represents this hierarchy.

#### Policy documents

3.3 All policy documents must be followed. Associated documents, such as templates or factsheets, are advisory and assist in ensuring compliance with the mandatory policy documents.

3.4 A ‘policy suite’ refers to a group of policy documents that together form the whole policy structure to take a holistic approach on a policy matter.

3.5 Policy documents can apply to the entire University community (employees, students, contractors, visitors), to a specific target audience (e.g. higher education students or vocational education and training students), or the University as an organisation and/or its controlled entities. Where a policy document includes a University controlled entity each applicable entity must be acknowledged in the scope of the document.

3.6 When developing or reviewing a policy document:

- consider the purpose of the document and intended audience
- ensure they are consistent and comply with legislative or regulatory requirements, government policy and University goals
- ensure they are consistent with related University policy documents
- ensure authorities and delegations, where specified, are consistent with the [Delegation of Authority Policy](#) and the [Authorities and Delegation Register](#)
- use the approved policy document templates
- use titles of positions (generic titles where possible) and organisational units (i.e. avoid using personal names)
- write in plain English in a manner that is unambiguous, concise, inclusive, and direct, and
- refer to the University’s [Writing Style Guideline](#).

- 3.7 The Administrator is responsible for developing and reviewing policy documents and must ensure:
- consultation with relevant stakeholders, including those with appropriate expertise
  - risks associated with the subject matter of the policy document/s are identified and addressed
  - responsibilities for compliance, monitoring and review, reporting, and records management are identified and addressed
  - financial implications for the new document/s, or other relevant policy documents, are identified and addressed
  - new or updated documents are communicated to relevant stakeholders, and
  - policy documents are in an approved format (i.e. relevant template).

## Templates

- 3.8 The approved policy document templates must be used when developing or reviewing a policy document.
- 3.9 When developing a policy and a related procedure, it is preferred that they are combined into one document using the [Policy and Procedure Template](#). Use hyperlinks and the table of contents to help readers navigate the document and aid readability (e.g. if the document is lengthy or the scope refers to different groups).
- 3.10 The separate [Policy Template](#) or [Procedure Template](#) should be used when only one or the other is required, or where separating a parent policy from multiple related procedures is essential (e.g. one policy with multiple related procedures; the scope refers to multiple groups with complex, dissimilar provisions).
- 3.11 The [Guideline Template](#) should be used when offering advisory information to support a policy document.
- 3.12 The [Committee Terms of Reference Template](#) should be used when establishing a committee or project board.

## Naming convention

- 3.13 Policy document titles must be a brief description of the subject matter. Where possible, the key identifying word should be the first word of the title (e.g. Records Management Policy and Procedure, not Policy and Procedure for Records Management).
- 3.14 The type of document will be included at the end of the title only.

## New policy documents

- 3.15 New policy documents are developed to address an identified need. Wherever possible, existing policy documents should be amended or consolidated before creating a new document.
- 3.16 To create a new policy document:
- develop a document in accordance with sections 3.6 and 3.7
  - forward the document to the Policy Officer for review, then
  - complete the [approval process](#) outlined in this framework.

## Reviewing policy documents

- 3.17 Policy documents must be reviewed at least every three years, unless an alternative timeframe is specified in the document.
- 3.18 Documents may be reviewed earlier than this period, as required by the Administrator or Approval Authority. Changes to legislation, government policy and/or University goals or operations are examples of circumstances that can trigger the need to review a policy document before its next review date.

- 3.19 Each year, the Policy Officer will notify the Administrators, Executives with delegated approval authority, and the Secretary of each approving and advisory committee of policy documents due for review in that year. Policy documents due for review will be included in the approving and advisory committee's annual reporting schedules.
- 3.20 To review a policy document:
- contact the Policy Officer (via [policy@cqu.edu.au](mailto:policy@cqu.edu.au)) to request the word version of the current published document for editing
  - ensure all editing is undertaken using 'track changes' on the version of the document provided by the Policy Officer (i.e. not on any other draft or copied versions). Tracking changes is required for record keeping and for commentators and decision-makers to understand what changes are proposed
  - ensure sections 3.6 and 3.7 are followed
  - forward the reviewed document to the Policy Officer for review, then
  - complete the [approval process](#) outlined in this framework.

