

## UTS Governance Instruments Development and Review Procedures

### Abstract

The UTS Governance Instruments Development and Review Procedures outline approved practice for the development of new governance instruments and the amendment or review of existing governance instruments at UTS. These Procedures should be read in conjunction with the UTS Governance Instruments Policy.

Dates	<div>Procedures approved02/03/2015</div> <div>Procedures takes effect01/04/2015</div> <div>Procedures are due for review (up to five years)04/2019</div>
Approved by	Deputy Vice-Chancellor (Corporate Services)
Implementation Officer	Director, Governance Support Unit
Relevant to	All staff and all students engaged in the development or review of UTS Governance instruments
Related documents	<a href="#">Legal Compliance Register</a> (restricted access: Staff Connect) <a href="#">Records Management Vice-Chancellor's Directive</a> <a href="#">Risk Management Policy and Guidelines</a> <a href="#">Standing Delegations of Authority</a> <a href="#">UTS Governance Instruments Policy</a> UTS Rules: <ul style="list-style-type: none"> <li><a href="#">Changes to UTS Rules</a></li> <li><a href="#">General Rules</a></li> <li><a href="#">Student Rules</a></li> </ul> <a href="#">UTS Strategic Plan</a>
Legislation	<a href="#">University of Technology Sydney Act 1989 (NSW)</a> (UTS Act) <a href="#">University of Technology Sydney By-law 2005 (NSW)</a> (UTS By-law)
File number	UR15/362
Superseded documents	UTS Policy Framework: User guide

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## 1. Purpose

Guided by the principles in the UTS Governance Instruments Policy (the Policy), the UTS Governance Instruments Development and Review Procedures (the Procedures) provide a clear set of practices for the development of new governance instruments and the review, amendment or rescission of existing governance instruments at UTS.

## 2. Scope

These Procedures should be read in conjunction with the [UTS Governance Instruments Policy](#).

These Procedures apply to all staff, students, contractors, working groups and committees involved in the development, rescission, amendment and/or review of the following UTS governance instruments as defined in the [Policy](#):

- Policy
- Vice-Chancellor's directives
- Procedures (university-level)
- Codes of practice/charters.

These Procedures may also be used as a guide for the development, amendment and review of other local-level protocols, local procedures and guidelines outlined in the Policy.

These Procedures may be used as follows:

- sections 1–4, 5.4–5.6 and 6 of these Procedures apply to all users
- the individual procedural statements outlined in sections 5.1–5.3 provide different processes (for development, review, amendment, rescission and approvals) and may be referenced as required
- the provisions outlined in the Policy are applicable to all users of these Procedures.

The official [UTS Policy template](#) (Word) should be used for drafting, approving and publishing all policies, university-level procedures and directives.

Other governance templates may be used to facilitate the development or review of policy:

- the policy working group template (Appendix A)
- the communication plan for university-level documents (Appendix C).

### 3. Definitions

The following definitions apply for these Procedures. Other terms used in these Procedures are defined in section 3 of the [Policy](#) and [Schedule 1, Student Rules](#).

**Amendment** means a minor change to a governance instrument that does not modify the existing structure, or alter the intent of the instrument. These changes can include:

- referencing corrections (eg hyperlinks, external agency names, legislation, references to other governance instruments)
- organisational changes (eg to university positions, faculties or business units)
- changes to the roles listed in the document
- administrative changes or updates to reflect other official approvals (eg a change to the Rules)
- other minor changes of an administrative nature.

**Development** means the creation of a new governance instrument through a set of approved University procedures as outlined in this document.

**Policy contacts** mean UTS staff members who are assigned responsibility by a governance instrument's accountable officer and/or implementation officer, for activities connected with the development and review of that instrument. The overall responsibility for the governance instrument still lies with the accountable officer and implementation officer as outlined in the Policy.

**Policy Review Schedule** means the report maintained for and presented to bodies such as the Senior Executive Management (SEM), the Executive Committee of Academic Board (ECAB) or Academic Board outlining governance instruments that are due, and overdue for review. This Schedule is maintained and coordinated by the Governance Support Unit (GSU).

**Policy trackers** means the variety of governance and management tools maintained by GSU for tracking lifecycles of and issues relating to UTS governance instruments.

**Review** means the comprehensive analysis of a governance instrument to establish whether the instrument:

- is fit for purpose
- is relevant to the needs of its various stakeholders
- is articulated in a meaningful and useful manner
- complies with other internal governance instruments
- is consistent with the University's principles of good governance and its [Strategic Plan](#)
- complies with State and Commonwealth legislation (and is cross-referenced with the [Legal Compliance Register](#) (restricted access: Staff Connect)).

The need for review of an existing governance instrument may arise due to one of the three following reasons: scheduled or routine review, legislative change or development, and/or internal changes.

1. **Scheduled or routine reviews** means the review of an instrument at a date agreed upon approval. Each governance instrument contains a recommended review date, which is counted from the date of authorisation. The review date is set between one and five years and is reset following each official review period.

