



POLICY MANAGEMENT PROCEDURES

(Replaces Procedure for the Development and Management of UOW Policy)

Date first approved: 14 April 2023	Date of effect: 1 May 2023	Date last amended: (refer to Version Control Table) 14 April 2023	Date of Next Review: 14 April 2028
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Responsible Division & Unit:	Governance and Policy Division		
Supporting documents, procedures & forms:	Policy Management Policy Local Protocol Management Procedures UOW Policy Template UOW Procedure Template Policy Implementation and Communication Plan Policy Toolkit No Change Memorandum Template Minor Amendment Memorandum Template Administrative Amendment Memorandum Template UOW Strategic Plan 2020-2025 Delegations of Authority Policy Records Management Policy Inclusive Language Guidelines		
Relevant Legislation & External Documents:	University of Wollongong Act, 1989 University of Wollongong By-Law 2005 State Records Act 1998		
Audience:	Public		



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1. Introduction and Purpose

1. The procedure provides instruction to UOW staff on the process to be used to develop, manage and review UOW policy documents.
2. This procedure supports, and should be read in conjunction with, the [Policy Management Policy](#).

2. Scope of Procedure

1. This procedure applies to all UOW staff who have responsibility for development and management of UOW policy documents.
2. This procedure does not apply to the development or management of Local Protocols. Users should refer to the Local Protocol Management Procedures.

3. Definitions

1. Please see [Policy Management Policy](#) for definitions.

4. Policy Document Structure

1. All UOW Policy Documents must meet the requirements specified in the [Policy Management Policy](#).
2. All UOW Policy Documents must be created or amended using the current UOW Policy Template.
3. Policy Documents must:
 - a. Be numbered sequentially (including headings and paragraphs)
 - b. Contain the UOW logo in the header.
 - c. Contain (in the footer) the document number, month and year of current approved version, the title of the document, and page number.

5. Procedure for the Development of New Policy Documents

1. When a topic/subject area/matter is not addressed in existing Policy Documents (“Policy Gap”), staff should contact the Governance and Policy Division for guidance.
2. The preference is to incorporate the policy gap into existing Policy Documents rather than create a new Policy Document.
 - a. If the Policy Gap can be incorporated into existing Policy Documents, the procedure for amendment must be followed.
 - b. If a new Policy Document is required, the procedure for the development of new Policy Documents must be followed.

Executive Sponsorship

3. Consult the Governance and Policy Division for advice regarding the appropriate type of Policy Document and the appropriate Executive Sponsor.
4. Complete the request form and submit to Governance and Policy Division.



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5. The Governance and Policy Division will submit the request for endorsement to the Executive Sponsor.
6. The Executive Sponsor must endorse the development of the new Policy Document(s) for work to commence.

Research, development and drafting

7. New Policy Documents should be developed in consultation with an appropriate range of stakeholders.
8. The range of stakeholders should reflect the scope, nature, complexity, and hierarchy level of the proposed Policy Document. This should reflect an appropriate diversity of gender, background and interest groups, and may include external subject matter experts. Advice about the engagement of stakeholders should be sought from the Governance and Policy Division.
9. Research should be undertaken to inform best practice. Where relevant, this may include:
 - a. Examination of existing policy coverage, and potential overlap/conflict with other Policy Documents
 - b. Reference to legislative frameworks
 - c. Sector benchmarking, including other sectors where relevant
 - d. Legal advice from the Office of General Counsel (if required)
10. Consideration must be given to risks, potential costs (such as costs of following procedures, system costs etc)
11. Communication and implementation planning must be undertaken at the developmental stage and should consider:
 - a. Challenges of implementation and how they can be addressed
 - b. Any training requirements
 - c. Strategies for communication

Governance and Policy Input

12. Policy Custodian must submit the draft documents to the Governance and Policy team for review
13. Any edits/feedback should be incorporated into the draft document for submission for feedback
14. The Executive Sponsor must endorse the draft documents prior to feedback

Seeking Feedback

15. The document will be available on the University website for feedback in accordance with the Policy Management Policy
16. Following the feedback period, the custodian will review all feedback provided and consider incorporating into the Policy Document

Approval

17. See Approval and Amendments section in this document



Communication and implementation

18. The new Policy Document will be communicated and implemented as stated in the communication and implementation plan

6. Review

1. It is the responsibility of the Policy Custodian to ensure that their Policy Documents are current, fit for purpose, and meet all the policy requirements.
2. Each Policy Document will have a review date set on development and revised at each subsequent scheduled review. As a minimum this should be every five years, but should be more frequent for documents that are high risk or highly influenced by dynamic circumstances (e.g. regulatory changes).
3. The date for the next review will only be re-set if the full review is completed (i.e. an administrative amendment does not constitute a review).
4. Policy Custodians will maintain a register of issues, feedback and opportunities to improve and develop each Policy Document.

