

Compliance - Policy Development Framework Procedure

Section 1 - Summary

(1) The objectives of this Procedure are to:

- a. govern the development and review of policy and procedure to ensure they are up to date and compliant with relevant laws and obligations and aligned with University strategy; and,
- b. define the roles and responsibilities for the development, review and implementation of policy and procedure.

Section 2 - Scope

(2) This Procedure applies to all staff who work with and develop policy and procedure.

Section 3 - Policy/Regulation

(3) [Compliance Management Policy](#)

Section 4 - Procedures

Part A - Roles and Responsibilities

Role	Responsibilities
Academic Board	Approve Academic Policy and Procedure after considering any advice from appropriate sub-committees.
Accountable Officer	A senior leader accountable for content, compliance and organisational adherence to policy and procedure (Accountable Officers for policy will be a member of the Vice-Chancellor's Group (VCG)). Approves (or may delegate to the Responsible Officer) the release of policy or procedure for consultation. Approves: - Operational Procedures - Minor changes to policy or Academic procedure
Council	Approves governance policy and procedure (unless delegated to an appropriate sub-committee).
Vice-Chancellor	Approves operational policy, after considering any advice from the Vice-Chancellor's Group (VCG) or relevant governance committee.
Office of the General Counsel	Reviews policy or procedure upon request of the Accountable Officer.

Role	Responsibilities
Responsible Officer	<p>A senior leader responsible for the operational delivery of the function, who will normally have a direct reporting line to the Accountable Officer.</p> <p>Responsible for the development, review and maintenance of policy and procedure under direction of the Accountable Officer.</p> <p>Consults on draft policy or procedure.</p> <p>Leads implementation of policy and procedure, ensuring an Implementation Plan is developed, submitted with approval, and implemented post publication.</p>
Risk and Compliance	<p>Oversees the Policy Framework, advising and supporting Responsible & Accountable Officers in policy development and review.</p> <p>Coordinates global consultation and communicates approved policy and procedure to the University community.</p> <p>Processes requests for the removal or revocation of a policy or procedure.</p> <p>Reports to relevant governance committees where required in relation to the policy review process.</p> <p>Administers and maintains the VU Policy Library.</p> <p>Retains editorial control of VU policy and procedure.</p>
Chief Risk Officer	<p>Approves the waiving of consultation on policy where the impact of changes to university operations is not substantive.</p>

Part B - Policy Regulatory framework

(4) Policies form part of a regulatory framework for university operations comprising:

- a. the Victoria University Act 2010 (Vic)
- b. Governance, Academic and Student Affairs Statute 2013
- c. University Regulations
- d. policies
- e. procedures

(5) Clause 4 a-c are collectively known as 'University legislation'. The Office of the General Counsel is responsible for the coordination of University Statute and Regulations and for providing legal advice on university legislation.

(6) Clause 4 d-e are collectively known as 'University policy'. Risk and Compliance is responsible for the coordination of University Policy. Procedures are a subset of university policy.

(7) Any document in the University's regulatory framework must be consistent with, and not duplicate, documents at higher levels in the hierarchy. To the extent of any inconsistency, the higher-level document prevails.

(8) Any local work practices, guidelines or similar information maintained by a work unit must be consistent with relevant documents in the regulatory framework.

(9) VU policy and procedure will apply to students and staff at controlled entities of the University and in third-party delivery arrangements, unless otherwise specified. The [Third Party Arrangements Policy](#) provides further information regarding policy applicability for third-parties.

Part C - Policy Category

(10) Policy is classified under one of the following categories:

- a. Academic: means all matters pertaining to teaching and learning, programs and courses, student administration and support services, research and research training.
- b. Governance: means all matters of which the Council cannot delegate its power under the VU Act, or for which the Council has reserved for its own approval.
- c. Operational: means all matters that support the management and administration of the University which otherwise do not fall within the definition of academic or governance.

Part D - Review Cycle

(11) Policy and procedure are scheduled for review every three years from the date of approval (if not reviewed earlier). Risk and Compliance will advise Responsible Officers when a policy or procedure is due for review.

(12) As part of the policy review process, Risk and Compliance will provide an annual update on review status to the Academic Board, Audit and Risk Committee and VCG.

(13) VU policy and procedure is published using the standard [Policy Template](#) and [Procedure Template](#).

Part E - Consultation

(14) Consultation will differ in type and range depending on the nature of the policy and procedure; who they affect; their dependencies on other procedures and policies; and scope.

