

POLICY FRAMEWORK

Policy Code	GOV04
Policy Lead	Director Quality and Compliance
Approving Authority	Board of Directors
Approval date	28 June 2024
Commencement date	01 July 2024
Next Review Date	December 2026
Version	2024.1
Relevant legislation or external requirements	<p>Higher Education Standards Framework (Threshold Standards) 2021 HESFs: 6.1, 6.2, 6.3</p> <p>Education Services for Overseas Students Act 2000 (Cth) (ESOS Act) Tertiary Education Quality and Standards Agency Act 2011 (TEQSA Act)</p>
Related ASA Documents	<p>Governance Charter Quality Assurance Framework Delegations of Authority Policy and Procedure Delegations of Authority Register Benchmarking Policy</p>

1. Purpose

This Framework articulates the principles, standards and processes for the development, review, and removal of policy documentation at ASA Institute of Higher Education (**ASA**).

2. Scope

This Framework applies to all policy documentation, including frameworks, policies, procedures, plans, guidelines, and forms at ASA. This document applies to all staff, directors, officers, external appointees on any ASA board or committee, volunteers, and contractors.

3. Principles

Key principles informing this Framework include:

- Policy documentation sets out the minimum standards that will be maintained. Students and staff have the right to a safe and inclusive culture. Processes and expected conduct of all ASA members are set out in policy documentation. Where possible ASA will exceed the requirements of its own policy documents.
- ASA's policies and policy documentation are to be shaped by and comply with relevant legislation and regulations, national standards, and community expectations.
- ASA is committed to providing high-quality educational experiences and clear and consistent policy documentation is a core feature of ensuring that standards are set, maintained, and improved over time.
- ASA values students, staff, and its place in Australia's higher education sector. Stakeholder feedback and inclusion in consultation and improvement practices are essential.
- Updated or revised documents will be made available to stakeholders once approved to provide transparency in consultation and improvement practices, and ensure contemporary information is provided.
- Appropriate and understandable documentation sets clear expectations for all parties. ASA documents will, as far as practicable, be written in plain English and be structured in a logical manner. In some instances, it is not possible to communicate complex ideas or

processes with simple language. All parties are encouraged to seek further clarification as required.

- That strong quality assurance practices and processes will exceed regulatory compliance requirements.

4. Definitions

Term	Definition
approval date	The date the policy was approved by the appropriate authority.
Approving Authority	The governance body that has the authority or delegated authority (power) to approve the policy for publication and use.
archive	To store, out of common use but still able to be accessed as a record.
articulate	To express ideas clearly and effectively.
Chief Executive Officer (CEO) / Principal	The Chief Executive Officer is the highest organisational role for ASA and performs the role of Principal as well as their other duties.
delegate	A person who is chosen or elected to vote or act for others. OR Indicating another person to be responsible for a task, usually without transferring accountability.
draft	To prepare a preliminary version of (a document).
effective date	the date on which a new or revised policy will take effect.
major change	A change that critically alters: <ol style="list-style-type: none"> the requirements of stakeholders, reduces staff or student rights or ability to access services, has numerous or complex changes, changes the structure or focus of the document.
minor change	A change that may: <ol style="list-style-type: none"> change the length of time provided or required, add or remove requirements or steps, amend responsibilities of staff or students. These changes must not increase barriers or costs to students or be numerous or overly complex, as those would be classified as a major change.
overarching	When something is overarching, it affects or includes everything. Used figuratively, this adjective describes a quality that influences every single part of something.
policy documentation	Documents that govern how ASA operates on a specific matter. They include frameworks, policies, procedures, plans, guidelines, and forms.
Policy Lead	Policy leads are operational ASA staff who are responsible for: <ol style="list-style-type: none"> leading consultation activities with stakeholders to inform development and review; monitoring and evaluating the effectiveness of policies; and noting issues with policies and procedures raised by users or revealed by monitoring, for the next review.
policy suite	The policy suite is the entire connected series of documents that encompass frameworks, policies, procedures, plans, guidelines, and forms.
provider	For ASA, this means the Higher Education Provider, which can be a school, institute, or college. Universities and university colleges also provide higher education services but are not generally referred to as 'providers'.
quality assurance	The maintenance of a desired level of quality in a service or product. OR The statement asserting that quality has been checked and found to be maintained.
regulatory compliance requirement	A requirement that is mandatory for a company, and may result in a fine or penalty, including loss of registration or license if breached.
responsibility	The obligation to complete actions.

