

Last Modified	August 2020
Review Date	May 2021
Approval Authority	General Counsel and Registrar
Contact Officer	Senior Policy and Compliance Advisor

Introduction

This policy provides a framework that sets out to define the following:

- The University's range of compliance documents (e.g., regulations, policies, procedures, frameworks);
- Identify the different levels compliance documents can be developed and issue;
- The scope and the application of compliance documents issued at the different levels;
- Identify roles and responsibilities of those involved in developing compliance documents.

Definitions

Compliance Document – a collective term that refers to any written statement that the University requires staff, students and visitors to comply with it.

Major review – revision of a UCPL compliance document which substantially alters the substance, management and/or intent of the document.

Minor review – revision of a UCPL compliance document which does not substantially impact the substance, management or intent of the document.

Other compliance documents – may be developed by departments, schools and different service areas but will not be accessible via the UCPL

Senior Leadership Team (SLT) – the University committee that advises the Vice-Chancellor on the strategic direction, management, and operation of the University.

Policy Statements

Overview

The University may issue a compliance document at varying levels of the organisational hierarchy. The scope of this varies between levels.

Compliance documents may be:

- Regulations
- Statutes
- Strategies
- Codes of Conduct or Practice
- Forms
- Frameworks
- Guidelines
- Instructions
- Plans
- Policies
- Principles
- Procedures
- Processes
- UC web pages

The need for a new compliance document may be driven by a number of factors, both external and internal, including but not limited to

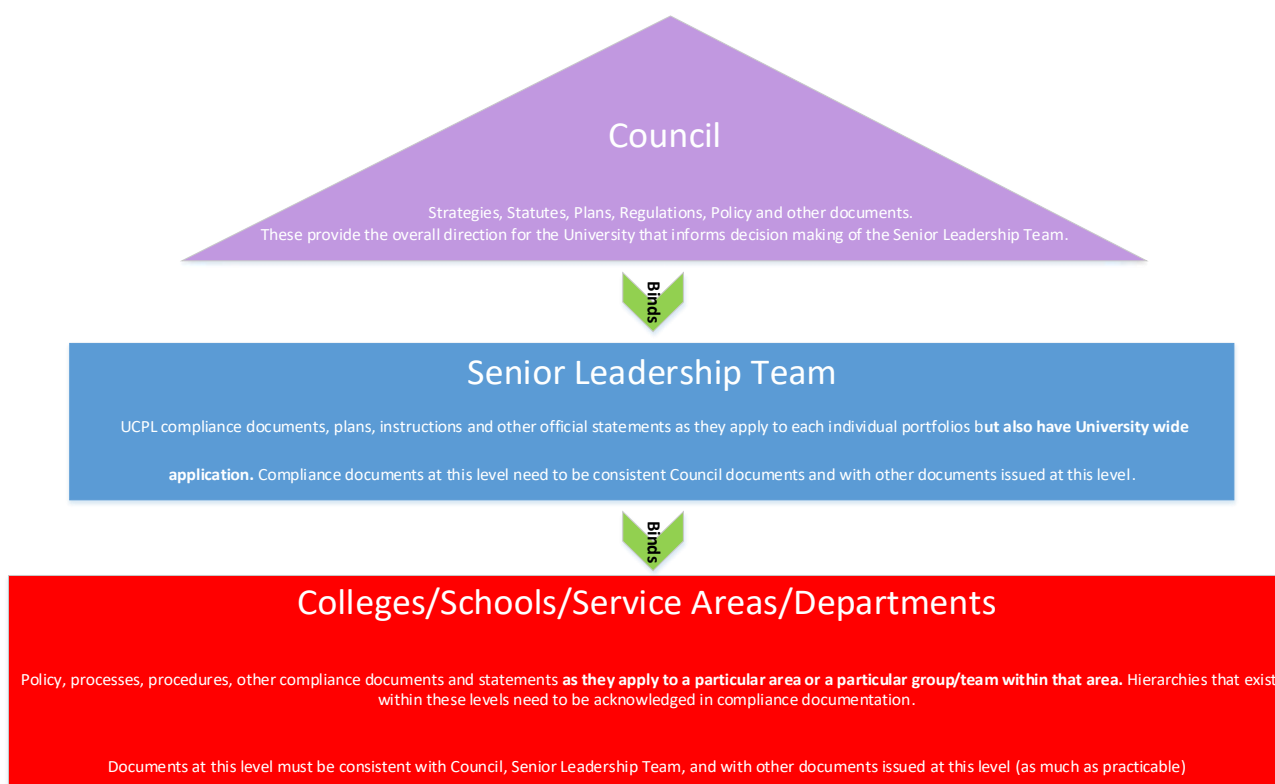
- new or changed government requirements,
- new or amended regulations,
- new strategic direction of the University,
- restructuring,
- identification of a gap in the current 'suite' of compliance documents either within the Policy Unit or the wider University community,
- emerging operational issues,
- identification of risks or inconsistencies in behaviour by staff and/or students,
- review or consolidation of older compliance documents,
- external pressures (such as from the media), and

- events.

A compliance document that has been issued under delegated authority is to be treated as an official University compliance directive. Non-compliance may result in disciplinary action being taken.

The below diagram illustrates the organisational hierarchy and how documents at one level affects those at the other levels. The hierarchy described below doesn't diminish the requirement of compliance but it can limit the scope and application of a compliance document.

Documents within each level must be consistent with others within the same level (as much as practicable) and consistent with any compliance documents issued from the level above. There may be instances where it is not practicable for this to be the case. In instances where inconsistency affects UCPL or other compliance documents, the Policy Unit needs to be made aware of these.