GSU will contact the relevant policy contacts (accountable officer and/or implementation officers) to seek timelines for upcoming reviews at the beginning of each calendar year.

Where the review is not scheduled or routine, and initiated for other reasons, it is important to contact GSU as soon as possible to ensure inclusion on the Policy Review Schedule.

2. **Legislative change or development** means a change in existing legislation or development of new legislation has an impact on a UTS governance instruments.

Each accountable officer and implementation officer is responsible for ensuring that governance instruments are compliant with the relevant legislation.

UTS Legal maintains the [Legal Compliance Register](#) (restricted access: Staff Connect) on behalf of the University, and should be contacted with regard to any concerns regarding legislation or compliance.

3. **Internal changes** means a change in UTS Rules, organisational structure, management instruments, governance structure or other relevant internal shifts that may also impact the University's governance instruments.

Implementation officers are responsible for ensuring that governance instruments are compliant with UTS organisational structures and for alerting GSU of any required changes.

**Single authoritative version** means the electronic copy of the approved version of the UTS governance instrument published on the UTS website and managed by GSU.

**Subject matter experts** are UTS staff members with particular skills and experience in a particular field or area covered by a governance instrument. These staff members act in a consultative or advisory capacity to the accountable and implementation officers or policy contacts.

#### 4. Procedural principles

##### Good governance principles

The UTS good governance principles outlined in the Policy are applicable to the development, review, amendment, implementation and management of the UTS governance instruments described in these Procedures.

##### Collaboration and consultation principle

The development and review of governance instruments should be a collaborative and consultative process.

### **Governance instrument relationship principles**

All governance instruments must clearly articulate their relationship with any relevant UTS Rules, Standing Delegations of Authority or other governance instruments, as outlined in the Policy.

### **Compliance principles**

All governance instruments must be compliant and consistent with relevant State and Commonwealth legislation.

Where issues of compliance with existing legislation or Rules are identified, alert GSU, who can provide guidance and assistance on next steps.

### **Development and review principles**

GSU is able to provide advice and guidance to responsible officers, implementation officers or policy contacts at all stages of the process.

GSU should be advised as soon as possible should a governance instrument be identified as requiring review or amendment.

Section 6 of these Procedures (and of the Policy) outlines the roles, responsibilities and further specific expectations of individuals.

## **5. Procedural statements**

These Procedures provide guidance on:

- the expectations, requirements and process for the development of new governance instruments (section 5.1)
- the process for the review and amendment of existing governance instruments and for rescinding existing governance instruments (section 5.2).

The relevant governance instruments for which these Procedures are applicable are listed in section 2 (Scope). The processes are also reproduced as flow charts in Appendix D.

### **5.1 Governance instrument development procedures**

This section outlines the procedures and processes for the development of new policies, Vice-Chancellor's directives, codes and procedures. The title 'policy' is used interchangeably for these instruments.

#### **5.1.1 Identify and confirm the policy gap**

Normally, a policy gap is identified through:

- the need for a University statement on an issue
- the need for support and guidance on a particular issue
- strategic priority, or
- in response to legislative change or development.

A UTS staff member or appointed working group (where relevant) should confirm the existence and nature of the policy gap through the following steps.

1. **Background analysis:** Undertake a brief background analysis of existing UTS governance instruments (Rules, policies, Standing Delegations of Authority) and how/whether they address the gap.

2. **Consultation:** the identified policy gap should be flagged with a supervisor and/or other authority (such as a committee) in the first instance. The relevant subject matter experts should be consulted in order to confirm the identified gap.
3. **Contact GSU:** GSU advise whether the policy gap has previously been identified and whether any other development activities are underway.
4. **Contact UTS Legal:** UTS Legal will confirm that the instrument complies with the relevant State and Federal legislation, and to confirm that relevant legislation is referenced in UTS governance instruments. Current hyperlinks should be provided for any referenced legislation.

There are two possible outcomes of the policy gap assessment process:

1. There is no policy gap — the issue is already covered by an existing UTS governance instrument.
2. The policy gap is confirmed — continue to section 5.1.2 (Research and analysis).

### 5.1.2 Research and analysis

Research and analysis should be undertaken to support the development of a new governance instrument and:

- can be undertaken by an individual or a working group
- can be supported by a unit, faculty, or committee
- will provide the content for the approval coversheet that will accompany the draft document during the approval stage.

When commencing research and analysis phase it is important that GSU is contacted so that any development work can be added to GSU's policy trackers and work programs, which act as a central repository for all governance instrument activity underway across the University.

If a policy working group is required, refer to the working group template (Appendix A) for guidance on establishing a policy working group.