Term	Definition
review date	The date by which a policy is to have been reviewed and approved as part of the policy cycle. The review date is typically three (3) years from the effective date.
Senior Management team	<p>A group of senior operational staff who report to the CEO and have specific functional responsibilities within ASA.</p> <p>The Senior Management team consists of:</p> <ul style="list-style-type: none"> • Chief Executive Officer/Principal • Academic Dean • Director International Recruitment • Director Learning and Innovation • Director Quality and Compliance • Director Student Experience
stakeholder	A person with an interest or concern in something. A stakeholder may not have power, but they will be affected by changes in processes or requirements.

5. Hierarchy of policy documentation types

This Policy Framework establishes a hierarchy of policies and policy documentations as follows:

1. Framework / Charter
2. Policy
3. Procedures
4. Plan
5. Guidelines
6. Forms

Where two documents in the hierarchy are in conflict, the document higher in the hierarchy takes precedence.

5.1 A framework or charter

- an overarching document that indicates broad strategies and approaches for policy documents and other business documents such as Strategic Plan;
- guides decision making at the most senior level; and
- applies across ASA.

5.2 A policy:

- is a concise statement of principles and rules that outline ASA's approach or position on a range of matters;
- sets out what ASA expects of staff and students in undertaking activities at ASA, as well as what staff and students can expect from ASA, including roles and responsibilities;
- guides decision making;
- applies across ASA unless its scope section limits the scope;
- can set mandatory requirements for staff and students; and
- should avoid including process detail: this should go in supporting procedures.

5.3 A procedure:

- supports a policy by defining detailed processes, practices or actions required to implement and comply with some or all aspects of the policy;
- applies across ASA unless its scope section limits the scope;
- can set mandatory requirements for staff and students;
- may include links to useful information such as forms or templates; and

5.4 A plan:

- supports a policy and procedure by defining detailed processes, practices, or actions where these are too specific to be contained in a procedure.
- applies to specific circumstances or time periods.

5.5 A guideline:

- describes good practice and provides advice to staff or students in applying the requirements of a policy or procedure; and
- cannot set mandatory requirements.

5.6 A form:

- Enables the collection of information to facilitate a request or process; and
- is approved by the Policy Lead.

6. Document categories

The Policy Register lists all documents in the policy suite and the relevant details pertaining to that document.

All policy suite documents are assigned a category to indicate the audience and domain that is in scope for a given document. The category generally denotes the assigned approving authority, with some exceptions. Policy Suite categories have been aligned with Risk Management categories as part of a cohesive and integrated approach to risk management.

Table 1: Policy category alignment with Risk Management

Acronym	Policy Suite Category	Risk Register Alignment
GOV	Governance	Quality and Regulatory
OPS	Operational and Strategic	Operational and Strategic
BUS	Business Interruption	Business Interruption
FIN	Financial	Financial
ACA	Academic	Academic
HR	Human Resources	Human Resources
STU	Student	Student (Reputational & Political)

7. Policy Development and Review

As far as possible ASA will keep the number of policies to a minimum and ensure that document names are clear and indicate key topics of interest to enable appropriate reference. The *Policy Register* should be checked to ensure clarity of scope, function, and document name.

7.1 Development Triggers

Creation of a new policy or major change of an existing policy may be necessary for many reasons, including:

- Changes to legislation, legislative or regulatory requirements,
- Significant operational changes,
- Changes in the direction of ASA,
- Outcomes of reviews and audits,
- Substantial changes in practice across the tertiary sector; or
- Cyclical review occurring every 3 years or earlier.

