Relevant Definitions:

In the context of this document:

**AB** means Academic Board

**Contact Officer** means the position responsible for the day to day implementation and review of a Governance and Operational document.

**Operational Document** means such documents as the University Strategic Plan or the Learning and Teaching Plan which guide how and in which direction the University wishes to operate.

**Governance Document** means a document that outlines non-discretionary governing principles and intentions, in order to guide University practice. Governance documents are a formal statement of intent that mandate principles or standards that apply to the University’s governance or operations or to the practice and conduct of its staff and students.

**Senior Executive** means a staff member holding the position of Vice-Chancellor (VC), the Deputy Vice-Chancellor (DVC), Pro Vice-Chancellor (PVC), or Executive Director.

**Senior Manager** means a staff member holding the position of Directors or Heads of Schools and Institutes within the University.

**Sponsor** means the position which has overarching responsibility for the Governance document and is usually a Senior Executive.

**TRIM** means the University corporate records repository.

**VCAG** means Vice-Chancellor’s Advisory Group
Overview

Charles Darwin University operates in an ever-changing environment. To do this, it requires a robust Governance Document Management Framework to support the pursuit of its objectives.

The framework:

- Provides a sensible, transparent and co-ordinated approach to the creation of by-laws, policies, procedures and other documents, seeing them through the development and review life cycle;
- Ensures that Governance documentation supports the University community in complying with relevant legislation and aligns itself with the University’s governing documents and the University’s Strategic Plan;
- Allows the University community access to the documents that affect them;
- Optimises the number of University-wide Governance documents to the minimum necessary for sound business practice;
- Delivers consistency, standardisation and predictability throughout the University, of Governance documentation and ensures only current versions are accessible;
- Supports quality assurance and continuous improvement; and
- Assists in the gap analysis of the University’s overall policy portfolio.

The Governance Document Management Framework provides the rules and tools by which Governance documents are developed, documented, approved, promulgated, controlled and reviewed.

Plans (such as the University Strategic Plan) are not included in the context of this framework as these are considered to be operational documents rather than Governance documents, though it is important to recognise that one of the primary purposes of Governance documentation is to give effect to such plans. Legislation, Acts and regulations of the Australian Commonwealth and Northern Territory Governments apply as a matter of course to the University and case law may also be used to determine University Governance documents.

Policy Levels

University-wide Governance Documents — these include by-laws, rules, policies, procedures and guidelines. They are kept in a centralised document repository maintained by Governance – the Governance Document Library. The words “by-laws”, “policy”, “procedures” and “guidelines” are reserved for University-wide documents. This document refers to these types of Governance documents.

Faculty and Administrative Services Division (ASD) documents — these apply to a specific faculty, ID or ASD and may vary from one faculty or ASD to another. Faculty and ASD documents are meant to add specificity to University-wide Governance documents or address issues that only concern the faculty or ASD. They must not contradict or conflict with University-wide Governance documents. These will usually be referred to as work instructions.

University-wide Governance Documentation

Different ‘types’ of Governance documentation clarify the notions of importance and enforceability of the document and are classified in one of five categories:
The Charles Darwin University Act (the Act) 2003

The Charles Darwin University Act grants Council wide powers to appoint staff, manage and control University affairs and property, and manage and control finances to promote the University’s interests. Charles Darwin University is governed by a 15 member Council. Council is led by the Chancellor and Deputy Chancellor, elected by the Council. The Vice-Chancellor is the University’s Chief Executive Officer and is responsible to the Council for the overall management of the University.
The Charles Darwin University Act 2003 gives the Council of the University the power to make by-laws (section 46), and rules (section 47) for the institution; including the imposition of penalties for contravention or failure to comply with them.

By-Laws and Rules

Only the University Council can approve by-laws; though where a by-law has academic implications, Council will seek advice from the Academic Board. By-Laws and changes to them must be submitted to the Minister for Education for approval through the Northern Territory Parliament and current versions can be accessed on the Northern Territory Government website.

Rules of the University relate directly to a by-law and may define or clarify it further. Draft documents for rules of the University are sent first to the Nominations, Honorary Awards and Legislative Committee for discussion and approval and then for final approval to the Council.

By-laws and rules are permanent in nature though subject to periodic review. Compliance is mandatory and non-compliance may be actionable through appropriate conduct policy documents.

Policies

A policy is a concise formal statement that outlines non-discretionary governing principles and intentions, in order to guide University-wide practice. Policies are a formal statement of intent that mandate principles or standards that apply to the University’s governance or operations or to the practice and conduct of its staff and students. Those principles are derived from and shaped by: the law and regulations that govern the University; national standards and community expectations; and the values and mission the University articulates in its strategic plan.