A summary or report of the research and analysis phase should include the following information:

- a. **rationale** for the development of the governance instrument. This rationale will formalise and document the work already undertaken under section 5.1.1.
- b. **a review of relevant legislation and/or standards.** Check for information on the Legal Compliance Register (see [section 5.8](#) on compliance in the [Policy](#)).
- c. **a list of related documents:** any legislation, UTS Rules, Delegations, policies, directives, procedures, etc., that overlap with, but do not fill the identified gap.
- d. **a short benchmarking analysis** of national and international leading practice examples of existing instruments or guidance on the subject.
- e. **a cost-benefit analysis**, where relevant or required.
- f. **strategic relevance:** how this proposed new instrument will link with the [UTS Strategic Plan and objectives](#).
- g. **stakeholder consultation feedback** or subject matter expert input, particularly where there is no working group.
- h. **a risk analysis** that identifies the academic and organisational risks mitigated by filling the policy gap. The UTS [Risk Management Policy and Guidelines](#) may be used to complete this activity.

Following the research and analysis phase, GSU should be provided with information on the nature and development of the governance instrument for inclusion on any relevant policy tracking documents.

At this stage, GSU can also provide feedback on the proposed plan and advice on the most appropriate form of the instrument, ie whether it should be a policy, directive, procedure or something else.

Contact with GSU can be made at any point during the process if it is considered helpful to the implementation officer.

### **5.1.3 Project planning**

The outcomes of the research and analysis phase will inform the basis of a project plan to develop a new governance instrument. This phase will normally have identified the type of governance instrument required. Where there is still ambiguity, GSU can be contacted for further advice. For further clarification on each of the available governance instruments at UTS, refer to [section 3 \(Definitions\)](#) of the [Policy](#).

Where it is decided that a policy working group is required to draft the governance instrument, refer to the working group template (Appendix A) for guidance on establishing a working group. This should not exclude consultation with necessary subject matter experts and key stakeholders.

If a governance instrument is being drafted by an individual staff member ensure that key stakeholders are consulted early in the drafting process. It might be useful to consider these individuals as 'members' of a working group, even where one has not been formally established.

In addition to the information provided by the research and analysis, a timeline for completion of the draft instrument and the proposed approval pathway should be included in the project plan. The timeline may shift throughout the development process, but it is useful to help keep the development work on track.

### **5.1.4 Draft governance instrument document development**

With a project plan to guide the development process, a draft governance instrument should be developed. Governance instruments should:

- be written in a clear and concise manner
- be drafted in a logical order and from the perspective of the reader
- include input from relevant stakeholders and subject matter experts
- not presume any prior or associated understanding by the potential audience
- avoid repetition, either internally, or with other existing governance instruments
- avoid compromising existing instruments within the University's governance instruments or organisational and committee structures
- use existing definitions where possible, rather than inserting duplicate definitions (contact GSU for more information)
- be drafted on the [UTS Policy template](#) (Word).

The draft governance instrument and project plan should be provided to GSU as part of the consultation process and for a consistency check. This normally requires a two-week period to complete.

Once the draft is finalised, GSU can facilitate in advising on an approval process, further details of which are outlined in section 5.3 below.



## 5.2 Policy review and amendment procedures

It is essential that UTS governance instruments remain up-to-date, relevant, fit for purpose and strategically consistent.

This section provides procedural guidance for accountable officers, implementation officers and/or policy contacts who wish to undertake a review or an amendment of existing governance instrument.

### 5.2.1 Initiating a review or amendment

The need for review of an existing governance instrument may arise from a scheduled or routine review, legislative change or development or internal changes. These are defined in section 3.

Where it is decided that a policy working group is required to conduct the review process, refer to the working group template (Appendix A) for guidance on establishing a working group. This should not exclude consultation with necessary subject matter experts and key stakeholders.

If a review is being undertaken by an individual staff member, ensure that key stakeholders are consulted as part of the review process.

GSU can provide advice and feedback on consultation and/or the approval process as necessary, and will provide the policy contact officer with the single authoritative version of the relevant governance instrument.

The following steps may be useful to guide in the initial review of the instrument:

- a. **Consistent with UTS governance instruments:** Undertake an analysis of existing governance instruments to ensure that the instrument to be reviewed is consistent with internal policy and procedures, and cross-references UTS governance instruments as appropriate. Consider whether the instrument to be reviewed could be linked more effectively to other governance instruments.
- b. **Complies with legislation:** Check [Legal Compliance Register](#) (restricted access: Staff Connect) for relevant legislation. If in doubt, liaise with UTS Legal to ensure that the instrument complies with the relevant State and Federal legislation, and to ensure that relevant legislation is referenced (with hyperlinks) in the instrument.
- c. **Hyperlinks are current:** Ensure that all links are active and the referenced information is current.
- d. **Stakeholder engagement:** Engage with stakeholders to ensure that the instrument remains relevant and useful to them, practically and strategically.

This initial research will provide the necessary content for the approval coversheet that should accompany the reviewed instrument during the approval process.