Review Procedure

5. The Policy Custodian should contact the Governance and Policy Division to inform that the review is commencing, and to receive appropriate documents, templates and protocols.
6. Reviews should be managed by the Policy Custodian (or their delegate) and should be in consultation with an appropriate range of stakeholders. The composition and range of stakeholders should reflect the scope, nature, complexity, and hierarchy level of the Policy Document.
7. An initial appraisal should be undertaken to check for significant issues, including collating identified feedback already received (e.g. issues log and emails received).
8. Research should be undertaken to inform best practice. This may include:
 - a. Analysis of existing policy coverage, and potential overlap/conflict with other Policy Documents
 - b. Reference to legislative frameworks
 - c. Benchmarking with at other institution's policies: including other sectors where relevant
 - d. Broader research with specific reference to best practice
 - e. Legal advice from the Office of General Counsel (if relevant)
9. Draft any edits to the document (with track changes), ensuring the most current template is used.
10. The draft documents must be submitted to the Governance and Policy Division for proofing, checking for compliance and for quality control:
 - a. If no changes are recommended, a covering memo outlining the rationale must be attached
 - b. Any edits will be incorporated into the draft document prior to submission for feedback



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11. If major amendments are recommended, the executive sponsor must endorse the draft prior to feedback.

Seeking Feedback

12. All Policy Documents must be presented for feedback as per the Policy Management Policy.
13. The custodian should review all feedback provided and consider incorporating into the Policy Document.

Approval and Amendments

14. The document will be submitted for approval as required by the UOW Policy Management Policy.

7. Amendments and Approvals

1. Amendments can be made at any time, and should be made with consideration to risk, and as soon as possible following/pending changes in circumstances that necessitate amendments (e.g. changes to regulatory requirements). The UOW Risk Framework should guide assessment of risk and urgency.
2. Any amendments require approval by the delegated authority as per the Policy Management Policy and Delegations of Authority Policy.
3. To request amendments, the Policy Custodian must:
 - a. Prepare the amended document with track changes.
 - b. Submit to Governance and Policy Division for approval, along with any requested documents (such as background memo, communication plan).
4. The Governance and Policy Division is responsible for:
 - a. Assessing the category of the proposed amendments.
 - b. Managing the approval process, including the preparation of approval documentation and submission to the delegated authority.
 - c. Updating the policy directory on approval.
 - d. Notifying the custodian on approval.
5. On endorsement, the Policy Document will be published, and the implementation plan will commence.
6. The updated Policy Document shall take effect on the date stated in that document.

Roles & Responsibilities

1. Policy Documents (excluding Local Protocols) are managed by the Governance and Policy Division in conjunction with Policy Custodians.
2. The management of Local Protocols is the sole responsibility of the relevant local manager.
3. It is the responsibility of Units, Divisions, Faculties and Committees to identify those issues that require a new Policy Document or an amendment to a current Policy Document.



4. UOW Policy Documents are assigned a Policy Custodian. The Policy Custodian is responsible for:
 - a. Developing, writing and reviewing the Policy Document in consultation with all relevant stakeholders.
 - b. Reviewing and updating Policy Documents to comply with relevant legislation, as specified in the policy review schedule.
 - c. Consulting with the Governance and Policy Division when the need for a new Policy Document or an amendment to a current Policy Document has been identified.
 - d. Maintaining and updating an issues log for each Policy Document under their control.
 - e. Ensuring consistency between the Policy Document and any related policies, procedures, systems, codes, guidelines, rules, systems and processes.
 - f. Ensuring that the changes or responsibilities contained in new or amended Policy Documents are communicated with appropriate stakeholders.
5. The Governance and Policy Division is responsible for:
 - a. Providing timely and appropriate support and advice for the proposal, development, management and review schedules of UOW Policy Documents.
 - b. Liaising with the Policy Custodian to determine, advise and facilitate the appropriate approval pathway for a new or amended Policy Document.
 - c. Managing the style and format of UOW Policy Documents and ensuring consistency between the Policy Document and any related Policy Documents and legislation.
 - d. Ensuring document control and approval mechanisms are in place.
 - e. Maintaining the UOW Policy Directory.
 - f. Reporting policy matters to appropriate committees.
 - g. Ensuring that all previous and superseded versions of a Policy Document are correctly archived in line with the Records Management Policy.
6. The Executive Sponsor is responsible for:
 - a. Providing strategic oversight in the development of new Policy Documents
 - b. Sponsoring the development of new Policy Documents
7. The Delegated Approval Authority is responsible for:
 - a. Approving amendments to Policy Documents
 - b. Approving and new or rescinded Policy Documents



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Version Control and Change History

Version Control	Date Released	Approved by	Amendment
1	14 April 2023	University Council	New Procedure to replace Procedure for the Development and Management of UOW Policy