## Expiring policy documents

- 3.21 Policy documents may either be:
- replaced – where the policy reference number will remain the same (i.e. where a policy title has changed), or
  - expired – where a policy document has been consolidated into another policy document or is no longer required, and the current policy reference number will expire.
- 3.22 To replace or expire a policy document:
- forward the request, including reasoning for expiration/replacement, to the Policy Officer for review and identification of any related policy document impacts, then
  - complete the [approval process](#) outlined in this framework.

## Work instructions

- 3.23 [Work Instructions](#) are administrative instructions and processes developed by a business unit to support policy documents and operations. These documents should be in-depth 'how-to' documents and should not introduce mandatory principles, expectations or processes which are not already included in a policy document. Work instructions must be reviewed regularly to ensure currency and consistency with related policy documents.
- 3.24 A [Work Instruction Template](#) has been created to ensure work instructions are consistent with University's policy documents, and align to the University's [Brand Guideline](#) and [Writing Style Guide](#). This template is not mandatory to use, but is strongly encouraged.
- 3.25 Heads of business units are responsible for work instructions, as they are the approvers of such documents, and must ensure:
- alignment with related policy documents
  - appropriate consultation is undertaken, and
  - the instructions meet their purpose.

## Terms of reference

- 3.26 Governance and high-level management [Committees](#) are included in the University's policy document framework, and must have terms of reference to outline their operations, responsibilities and membership. The [Committee Terms of Reference Template](#) should be used as guiding document when creating a terms of reference.

- 3.27 Project boards, low-level committees and meetings which do not require a University decision (e.g. team meetings or working groups) are not included as a committee under the policy document framework and will be managed by the relevant business unit.

## Review types

### Major amendment

- 3.28 A major amendment includes new or expiring policy documents, changing the document type, the introduction or removal of information, amendments which may impact how the policy document is implemented, or amendments that need to be considered across the University.

- 3.29 Major amendments:

- may require prior consultation from a Committee (in addition to stakeholder feedback)
- will be recommended by the Advisory Committee, where relevant, and
- will be approved by the Approval Authority.

- 3.30 The Administrator, Approval Authority or Advisory Committee may establish a working party for major reviews to ensure broad input and consideration of the issues involved.

### Administrative amendment

- 3.31 An administrative amendment includes updating the document template, terminology or contact details, clarifying wording, or corrections that do not change the intent of the current content.

- 3.32 The Administrator may approve administrative changes without the need for consultation with or approval by the Advisory Committee or Approval Authority.

- 3.33 There are two types of administrative amendments:

- Administrative amendment – the Administrator confirms that the document has been reviewed in its entirety and only minor amendments are required. In this case, a new review date for the document will be set.
- Minor administrative amendment – the Administrator confirms minor amendments are required to the document, but the document has not been reviewed in its entirety. In this case, a new review date for the document will not be set.

### No change review

- 3.34 A no change review is when a full review, including consultation, has been undertaken on a policy document and it is determined no amendments are required. If no amendments are required, the Administrator can approve a no change review, and a new review date will be set.

### Editorial amendment

- 3.35 An editorial amendment includes updating hyperlinks, formatting, and position/legislation titles. The Policy Officer may make editorial amendments without the need for consultation or approval by the Administrator, Advisory Committee or Approval Authority. A new review date will not be set for editorial amendments.

## Approval processes

- 3.36 Policy documents must be approved prior to being published. Refer to the [Review Types](#) and [Approval Authorities](#) sections for details.

- 3.37 Policy documents must be sent to the Policy Officer ([policy@cqu.edu.au](mailto:policy@cqu.edu.au)) for review before submitting to the Approval Authority for approval. Reviews from the Policy Officer will be actioned as quickly as possible, however please allow at least 10 working days for completion. The Policy Officer will conduct a review to ensure:

- organisational consistency and formatting

- compliance against other policy documents, the University's Compliance Register and authorities and delegations, and
  - someone who is not the subject expert can clearly understand and follow the document.
- 3.38 Both a track changes version and clean version for reviewed documents must be submitted for approval. The Committee Secretary may include only a clean version in the Committee papers if the amount of track changes in the document makes it difficult to read. New and expiring policy documents do not require a track changes version to be submitted.
- 3.39 The Administrator must provide the following documents when seeking approval:
- a track changes and clean version of the policy document/s (track changes version is not required for new or expiring documents)
  - coversheet report when submitting to a Committee. The coversheet report must clearly outline the proposed changes within the policy document, and
  - policy document checklist (this document will not be presented to a Committee but will confirm to the Approval Authority and/or Committee Secretary that the policy document/s is/are ready for approval).
- 3.40 The Committee Secretary or Approval Authority will notify the Policy Officer and Administrator when the policy document has been considered.
- If the policy document is not approved and changes are required, the Administrator must make the required changes in the track changes reviewed document, and re-submit the document for approval.
  - If the policy document is approved with changes required, the Administrator must make the required changes in the track changes reviewed, and forward the document to the Policy Officer for finalising.
  - If the policy document is approved with no changes required, the Committee Secretary or Approval Authority will provide the approved policy documents to the Policy Officer to finalise and publish on the policy website.
- 3.41 Definitions in the [University Glossary](#) will be updated if the same definition is listed in an approved policy document. Additional definitions can be added to the Glossary if requested by the Administrator. Where possible, definitions should be referred to the University Glossary rather than including a definition in both the Glossary and the policy document.

## Approval authorities

- 3.42 When a committee is established, its scope of responsibility, including any delegations to approve policy documents, are included in its terms of reference. The [Authorities and Delegations Register](#) also outlines any position holders and committees that been given the authority or delegated authority to approve policy documents. Parent committees may update the delegations of their sub-committees to be able to approve, review and/or expire policy documents.
- 3.43 The 'Approval and Review' section of the policy document, will reference the Approval Authority, any Advisory or Consultative Committees, and the Administrator.
- 3.44 Unless the Approval Authority decides otherwise, within their scope of responsibilities, policy documents are approved in line with the [Review Types](#) section detailed above.
- 3.45 The Approval Authorities for establishing, reviewing or expiring policy documents are:
- University Council (or delegated sub-committee) – corporate governance matters
  - Academic Board (or delegated sub-committee) – academic governance matters
  - Vice-Chancellor and President (or delegated Executive) – management matters.

## Publication

- 3.46 All policy documents are required to be publicly available. Policy documents will be published on the University's internal [StaffNet site](#) and [policy website](#) – a central online policy document repository. All policy documents will be finalised and published by the Policy Officer.
- 3.47 All policy documents will be converted to pdf format before publication. The Policy Officer will retain the track changes and clean word versions of the approved policy document on file.
- 3.48 The Policy Officer will advise the Administrator when a policy document is published. The Administrator is responsible for notifying relevant stakeholders of the amendments.

## Communication and implementation

- 3.49 The Administrator is responsible for developing appropriate communication strategies and implementation processes for policy documents (e.g. an email to relevant stakeholders about the new or changed policy document, its implications, how it will be implemented, and who to contact for queries; or, for new and revised policy documents with substantial operational impacts or a staged implementation, development of a detailed communication strategy and implementation plan in consultation with relevant stakeholders).
- 3.50 The Administrator must liaise with the Student Communications team (via [reachstudents@cqu.edu.au](mailto:reachstudents@cqu.edu.au)) prior to document approval, for documents which must be communicated to all students.
- 3.51 The Administrator must liaise with the Corporate Communications team (via [communicate@cqu.edu.au](mailto:communicate@cqu.edu.au)) prior to document approval, for documents which must be communicated to all employees.
- 3.52 A list of recently updated policy documents will be available on the University's internal [Policy StaffNet page](#).

## 4 RESPONSIBILITIES

### Compliance, monitoring and review

- 4.1 The Administrator has overall responsibility for the policy document, and must ensure the document is:
- updated to comply with legislation, government policy, University requirements and best practice, and
  - followed by all employees and the target audience.
- 4.2 The Administrator may delegate the preparation or revision of a document and may seek input from stakeholders and/or a working party.
- 4.3 The Policy Officer is responsible for managing University policy documents in line with this framework.
- 4.4 The Director Governance is responsible for implementing, monitoring, reviewing and ensuring compliance with this framework.

### Reporting

- 4.5 The Administrator will report to the Approval Authority on issues of policy document implementation, compliance, monitoring and review.
- 4.6 The Policy Officer will provide an annual list of policy documents due for review to:
- Committee Secretaries for inclusion in committee reporting schedules,
  - relevant Executives with delegated approval authority, and
  - relevant Administrators.

### Records management

- 4.7 Employees must manage records in accordance with the [Records Management Policy and Procedure](#). This includes retaining these records in a recognised University recordkeeping information system.