Normally, there are four possible outcomes following the analysis of the existing instrument:

- a. the instrument requires a full review, rewrite and/or consolidation with other governance instruments (new or existing) — continue to section 5.2.2.
- b. the instrument requires a few minor amendments, but the substance of the document is still current — continue to section 5.2.3.
- c. no further review is required — the instrument is current and requires no changes — continue to section 5.2.4.
- d. the instrument is redundant and should be rescinded — continue to section 5.2.5.



### 5.2.2 Full review or rewrite

Where a full review or rewrite is required, GSU should be contacted in order to update the Policy Review Schedule. GSU can also assist in developing an appropriate consultation strategy and timeline where necessary.

Full reviews or rewrites of instruments can be conducted by either an individual staff member (with appropriate consultation) or a working group. See the working group template (Appendix A) for guidance on establishing a working group.

When undertaking a full review or rewrite, it is useful to consider the following:

- Is it best to incorporate or consolidate the instrument under review with another policy or governance instrument?
- Can the necessary changes be made in the existing instrument format, or is a rescission and a rewrite required?
- Who shall lead, and/or be administratively responsible for the review?
- What is the projected timeline for the review process?
- Identification of the main stakeholders who need to be consulted as part of the review process.

For a **full review** of an existing instrument, a series of document versions with tracked changes that outline the progress and nature of the changes proposed can facilitate the process. Ideally, these should be maintained by one person. The steps outlined in section 5.1.3 may also help in undertaking this review process.

For a **rewrite**, a new governance instrument can be developed following the steps outlined in section 5.1.3. The reviewer or working group will need to request a rescission of the existing governance instrument as part of the approval process. GSU can provide advice and guidance on the approval process if required.

### 5.2.3 Amendments

In some cases, a governance instrument may require only a few amendments in order to ensure continued relevance.

An amendment can be proposed by an individual, unit, faculty, or committee (forming a working group to propose an amendment is not normally required).

Amendments should be undertaken as follows:

- Proposed amendments should be made to the single authoritative version of the governance instrument (available upon request from GSU) with all proposed changes tracked.
- This marked-up document should be submitted to GSU along with a brief rationale for the proposed amendments.
- GSU will provide feedback on the proposed amendments, and advise on the next steps for consultation or approval as well as a timeline to publication.
- Approval may be via a number of methods, depending on the nature of the amendment and the approval authority of the document (via an approval authority outlined in section 3 of the [Policy](#), Delegation 3.17, or a member of the Senior Executive).

Amendments may also be required from time-to-time in order to ensure the instrument's currency. This can happen outside a more formal review process as a result of a change to corresponding governance instrument, committee or organisational structure.

Where the need for an amendment is identified, GSU should be contacted in the first instance and will provide guidance on the next steps.

#### **5.2.4 No changes are required**

Where a governance instrument has been identified as current and not requiring any changes, the following information should be provided to GSU:

- an outline of the nature and results of the initial review including the information on the initial research undertaken under section 5.2.1
- a statement supporting the currency of the current instrument by the accountable officer.

GSU includes the above details in an annual report to the Senior Executive, the Executive Committee of Academic Board and Academic Board (as part of the Policy Review Schedule report).

This information will also be put forward to the appropriate approval authority for sign-off and to reset the 'review date'.

#### **5.2.5 Rescissions**

Following an initial review (section 5.2.1), it may be agreed that a governance instrument is no longer relevant and therefore, a rescission is required. There are normally three reasons for requiring a rescission:

- a. the existing governance instrument may require replacement by a new instrument through a full rewrite (see section 5.2.2)
- b. the issue/area covered in the instrument may be covered elsewhere (eg in another governance instrument) making the existing instrument redundant, or
- c. the area covered is no longer of concern or relevance and a governance instrument on the topic is not required.

All rescissions must be submitted for consideration by the approval authority of the governance instrument.

Where a rescission is required under 5.2.5(a) above, the request for rescission should be included as part of the approval request for the revised or rewritten governance instrument (see section 5.2.2). For more information, contact GSU.

Where a rescission is required under 5.2.5(b) or (c) above, a request for rescission should:

- be made stating the reasons for the rescission
- outline the review process that led to the decision
- where (if relevant) the information contained within the governance instrument is now covered, and
- any other information that may facilitate the approving body or individual in making their decision.

This report should be made on the appropriate coversheet, available on the [UTS Policy site](#).

### **5.3 Approval process**

The approval processes for each new, reviewed, amended or rescinded governance instrument will vary, depending on the level and nature of the instrument, its history, and the consultation undertaken during the development or review process.

Although GSU are consulted during the development/review processes, the final draft version of the instrument(s) must be submitted to GSU as part of the final consultation process. When providing feedback on these instrument(s), GSU will work with the policy contact, accountable officer and/or implementation officer to finalise a formal approval process and timeline, as well as a publication timeline.

All policies, Vice-Chancellor's directives and other cross-University instruments under the scope of the [Policy](#) must be reviewed by the Senior Executive (SEM) before proceeding to the formal approval stage. This submission should be made on the official SEM template (available from GSU).