In short, policy provides members of the University with the approved way of operating in relation to a particular matter.

It is the role of Policy to:

- Translate values into operations;
- Ensure compliance with legal and statutory responsibilities;
- Guide the University towards the achievement of its strategic plan;
- Provide a framework for action;
- Set standards; and
- Improve the management of risk.

Corporate policies are approved by the Vice-Chancellor upon recommendation by VCAG. Academic policies are approved by Council through the recommendations considered by Academic Board from either the Learning and Teaching Committee or the Research and Research Training Committee. Where a need has been identified and requires a policy, these may be recommended through the relevant Senior Executive.

Policies are intended to be long term in application. They are reviewed every 3 years - less frequently than procedures or guidelines.
Procedures

Procedures set out, often in a step-by-step fashion, the University’s requirements for a particular course or mode of action. Procedures clearly define how a policy will be implemented and by whom. They are updated more often than by-laws, rules or policies - reviewed every 2 years - as operational systems change in line with the University’s requirements.

Procedures often elaborate on, and give effect to, a by-law, policy or the Charles Darwin University and Union Enterprise Agreement and define the area in which policy is operative. Compliance with procedures is mandatory and non-compliance may be actionable through appropriate conduct policy documents.

Procedures necessarily require approval by the Vice-Chancellor; approval is usually through either the designated committee (VCAG) or Academic Board (AB) and relevant Senior Executive.

Guidelines

Guidelines set out the University’s requirement for, or prescription of, best or safest practice. They are interpretive statements and as with policies and procedures they need to be forwarded to Governance for approval from either the Vice-Chancellor and VCAG or the Council through AB. Similar to procedures, guidelines are updated more often than by-laws or policies. Reviews of Guideline documents should be conducted every 2 years.

Work Instructions

Work Instructions are an internal document developed and implemented by a particular school, branch, department or unit to standardise and recommend work practices or processes that are used within their area.

Work Instructions are developed and amended as needed by members of that area under recommendation of the relevant Senior Manager. As an internal use only document, they do not need the approval of either VCAG or AB. The relevant Senior Executive should be made aware of the document and its content prior to release within the area.

A Work Instruction cannot not contradict or conflict with any University Governance documents, by-laws or government legislation.

Policy Documentation Life Cycle

There are nine steps in the Governance documentation life cycle
- Identification
- Evaluation
- Development
- Consultation
- Quality Control and Records Management
- Approval
- Implementation
- Promulgation
- Review

Identification

Identifying the purpose for which a Governance document is needed is a crucial step. A well-defined, clearly stated problem defines the issue and demonstrates an understanding of the desired outcome. Problem definition can be difficult. To facilitate this, the following question should be asked:
- Why is the Governance document needed, and what does it aim to achieve?
Evaluation

Existing relevant Governance documents should be examined to judge whether they cover the issue that has been identified. It may be that amendment to an existing governance document will cover the issue without a need to add to the overall Governance documentation portfolio. Consider the following:

- To which area/s of the University would the Governance document apply?
- Who should write it?
- Who are the key stakeholders? and
- Has feedback been sought about the document from interested parties regarding what works well and what does not?

Thorough investigation must be done as to whether the proposed document impacts upon, or conflicts with, relevant legislation or other Governance documents.

A draft document should be written and circulated for consultation, taking into account all of the above criteria. Prior to commencing drafting a new document, the document must be discussed with the Governance branch within the University to determine if a similar document is already being developed and who the key stakeholders across the University community may be.

Development

A Governance document is developed by its Contact Officer in consultation with Governance and key stakeholders and submitted for approval through the relevant Senior Manager, Senior Executive and Governance. All relevant Commonwealth and Northern Territory legislation must be consulted and reflected in the document.

If amending a document currently in use, the most current version must be requested from Governance. Once the changes have been made to an existing Governance document using the ‘track changes’ function in Microsoft Word, the document should then be resubmitted to Governance.

Governance will check over the document and if necessary, further consultation may be required. Governance in agreement with the Contact Officer will then submit the documentation to the relevant Senior Executive for submission to the appropriate approval authority.

Also available from Governance are tools to help with the development of documents including, templates for documents and coversheet templates for the submission of documents to the appropriate approval authority that must accompany the draft document when it is submitted to either VCAG or Academic Board.