- 4.8 University records must be retained for the minimum periods specified in the University Sector Retention and Disposal Schedule on the [Queensland State Archives website](#). Before disposing of any records, approval must be sought through the Records Management Office (email [records@cqu.edu.au](mailto:records@cqu.edu.au)).
- 4.9 The Policy Officer will retain:
- a master spreadsheet of all policy documents, including expired documents
  - a copy of each version of a policy document, including the approved tracked change versions and finalised versions, and
  - records relevant to the approval of each document.

## 5 DEFINITIONS

- 5.1 Terms not defined in this document may be in the University [glossary](#).

### Terms and definitions

**Administrator (policy document owner):** the person with the responsibility for ensuring the policy document is monitored, implemented and followed.

**Advisory committee:** a committee with authority to review and recommend policy documents to the Approval Authority. Advisory committees are normally a sub-committee of the Approval Authority. The Advisory Committee may recommend the document as is, or recommend further changes or consultation is undertaken prior to seeking approval from the Approval Authority.

**Approval authority:** the committee or position with authority to approve policy documents. The University Council, Academic Board and Vice-Chancellor and President are the University's primary approval authorities. Authority to approve policy documents may be delegated through the University's [Delegation of Authority Policy](#) or sub-committee terms of reference.

**Business unit:** the organisational area responsible for the process or document. Business units could be a Division, Directorate, School or team unit.

**Consulting committee:** a committee which must be consulted on a policy document before it is submitted for approval to the Advisory Committee or Approval Authority. A consulting committee cannot approve a policy document but can provide advice and feedback. Consulting committees are determined by either the Administrator or the Approval Authority. The Administrator or Approval Authority may also send the document for further consultation to additional committees or individuals.

**Controlled entity:** an entity that satisfies the test of control in section 50AA of the [Corporations Act 2001](#) (Cwlth) and includes:

- an entity which the University wholly owns
- an entity in which the University holds a partnership interest or other legal or beneficial interest of any kind (including shareholding interest or membership interest)
- an entity which the University controls, and
- an entity formed and registered in Australia or in a country or state outside Australia.

**Committee:** an established group delegated by an Approval Authority to decide, recommend, and/or provide advice on a particular area or function. Committees are an essential part of the University's governance system and structure. Committees which must be approved by a governance or high-level management committee are included under the University's policy document framework. Project boards and low-level committees are not considered part of the policy document framework.

**Governance and high-level management committees:** committees included in the University's committee framework and are managed by the University's Committees Team.

**Guideline:** an advisory document to supplement policy and/or procedures (e.g. part of a framework or suite of policy documents) or serve as a good practice reference when no applicable policy or procedure exists. The scope of a policy may apply to all or parts of the University, its entities, or specific groups.

**Low-level committee:** committees which are not included in the University's committee framework. These committees are managed by the relevant business unit and not included in the University's policy document framework.

**Policy:** a statement of principle/s that aligns with legislative, regulatory, or University requirements and which outlines the University's position on an area of its activities. The scope of a policy may apply to all or parts of the University, its entities, or specific groups. Charters, Codes and Frameworks are considered 'policies' under the University's policy document framework.

**Policy document:** a collective term for CQUniversity policies, procedures, guidelines and terms of reference which are used to govern and manage the University's operations.

**Procedure:** a document which prescribes specific tasks, processes and responsibilities to be followed to implement a policy and/or an organisational goal. The scope of a policy may apply to all or parts of the University, its entities, or specific groups. Procedures should not include low-level work instructions. This should be included the business unit's work instructions.

**Project board:** an established group to oversee and govern a particular project or suite of projects. Project Boards should only exist for the life of a project. Once the project is complete and the project outcomes delivered, the Project Board will wind up. Following wind up, management may establish a committee to continue to support the operations of the project deliverables. Project boards are managed by the relevant business unit and not included in the University's policy document framework.

**Terms of reference:** a document which establishes the functions and responsibilities, delegated authorities, membership and processes associated with a committee. Terms of Reference for project boards must include an expected completion date for both the project and the project board.

**Work instruction:** administrative instructions and processes developed by a specific business unit to support policy documents and operations. These documents could include working instructions, templates or factsheets which provide additional low-level information to support a policy document. Work instructions should not include mandatory direction or process which is not already in a policy document. Work instructions are managed by the relevant business unit and not considered a policy document under this framework.