An approval coversheet will also need to be drafted using the:

- official template for Council or Academic Board (the policies coversheet or academic policies coversheet, respectively), or their committees where necessary, or
- in the submission template for the attention of the Vice-Chancellor (the directives coversheet).

These coversheets are available on the [UTS Policy site](#). GSU can provide guidance on the contents of these coversheets upon request.

Potential approval processes and final approval authorities are outlined in the potential approval pathways for governance instruments (Appendix B), though each governance instrument is different and will require an individual approval process.

Where policies and Vice-Chancellor's directives have associated or supporting (university-level) procedural documents, it is useful for these to be considered along with the policy or directive by the relevant approval authority (Council, Academic Board or the Vice-Chancellor) in order to provide an operational context or greater assurance of the proposed implementation methods. It is recognised however that this may not be possible in all instances.

University-level procedures are normally approved by the appropriate member of the Senior Executive after the approval of the associated policy or Vice-Chancellor's directive.

Following final approval of the review or amendment, one of the following steps should occur, depending on the final method of approval:

- a. for instruments approved by Council or Academic Board, the relevant Committee Officer will confirm the approval via email. This should include the resolution number and the final approved word version of the document, or
- b. for directives, the Vice-Chancellor's Office will confirm the approval to the accountable officer via email. This should include the scanned signed coversheet, followed by the original signed copy in the internal post. The scanned signed coversheet and final approved document (in Microsoft Word format) should then be sent by the accountable or implementation officer to GSU to start the publication process, or
- c. for university-level procedures, the relevant Deputy Vice-Chancellor's (or Vice-Chancellor's, or Provost's) office will confirm the approval via email. This should include the scanned signed coversheet, followed by the original signed copy in the internal post. The scanned signed coversheet and final approved document (in Microsoft Word format) should then be sent by the accountable or implementation officer to GSU to start the publication process.

## **5.4 File management and recordkeeping**

File management and recordkeeping is an important part of the governance instrument development and review process. Each governance instrument must have a series of official files.

[Local Record contacts](#) will create official files upon request.

An official file must be maintained covering each of the following activities:

- governance instrument development and review
- approvals and final versions of governance instruments
- implementation and operational activities.

### **5.4.1 Development and review records**

For the development and review of governance instruments all significant records must be captured and stored on an official UTS file. These records may include any research or consultation undertaken, significant draft governance instruments, working party papers, relevant correspondence relating to the review process etc. This is the responsibility of the implementation officer.

### **5.4.2 Approvals and final version records**

All records related to the approval of the governance instrument (signed approval coversheets and correspondence) including a copy of the final, published version of the governance instrument must also be captured and stored on an official UTS file. This is the responsibility of the implementation officer.

### **5.4.3 Implementation and operational activity records**

A governance instrument may have a number of implementation and operational activities to record and manage after approval.

An official University file is also used to capture records related to the implementation and ongoing operation of the governance instrument such as communication to staff, training, advice and records that provide evidence of policy compliance.

This is the responsibility of the implementation officer but may be formally assigned to a relevant member of staff involved in operations.

For more detailed procedures on the management of official files, see [University Records — Procedures](#).

### **5.4.4 Destruction of governance instrument files**

Official University files for old or rescinded policy instruments may not be destroyed. Any request for file destruction should be made to the University Secretary via the University Records Office.

For information on the destruction of files, refer to the [Records Management Vice-Chancellor's Directive](#).

## **5.5 Dissemination, communication, education and implementation**

To coordinate the initial dissemination and communication process, following formal approval of the governance instrument, GSU will:

- work with the web administrator to ensure publication by the agreed timeline
- liaise with the policy contact, implementation officer and/or responsible officer as appropriate to notify them of publication

- include a note in the Staff Notices regarding publication of the governance instrument.

The implementation officer should, when publication has been finalised, communicate with the relevant stakeholders via email as part of a cascade communication process. (See communication plan (Appendix C).)

Where necessary, the implementation officer may require that training, awareness programs or other communication tools be employed to ensure University-wide understanding of the governance instrument. The implementation officer may appoint a nominee to undertake this work on their behalf, however the responsibility remains with the implementation officer.

The accountable officer of each governance instrument should ensure usage and compliance.

## **6. Roles and responsibilities**

This section outlines the key positions responsible for managing and implementing the Governance Instruments Development and Review Procedures. These statements are consistent with the [Governance Instruments Policy](#) and the [Standing Delegations of Authority](#).

### **Accountable Officer**

The Director, Governance Support Unit is accountable for enforcing these Procedures, ensuring that they are observed in the development and approval of governance instruments, and for the progressive review of existing instruments.

### **Implementation Officer**

The Senior Advisor Governance and Policy (SAGP), GSU is responsible for the implementation of these Procedures, initiating any review process for the Procedures and acts as the primary point of contact for:

- advising on implementation of their provisions
- establishing and maintaining the official file
- proposing amendments as required, and
- managing the consultation process when the Procedures are due for review.