Consultation

Broad consultation shall be undertaken to ensure that Governance documentation is as accurate as possible and reflects best practice. The consultation process is driven by the Contact Officer with an overview by the Governance Branch (on behalf of the Vice-Chancellor) who ensure that adequate and inclusive consultation has taken place. Consultation should include: developing, implementing, those affected by, etc. Conflicting perspectives can assist in identifying areas most affected by implementation across a variety of University contexts.

Quality Control and Records Management
Any Governance document must be submitted to the Governance Branch to be checked for standardisation and compliance with the University Style Guides before being forwarded to the relevant approval authority.

The quality control step is the responsibility of the Governance Branch and is part of the function of the Vice-Chancellor’s Office. To maintain standardisation across the University and version control, all University-wide documents will be kept in the Governance Documentation Library which is maintained by the Records and Archives Branch in TRIM. The most current version will be available through the Governance web pages on the official University website and fed directly from TRIM. As documents can and do often have amendments made, the online version of any document on the Governance web pages will be considered as the only current version. Any links to documentation on the Governance web pages should not be to the actual document but rather to the page where the document is maintained.

Draft documents are checked for compliance with the relevant templates to ensure that the format meets the quality requirements of the University prior to draft documents being submitted for approval.

Quality Control is designed to improve the rigor of policy documentation; ensure that documents are compliant with legislation; robust enough to ensure acceptance by the University community and, where necessary, enforceable. It is also part of a process designed to add value by ensuring the documents are identifiable; maintaining a ‘look and feel’ in terms of branding, language, style and formatting.

Where a document is developed as a direct result of Commonwealth or Northern Territory Government legislation, a compliance check is made to ensure that it accurately reflects practices in the legislation (e.g. the Privacy Act 1988, the Racial Discrimination Act 1975 etc.).

NOTE: If at any time you consider a document displayed on the Governance web pages to be inaccurate or outdated, please contact either the document Contact Officer or Governance directly.

Quality control is implemented through the use of templates, ‘How to...’ documents and style guides. These resources have been created and are available on the Governance web pages. These documents will assist with the creation, review and submission for approval of Governance documentation. The Governance Policy Officers are also available for consultation, advice and assistance at any time.

Records Management

Information is a vital corporate resource. The implementation of best practice corporate records management will support University Business in many ways, and is significant for a number of reasons. The University is committed to accurate corporate records management and this is achieved through the Records and Archives branch who advocate compliance with Government legislated retention and disposal schedules and manage the corporate repository for all governance and operational documentation.

Good records management:
- Improves the conduct of business in an orderly, efficient and accountable manner;
- Supports compliance with statutory obligations;
- Supports and documents policy and managerial decision-making;
- Protects the interests of the University and the rights of students, staff, and stakeholders;
- Maintains a corporate memory for the University; and
• Guarantees tangible savings in time and resources

Approval

When all parties believe the document is ready for submission for approval, the relevant Senior Executive then becomes the “Sponsor” for the proposed document. They will submit the document to Governance for inclusion in the agenda for the next VCAG or AB meeting as appropriate.

In the interests of efficiency, minor amendments to a document that do not affect its substance or intent, or do not substantially change the majority of the document, may be approved by Governance under authority delegated by the Council to the Vice-Chancellor (for example, a change of staff title or department title).

Where documents impact on learning and teaching and/or research, any major amendments must be approved first by either the Learning and Teaching Committee or the Research and Research Training Committee before being sent to the Academic Board.

This table lists the approval authorities of the University:

Table 1 Approval Authorities

<table>
<thead>
<tr>
<th>Approval Authority</th>
<th>Responsible for Authorisation of</th>
</tr>
</thead>
<tbody>
<tr>
<td>NT Government on the recommendation of Council</td>
<td>All by-laws.</td>
</tr>
<tr>
<td>Council on the recommendation of the Academic Board or the NHL Committee.</td>
<td>Academic matters and rules.</td>
</tr>
<tr>
<td>Vice-Chancellor on the recommendation of the Vice-Chancellor’s Advisory Group (VCAG)</td>
<td>All administrative and corporate matters.</td>
</tr>
<tr>
<td>University bodies (such as the IT Governance Committee, the University Health and Safety Group, the Research and Research Training Committee, the Learning and Teaching Committee etc.)</td>
<td>All procedures, guidelines and policy documents to the relevant Committee. These documents will, once approved, be further submitted to either VCAG or Academic Board by the relevant Senior Executive, dependent upon whether it is of a corporate or academic nature.</td>
</tr>
<tr>
<td>Governance</td>
<td>All documents during the drafting phase and prior to submission to either VCAG or Academic Board. Governance retains in its policy document library the approved, current version of any University document. Any minor amendments to a document which do not affect the substance or intent of the document such as Position/Title changes.</td>
</tr>
</tbody>
</table>
Once approval has been given, the **Governance Branch** has the responsibility to:

- Place the document into the Governance Document Library and upload on to the Governance pages of the official University website, thereby ensuring that the University community has read access to all of the current Governance documentation held by the University. The document will also be hyperlinked to other relevant documentation to aid navigation between documents.