7.2 Research and benchmarking

The Policy Lead, or delegate, will carry out research to identify leading practice in the activity across the higher education sector either before or alongside the consultation stage. This may include, but is not limited to:

- desktop reviews of any legislation, regulatory or legislative requirements, national guidelines, standards or codes for the activity;
- desktop reviews of other providers' equivalent policies and procedures and related professional literature;
- professional development or learning material, including sector or industry conferences or presentations; and
- interviews with managers of the activity at other institutions to understand these providers' policies for the activity and operational challenges in implementing them.

7.3 Consultation and implementation planning

The Policy Lead, or delegate, will consult across all organisational departments and core stakeholders to inform the development of a new policy, and to plan its implementation.

- For academic policies, the Academic Dean must be included in this process.
- For policies that will set requirements for students, at least one Student Representative Committee member should be consulted.

In preparation for implementation, policy leads should consider and plan the following:

- activities, training, timeline and resources necessary to enable policy users to implement the policy;
- communication activities to ensure policy users are aware of changed requirements and how to comply with them;
- communication activities to ensure all organisational departments are informed; and
- minor changes needed to be made to other policies or procedures as a result of this review.

7.4 Drafting

All policies and procedures must be developed on the relevant template. The policy review date and version number will be adjusted, according to the section 'Records and Information Management Policy and Procedure.'

The Policy Lead, or delegate, must draft policies and procedures in such a way that they:

- contain only the appropriate content;
- are clear, concise, and in a coherent order;

- are consistent with the style of the template;
- are in as plain English as will convey their content;
- any objectives stated should be measurable so the document's effectiveness can be monitored; and
- do not duplicate material in other policies or procedures, but cross-refer to these where readers need to be aware of them.

The Policy Lead should continue to consult core stakeholders during the drafting process, as needed.

Where the proposed changes will necessitate minor changes to another policy or procedure, the Policy Lead of the document under review must collaborate with the Policy Lead of the other documents to draft the consequential changes, which must be included in the approval submission.

7.5 Review of draft

The Policy Lead will present their draft to Senior Management, ideally two (2) months prior to the anticipated approval date of the policy. Senior Management will provide constructive feedback and consider the impact on other policy documentation.

The CEO may refer policies for legal advice, where they define the process, rights and entitlements for major administrative decisions that are likely to give rise to dispute.

The Academic Board and / or the Audit and Risk Committee will be provided an opportunity to note and comment on all policies impacting their Terms of Reference prior to presentation to the Board of Directors for approval.

8. Policy Approval

8.1 Approval

The Director Quality and Compliance will submit all policy documentation to the Approval Authority with an overview of proposed changes provided. For minor amendments, a document demonstrating tracked changes will be provided.

The Approving Authority and the relevant stakeholders are identified in the Policy Register. Table 1 below outlines the general delegated authority for policy documentation, however there are notable exceptions. For example, the *Course Discontinuation and Teach Out Policy and Procedure* is predominantly academic in nature but has business impacts that require higher approval than the Academic Board, who must not consider business interests in their decision making.

Table 2: Policy stakeholders and approving authorities.

Policy Category	Stakeholders	Approving Authority
Governance	Audit and Risk Committee Academic Board Standing Committees	Board of Directors
Operational and Strategic	Audit and Risk Committee Staff	Board of Directors
Business Interruption	Audit and Risk Committee Staff	Board of Directors
Financial	Audit and Risk Committee Students	Board of Directors
Academic	Students Staff Learning and Teaching Committee	Academic Board
Human Resources	Audit and Risk Committee Staff	Board of Directors
Student	Audit and Risk Committee Academic Board Students Staff	Board of Directors

8.2 Implementation and Dissemination

It is essential that relevant stakeholders are advised when an existing policy is revised or a new policy is developed. Once a policy document has been approved, the Director Quality and Compliance will provide authorised versions for distribution and facilitate the notification of all stakeholders of an updated version.