## 6 RELATED LEGISLATION AND DOCUMENTS

[Authorities and Delegations Register](#)

[Brand Guideline](#)

[Committee Terms of Reference Template](#)

[Committee Terms of Reference Template \(low-level committees\)](#)

[Company Governance Policy and Procedure](#)

[Corporations Act 2001](#) (Cwlth)

[Delegation of Authority Policy](#)

[Guideline Template](#)

[Policy and Procedure Template](#)

[Policy Document Checklist](#)

[Policy Template](#)

[Procedure Template](#)

[Work Instruction Template](#)

[Writing Style Guideline](#)

## 7 FEEDBACK

7.1 Feedback about this document can be emailed to [policy@cqu.edu.au](mailto:policy@cqu.edu.au).

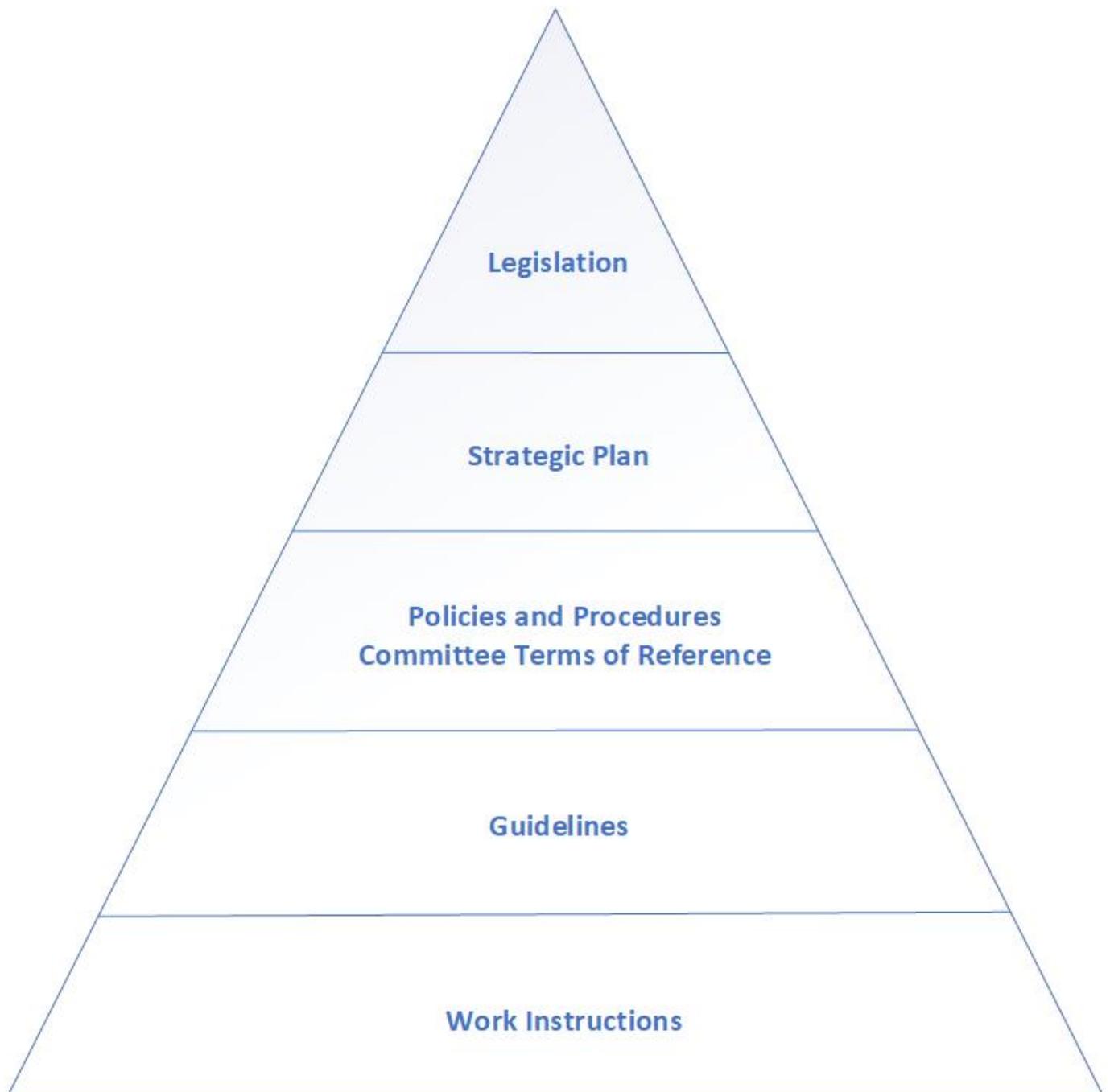
## 8 APPROVAL AND REVIEW DETAILS

Approval and Review	Details
Approval Authority	Vice-Chancellor and President
Advisory Committee	Vice-Chancellor's Advisory Committee
Administrator	Director Governance
Next Review Date	03/06/2023