- Notify the relevant stakeholders including the Contact Officer and Senior Executive that the document is available online so that department/faculty hyperlinks can be updated.

- Ensure the Governance document is clearly communicated to all stakeholders through the Document Review Schedule available on the Governance web pages and All-Staff email.

Once approval has been given, the **Senior Executive, Senior Manager** and **Contact Officer** have the responsibility to:

- Ensure all stakeholders who will be either directly or indirectly impacted by the Governance document are aware of its existence and the changes to work practices it may require.

- Ensure all stakeholders are aware of the document and are able to access and understand the document.

- Allocate resources to update, amend or create any Work Instructions which may be necessary to implement or support the document.

- Ensure all staff, students and authorised visitors within their area/s of responsibility comply with the Governance document.

**Review**

All Governance documents are subject to a process of periodic review to ensure that the information contained in the document is still correct, accurately reflects the practices of the University and ensures they remain compliant with Commonwealth and Northern Territory Government legislation and the University’s governing documents.

Prior to the review date, the Governance Branch notifies the Sponsor and/or Contact Officer that a document is due for review and the date that it is due to be reviewed by. A ‘Word’ copy of the document is sent to the Sponsor and/or Contact Officer so that no duplication of documents is extant.

Scheduled reviews are usually every 2 years for Procedures and Guidelines, and every 3 years for Policy documents. By-laws and Rules are reviewed as necessary.

Reviews of documents can also be carried out at any time if it becomes evident that the document requires amendment. Where a review is required that is not a scheduled review, a ‘Word’ version of the document should be requested through Governance.

Minor amendments can be requested through and made by Governance Policy Officers at anytime.

**Web Pages**

Governance documents are available on the Governance web pages of the University website, located in the Governance Document Library and are managed by the Governance Branch.

The website offers authorised users the ability to:

- Search and access all stored Governance documents;
• Access only the most up-to-date and accurate Governance documents;
• Identify Governance documents currently under review;
• Obtain information about Governance documentation development and review, including document templates and submission cover sheets for document authorisation purposes; and
• Obtain contact details for general enquiries in relation to Governance documentation.

**Governance Document Library**

The Governance Document Library holds the University’s official authoritative Governance documentation. The objective of providing a repository for Governance documentation is to provide a location for reliable, consolidated, duly authorised and up-to-date versions of current documents. The Governance Document Library is accessible on the Governance web pages or by contacting Governance directly.

**Sponsors and Contact Officers**

Governance documentation responsibilities are integrated into the normal line management structure of the University.

For by-laws, rules, policies, procedures and guidelines, the **sponsor** will normally be a member of the Senior Executive such as the Vice-Chancellor (VC), the Deputy Vice-Chancellor (DVC), Pro Vice-Chancellor (PVC), or Executive Director.

For all Governance Documents, the **Contact officer** will be the position/s within the University which are primarily responsible for the day to day implementation, compliance with, and review of, the document.

The role of the Contact Officer is to:

• Guide the document development or review process;
• Ensure the document is compatible with Commonwealth and Northern Territory Government legislation and the University’s governing documents;
• Ensure the document is set at the appropriate level for the compliance required;
• Ensure that the Governance document goes through the appropriate consultation process and is presented to the appropriate authority for approval;
• Ensure the Sponsor is briefed as appropriate on the development and progress of the document;
• Liaise with the Governance Branch to ensure the approved Governance document is quality checked, entered into the Governance Document Library, and posted onto the Governance web pages;
• Ensure that the Governance document or amended document is promulgated through appropriate channels; and
• Ensure the Governance document is reviewed on a regular basis.

**Document History and Version Control**
<table>
<thead>
<tr>
<th>Version</th>
<th>Date Approved</th>
<th>Approved by</th>
<th>Brief Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.00</td>
<td>06 Sep 2010</td>
<td>Vice-Chancellor</td>
<td>Creation of original document and posting onto CDU website.</td>
</tr>
<tr>
<td>2.00</td>
<td>03 Jan 2012</td>
<td>Governance</td>
<td>Review of document and updating of positions and committee titles according to new organisational chart.</td>
</tr>
</tbody>
</table>