- It is critical that the current versions of all policies are easily accessible to all relevant stakeholders.
- Publicly available policies, procedures and forms are maintained on ASA's website.
- Internally accessible policies are located on a protected drive, with access limited to appropriate staff.
- All staff are able to access PDF copies of all policies on a general drive.

The Policy Lead is responsible for actioning the implementation and communication strategies. The Senior Management team assist all staff to identify, locate and understand policy documentation that is relevant to their roles. Staff induction processes also include policy suite familiarisation.

8.3 Consequential changes

Where possible, policy documentation will be reviewed and presented for consultation and approval in relevant stages. In this manner a consistent and clear approach can be taken with a strong understanding of additional impacts. For example, requests for approval to update the *Student Assessment Policy* must be accompanied by the *Student Assessment Procedure* and, as relevant, the *Student Assessment Appeal Policy* and the *Student Assessment Appeal Procedure*.

In some cases, certain policy documentation is required to be approved first and then cascading changes should be implemented in a secondary stage. For example, changes to the *Student Assessment Policy* may impact the *Student Academic Misconduct Policy* and it may be deemed necessary to clarify terms and expectations.

The Policy Lead, or delegate, will facilitate the relevant approvals of any consequential changes.

8.4 Monitoring and reporting

The Policy Lead, in consultation with the relevant approving body, will monitor the effectiveness of the policy documentation on an ongoing basis.

9. Policy Removal / Archiving

The Policy Lead must confer with Senior Management before seeking to rescind a policy document to ensure no impact is made on associated policies.

The same body that approved the policy documentation, or nearest appropriate equivalent body in the current organisational structure, is responsible for its rescission.

This approving body will determine when the rescission will be effective and the date for the policy to be archived with no updated version.

The *Policy Register* will retain the details of the rescinded policy document on an archive tab. The Policy code will be archived as well to avoid confusion. All policy suite documents will be retained as per the *Records and Information Policy and Procedure*.

10. Relevant HESFs

This document complies with Higher Education Standards Framework which specifies that:

Standard 6.1 Corporate Governance

[...]

3. The governing body attends to governance functions and processes diligently and effectively, including:
 - a. obtaining and using such information and advice, including independent advice and academic advice, as is necessary for informed and competent decision making and direction setting
 - b. defining roles and delegating authority as is necessary for effective governance, policy development and management; and monitoring the implementation of those delegations. [...]

Standard 6.2 Corporate Monitoring and Accountability

1. The provider is able to demonstrate, and the corporate governing body assures itself, that the provider is operating effectively and sustainably, including: [...]
 - f. mechanisms for competent academic governance and leadership of higher education provision and other academic activities have been implemented and these are operating according to an institutional academic governance policy framework and are effective in maintaining the quality of higher education offered. [...]

Standard 6.3 Academic Governance

1. Processes and structures are established and responsibilities are assigned that collectively:

[...]

 - d. provide competent advice to the corporate governing body and management on academic matters, including advice on academic outcomes, policies and practices.
2. Academic oversight assures the quality of teaching, learning, research and research training effectively, including by:
 - a. developing, monitoring and reviewing academic policies and their effectiveness

11. Version Control

This Framework has been reviewed and endorsed by the ASA Board of Directors as at December 2023 and is reviewed every 3 years.

The Framework is published and available on the ASA website
<https://www.asahe.edu.au/policies-and-forms/>.

Change and Version Control				
Version	Authored	Brief Description of the changes	Date Approved:	Effective Date:
2024.1	Quality and Policy Officer	Document formatting updated to reflect change of Trading Name to ASA Institute of Higher Education.	28/06/2024 by CEO	01/07/2024
2023.1	Director Quality and Compliance	Creation of document.	12/12/2023	18/12/2023