(15) Accountable and Responsible Officers are responsible for consulting draft policy and procedure with key stakeholders, including the Office of the General Counsel (where appropriate). Risk and Compliance will communicate draft policy and supporting procedures (if required) via the [Consultation Bulletin Board](#) or equivalent University-wide platform for a minimum period of 10 business days.

(16) Minor or administrative changes to policy do not require consultation.

(17) The Chief Risk Officer may approve the waiving of consultation requirements for policies where the impact of changes to university operations is not substantive.

Part F - Approval

(18) The category of the policy or procedure determines the approval pathway:

Category	Policy	Procedure
Academic	Academic Board, after considering any advice from appropriate sub-committees	Academic Board, after considering any advice from appropriate sub-committees
Operational	Vice-Chancellor, after considering any advice from the Vice-Chancellor's Group or relevant governance committee	Accountable Officer
Governance	Council (unless delegated to an appropriate sub-committee)	Council (unless delegated to an appropriate sub-committee)

(19) Accountable Officers coordinate approvals through Governance Committees.

(20) Minor changes to policy and procedure may be approved by the Accountable Officer and reported by Risk and Compliance through the normal reporting cycle (see clause 12).

(21) Administrative changes to policy or procedure do not require formal approval and can be advised directly to policy@vu.edu.au.

(22) An implementation Plan must be submitted with Policy and Procedure approval paperwork (other than administrative or minor changes). A single implementation Plan may be developed to cover a Policy Suite.

(23) The removal or revocation of a policy or procedure will be approved by the relevant approval authority. To make such a request, please email policy@vu.edu.au. A revocation undertaken to consolidate multiple procedures may be approved by an Accountable Officer.

Part G - Communication

(24) Risk and Compliance will:

- a. Advise the Accountable and Responsible Officer when the policy and procedure is approved;
- b. Publish the approved policy and procedure to the University Policy Library;
- c. Communicate newly published policy and procedure to the University community;
- d. Where required, consult with the Responsible Officer and Student Communications regarding the most appropriate method of communication with students.

(25) The Responsible Officer will communicate with key stakeholders.

Part H - Implementation

(26) Policies and procedures take effect from the date they are published in the University Policy Library, unless stated otherwise in the policy document.

(27) Responsible Officers will:

- a. Ensure steps are in place for the policy and procedure to be promoted, shared and available to all stakeholders.
- b. Identify potential implementation issues and develop associated contingency plans.
- c. Identify any support required to deliver the policy or procedure. This may include the development of or changes to existing systems, guidelines, training or information sessions, and online support.
- d. Ensure continued monitoring of the effectiveness of the policy or procedure, which may include checkpoints to monitor implementation success (e.g., changes in business processes or behaviours).

(28) The scope and level of detail of the Implementation Plan will be appropriate to the complexity and/or sensitivity of the policy document and its implementation.

Section 5 - HESF/ASQA/ESOS Alignment

(29) Higher Education Standards Framework: Standard 6.1 Corporate Governance; 6.2 Corporate Monitoring and Accountability; 6.3 Academic Governance; 7.3 Information Management.

(30) Outcome Standards for NVR Registered Training Organisations Instrument 2025: Standard 4.1, 4.2, 4.3, 4.4 and Compliance Standards for NVR Registered Training Organisations and FPP Requirements 2025: Standard 20 Compliance with Laws.

Section 6 - Definitions

(31) Administrative Change: a change that is editorial or typographical in nature and has minimal impact upon policy and procedure requirements; nor alters the rights or obligations of any person. It may include updates to URL's, grammar and formatting. It can be undertaken directly with Risk and Compliance.

(32) Minor Change: a change made that does not significantly affect the content, intent or application of the policy or procedure; or alter the rights or obligations of any person. It may include updates to position titles or names of organisational units as a result of organisational restructuring, or an adjustment required to align with University legislation.

(33) Policy: a statement of principles that establish the University's position on governance, academic or operational matters to guide and enable decision making. Policies are required to facilitate the effective, efficient and equitable administration of the University.

(34) Procedure: sets out the processes, practices or actions required to implement and comply with a policy. Each procedure must be linked to a University legislation or policy.

Status and Details

Status	Current
Effective Date	15th April 2025
Review Date	15th April 2028
Approval Authority	University Council
Approval Date	25th March 2025
Expiry Date	Not Applicable
Accountable Officer	Diana Ortisi Chief Financial Officer +61 3 9919 5210
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