The SAGP is also responsible for:

- maintaining the policy trackers and the Policy Review Schedule
- advising on the processes for approval, review and/or amendment of governance instruments as well as providing feedback on content
- confirming review timelines of existing governance instruments with accountable officers, implementation officers and/or nominated policy contacts and as aligned with the Policy Review Schedule
- ensuring that the Policy Review Schedule is reported to SEM, Executive Committee of Academic Board (ECAB) and Academic Board at least once per calendar year
- ensuring that UTS Legal is provided with a copy of the Policy Review Schedule, following review by above bodies, so that the legal staff are aware of impending policy/directive reviews

- acting as a conduit for the approval process, officially alerting the GSU Web Administrator of the final approval process and timeline, and initiating the promulgation process through a series of communication steps
- managing and authorising the publication of governance instruments following the approval process
- notifying UTS Legal following the publication of new and reviewed governance instruments
- receiving feedback and fielding questions from staff on any issues identified with these Procedures or the processes described within. Contact can be made to the Senior Advisor, Governance and Policy in GSU at [policy@uts.edu.au](mailto:policy@uts.edu.au).

### **Other positions and committees**

**Governance Support Unit (GSU)** is the area responsible for coordinating policy management across the University. The Senior Advisor, Governance and Policy works within GSU.

**UTS Legal** is responsible for:

- reviewing the Policy Review Schedule providing feedback and insight to GSU on the prioritisation of governance instrument review from a legal perspective
- updating the Legal Compliance Register and relevant online compliance training modules as required
- ensuring that a mechanism is in place to alert GSU, accountable and implementation officers when the Legal Compliance Register has been amended.

## **8. Version control and change history**

<b>Effective date</b>	<b>Version</b>	<b>Approved by, resolution no. (date)</b>	<b>Amendment</b>
01/04/2015	1	Deputy Vice-Chancellor (Corporate Services) (02/03/2015)	Original procedures.

## **Appendix A. UTS policy working group template**

### **Guidelines for establishment**

A policy working group is a team of UTS staff members established to either develop a new governance instrument or review an existing governance instrument in line with the provisions outlined in the Governance Instruments Policy and the Governance Instruments Development and Review Procedures. This template facilitates the establishment of the working group.

The establishment of a working group may or may not be required in order to develop or review a governance instrument and are created at the discretion of the accountable officer, or the implementation officer or a member of the Senior Executive.

### ***Title***

Each policy working group should be given a title which articulates its intent (development or review) and its focus (area of interest, for example: Admissions Policy Development Group or Admissions Policy Review Group).

### ***Terms of reference***

Unit Managers, Directors, Deans, members of the Senior Executive, and/or Committees of Council or Academic Board (or the relevant Chairs), may sign off on the terms of reference.

### ***Membership***

Membership of working groups is agreed at the discretion of the approval authority. The membership table below provides a recommendation for membership.

### ***Notify Governance Support Unit (GSU)***

This information should be provided to the Senior Advisor, Governance and Policy (GSU) when available, and stored in the official University file (see section 5.4.1 on development and review records).

## **Template**

### ***Terms of reference for the [enter title] Group***

- The [group title] will undertake initial research in line with section 5.1.2 of the UTS Governance Instruments Development and Review Procedures (the Procedures), and/or
- The [group title] will undertake discussion and analysis in line with section 5.1.2 of the Procedures for consideration by the [enter the Terms of Reference (TOR) approval authority], and/or
- The [group title] will undertake a review of the [enter existing governance instrument] in line with section 5.2 of the Procedures for consideration by the [enter the TOR approval authority], and/or
- The [group title] will provide a draft version of the proposed/reviewed governance instrument in line with section 5.1.3 of the Procedures for consideration by the [enter the TOR approval authority], and/or
- The [group title] will provide a recommendation for further consultation and/or approval of the draft/reviewed governance instrument in line with section 5.3 of the Procedures.



**Membership**

<b>Chair</b> [with relevant expertise/knowledge]	[name]
<b>Approval authority representative</b> [where this is an individual rather than a committee, a nominee may be appointed]	[name]
<b>Administrative support</b>	[name]
<b>Academic representative(s)</b>	[name]
<b>Relevant unit representative</b>	[name]
<b>Student representative</b>	[name]
<b>Subject matter expert(s)</b>	[name(s)]

## Appendix B. Potential approval pathways for governance instruments

The Senior Advisor, Governance and Policy (SAGP) in Governance Support Unit (GSU) is responsible for recommending the appropriate approval pathway for university-level governance instruments. This will depend on:

- the nature of the instrument
- the type of governance instrument that has been drafted or reviewed
- the consultation process undertaken in the research, analysis and drafting stages
- the owner of the governance instrument (whether it is an individual or a committee, etc.).

The following provides a general outline of the approval pathways for new, reviewed or amended governance instruments. For definitions of each category, refer to section 3 of the UTS Governance Instruments Policy. All governance instruments should be submitted for the consideration of the Senior Executive (SEM) as part of the final consultation process, before proceeding to final approval.