Approval and Amendment History	Details
Original Approval Authority and Date	Vice-Chancellor and President 03/06/2020
Amendment Authority and Date	Director Governance 01/09/2020
Notes	This document replaced the Policy Document Development and Review Procedure (03/06/2020).

## 9 APPENDICES

### Appendix 1: Policy document framework hierarchy



## Appendix 2: Policy document types and approval authorities

Policy Document Type	Type Description	Approval Authority
<b>Corporate Governance</b>	<p>Documents which relate to how the University is controlled and operates, and how it holds its people accountable.</p> <p>Examples include, but not limited to:</p> <ul style="list-style-type: none"> <li>• business continuity</li> <li>• Code of Conduct</li> <li>• compliance and legislative requirements</li> <li>• conflicts of interest</li> <li>• controlled entities</li> <li>• financial matters</li> <li>• public interest disclosures</li> <li>• risk management</li> <li>• strategic plans.</li> </ul>	Council (or delegated sub-committee)
<b>Academic Governance</b>	<p>Documents which relate to how the University will govern academic matters.</p> <p>Examples include, but not limited to:</p> <ul style="list-style-type: none"> <li>• academic quality</li> <li>• academic standards</li> <li>• accreditation and re-accreditation</li> <li>• grades and results</li> <li>• research ethics</li> <li>• research publication</li> <li>• student admissions.</li> </ul>	Academic Board (or delegated sub-committee)
<b>Management</b>	<p>Documents which relate to how the University operationally manages its business and processes. The Vice-Chancellor and President may delegate approval authority to the Executive responsible for that portfolio, and specify whether sub-delegation is permitted.</p> <p>Examples include, but not limited to:</p> <ul style="list-style-type: none"> <li>• contracts and partnerships</li> <li>• human resource documents (relating to the enterprise agreement)</li> <li>• non-academic or honorary awards</li> <li>• occupational health and safety</li> <li>• scholarships and sponsorships</li> <li>• organisational frameworks (i.e. Policy Document Framework).</li> </ul>	Vice-Chancellor and President (or delegated Executive)

## Appendix 3: Policy approvals matrix

Amendment Type	Amendment Example	Approval	Outcome
<b>Major Amendment (including New / Expired)</b>	<ul style="list-style-type: none"> <li>• New or expired policy documents</li> <li>• Adding/removing information which changes the intent of the document</li> <li>• Amendments which are likely to have an impact (e.g. students, employees, compliance, costs)</li> <li>• Amendments which should be communicated (e.g. students, employees, stakeholders)</li> </ul>	Approval Authority <i>(after reviewed by the Advisory Committee and/or Consulting Committees)</i>	New approval, review and effective dates will be set.
<b>Administrator Amendment</b>	<ul style="list-style-type: none"> <li>• Updating document template</li> <li>• Rewording of the same information</li> <li>• Adding information on processes which have previously been approved, but were not included in this policy document</li> </ul>	Administrator	<p>Administrator Amendment - the document has been completely reviewed and only minor amendments required. New approval, review and effective dates will be set.</p> <p>Minor Administrator Amendment - the document has not been completely reviewed but minor amendments are required. New approval and effective date will be set, but the review date will remain the same.</p>
<b>No Change Review</b>	<ul style="list-style-type: none"> <li>• Review undertaken but no changes required</li> </ul>	Administrator	The Administrator reviews the document and approves no changes to be made. New approval, review and effective dates will be set.
<b>Editorial Amendment</b>	<ul style="list-style-type: none"> <li>• Updating hyperlinks</li> <li>• Formatting</li> <li>• Updating titles <i>(including position, Committee, Directorate, legislation etc)</i></li> </ul>	Policy Officer	<p>Document can be updated without requiring additional approval.</p> <p>The effective date will be amended and a note added in the amendment section within the document.</p>