Document category	Potential consultation steps *	Final approval authority
Policies (non-academic)	SEM, Council committees, Academic Board committees	Council
Policies (academic)	SEM, ADTLN, Council committees, Academic Board committees	Academic Board
Vice-Chancellor's directives	SEM, ADTLN, Council committees, Academic Board committees	Vice-Chancellor
Codes of conduct / codes of practice	SEM, Council committees, Academic Board committees	Council or Academic Board
Procedures	SEM, Council committees, Academic Board committees	Members of the Senior Executive (identified in the associated policy or directive)

\* Note: the potential consultation steps are not necessarily listed in chronological order.

## Appendix C. Communication plan for governance instruments

The Senior Advisor, Governance and Policy in Governance Support Unit (GSU) is responsible for the initial communication to the general University community (via UTS Staff Notices and the UTS Official Noticeboard) the availability of new or reviewed governance instruments published on the UTS policy webpage.

GSU will also communicate with the implementation officers/policy contacts as well as UTS Legal following publication.

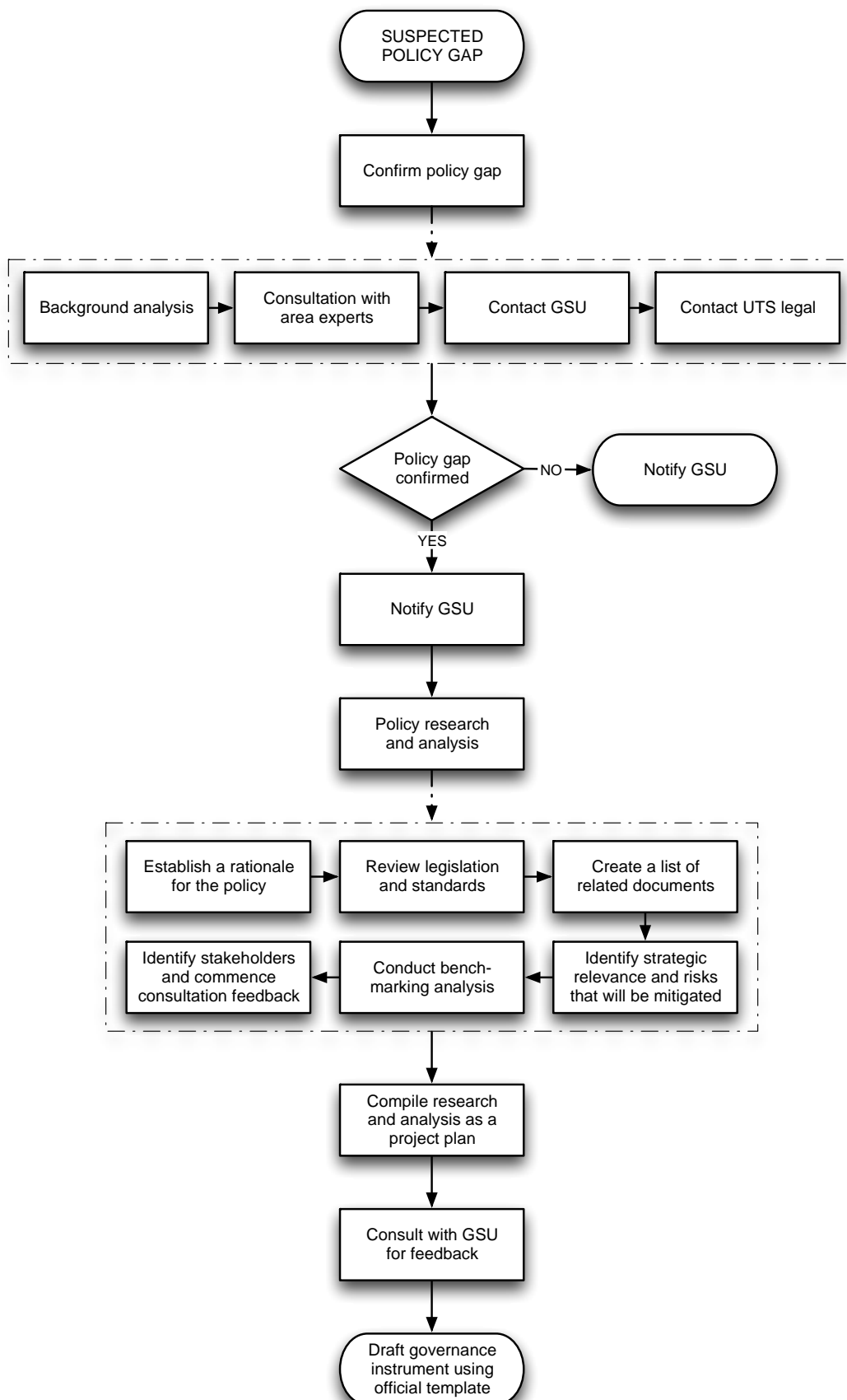
Implementation officers should communicate new or reviewed governance instruments with, for example, a targeted stakeholder email. The following provides a general outline of communication pathways for new, reviewed or amended governance instruments. It is expected that the relevant stakeholders will coordinate the relevant communication with their faculties or units.

Policy instrument	Stakeholders
Policies, directives, codes, procedures	<ul style="list-style-type: none"><li>• Deans and Executive Officers</li><li>• Relevant Associate Deans</li><li>• Responsible Academic Officers</li><li>• Faculty Managers</li><li>• Division Directors</li><li>• Implementation Officers (as in instrument)</li><li>• Senior Executive Team (DVCs)</li><li>• Responsible Officers (as in instrument)</li><li>• Named Officers (as in instrument)</li><li>• President, Students' Association</li><li>• Policy contact</li></ul>

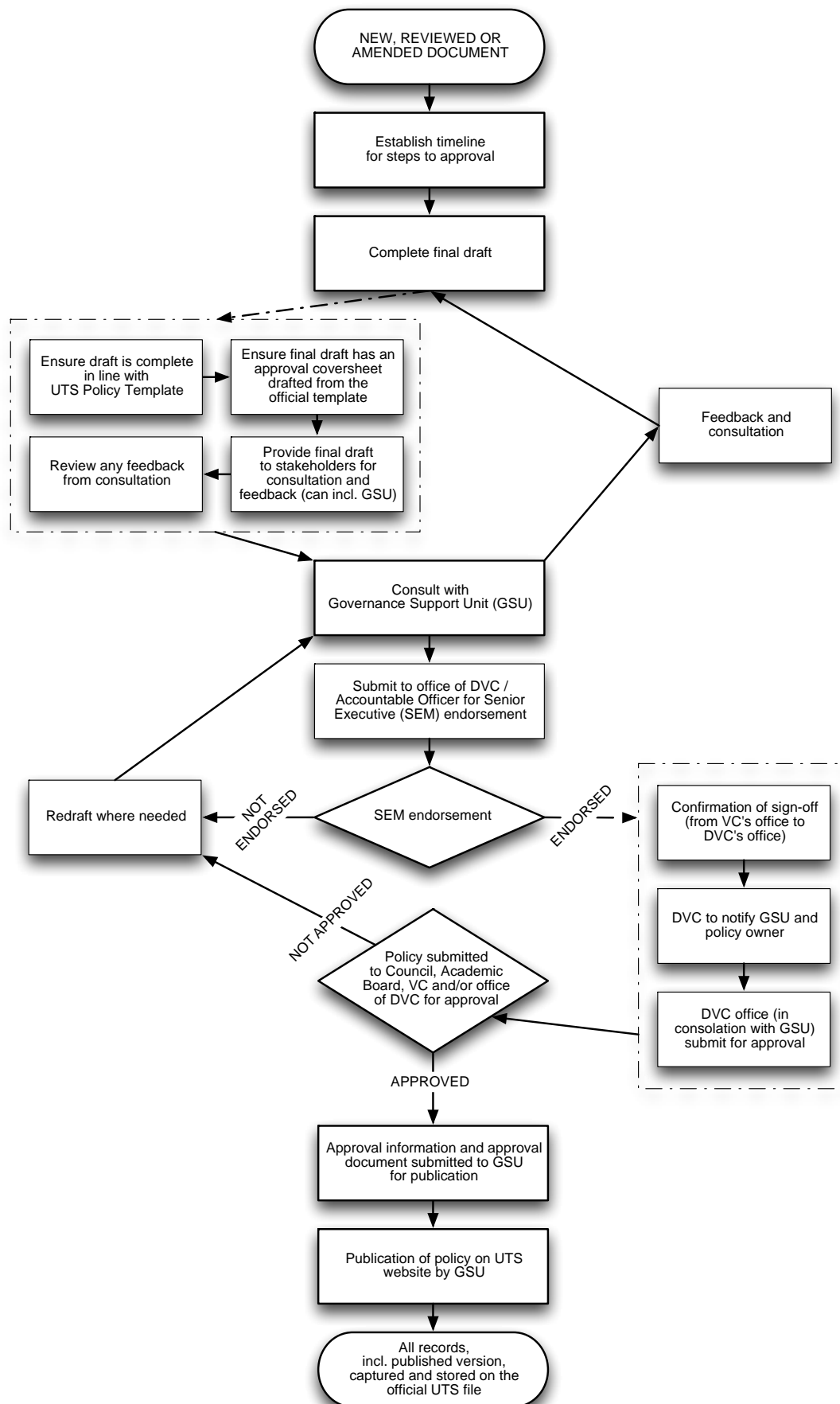
## Appendix D. Governance instrument procedure flow charts

In the following flow charts, 'policy' refers to all categories of governance instruments.

**Flow chart 1. Developing a governance instrument**



**Flow chart 2. Approving a governance instrument**



**Flow chart 3. Amending a governance instrument**