Council Documents

The Council of the University of Canterbury (“Council”) has governance functions, powers and responsibilities under the [Education and Training Act 2020](#). The Council develop and approve strategic documents which provide direction to the University and give effect to its legislative responsibilities, such as plans, statutes, and certain policies (some of which will be housed in the UCPL).

Most Council compliance documents are not administered by the Policy Unit (for example, regulations, strategies) nor do they form part of the UCPL engine room, however these will

generally be accessible via links to the relevant documents or via web pages on the UC web.

The review and development of most Council compliance documents will be subject to Council's own processes to meet legislative and regulatory requirements

Directives from Council are implemented by the Senior Leadership Team (SLT).

UC Policy Library Compliance Documents and UC Policy Library Webpages

a) Strategic Direction of the UC Policy Library

The strategic direction of the UCPL is to encourage and enforce a culture of compliance at the operational level of the University by:

- Developing and providing access to “fit for purpose” compliance documents approved by SLT members;
- Clearly connecting the UCPL to wider governance and management objectives;
- Assisting to ensure that UCPL compliance documents align with strategic goals of the wider University and individual areas, and that their compliance value is appropriately communicated and reflected in other measures needed to embed policy requirements throughout operating procedures.

b) Status of UC Policy Library Compliance Documents

UCPL compliance documents can be issued by Council or a member of SLT and are held separately to other compliance documents by virtue of having what is commonly described as University-wide application. Documents at this level reflect **significant operational and/or strategic value to University operations as a whole** and will usually disseminate key regulatory or legislative compliance requirements. This is the distinguishing characteristic from common or shared operational and administrative procedures or processes that may be issued by an SLT member, such as how to make a BEIMS Request, or using a system like Fraedom to approve the use of a P-Card.

The University has specific obligations with regards to policies which deal with academic matters. Academic Board (and its subcommittees, as appropriate) must always be consulted where academic compliance documents are developed for the UCPL and/or reviewed.

Compliance documents that are held in the UCPL engine room are subject to a centralised and systematic development and review process administered by the Policy Unit. Due to their significance, these documents go through a centralised developed and review process, these are approved at an institutional level.

Only the version published on the UCPL can be treated as current and definitive. As the UCPL houses the current and up to date versions of UCPL compliance documents, when referencing UCPL compliance documents on other webpages or in other compliance documents, hyperlinks must be inserted linking to the electronic version of the document on the UCPL.

Compliance with UCPL compliance documents is expected from all staff, students and visitors.

c) UC Policy Library web pages

The webpages of the UCPL will also house instructions, alerts, drafting standards and other guidance documents issued by the Policy Unit.

The UCPL is not the sole repository for all official University compliance documents. In some instances, compliance documents may achieve a higher level of compliance by being accessed on different platforms other than the UCPL.

There are many example of this. Documents pertaining to Human Resources and Health and Safety may be found in the [HR Toolkit \(Human Resources intranet\) \(Staff Only\)](#) and the [Health & Safety Toolkit \(Health & Safety intranet\) \(Staff only\)](#) respectively. Departmental compliance documents may be held by the relevant college/school/department/service area.

d) UC Policy Library Engine Room

This is the control centre for policy documents and their administration and is administered by the Policy Unit. It houses all UCPL compliance documents in both draft and published forms. It also holds documents that have been rescinded from the UCPL.

All metadata, reviews and history for each UCPL compliance document are controlled from the UCPL engine room.

The UC Policy Library has been developed in accordance with the [Public Records Act 2005 \(New Zealand Legislation website\)](#), the [NZ Universities' General Disposal Authority \(University Information Records Management website\)](#), and Archives NZ's suggested best practice for document retention and storage.

College/School/Department/Service Unit document

These may be issued by those who hold delegated authority to do so.

Compliance documents held at the departmental/school or college level are meant to add specificity to University-wide compliance documents or address issues that only concern the department/school/college/service area, but may also be common or shared operational or administrative procedures or processes such as making a BEIMS Request or using Freedom to approve the use of a P-Card.

Compliance documents at this level do not follow the same process that UCPL documents follow as these do not have the same status as UCPL documents and do not require the same level of scrutiny as they are focused on the particular activities, requirements or administration of a particular area.

The responsibility for ensuring these are updated in accordance with UCPL documents or other compliance documents lies with the relevant delegated authority.

These should use the [other compliance document](#) disclaimer where appropriate. For example, where a policy is being developed.

Compliance documents drafted at this level should at a minimum,

- Identify an administrator and contact role for the document for any queries and updates,
- Be reviewed and updated in a robust and systematic way,
- Use the other compliance document disclaimer,
- Be consistent with current compliance documents issued by Council or the UCPL,
- Identify and comply with relevant legislative or regulatory, best practice standards or other relevant external compliance sources
- Records keep of earlier versions and have these stored appropriately.

The Policy Unit recommends that any compliance documents drafted at this level are provided to the Policy Unit for feedback before publishing or promulgation to check their consistency with relevant UCPL documents and Council Compliance documents, and for general drafting advice.

Drafting, development and review of these documents are encouraged to emulate the centralised processes as much as possible.

Disclaimers as status identifiers

- a) The disclaimer used on **UCPL documents** to identify its status is

“This document is the property of the University of Canterbury. It has been approved at an institutional level by the relevant authority in accordance with the [Metapolicy](#). Once printed this document is considered an uncontrolled version. For the official, current version refer to the UC Policy Library”

When a UCPL compliance document goes over its scheduled review date, or the document is undergoing an unscheduled review, the document continues in force until it is updated.

- b) Documents at the college/school/department/service area level may look similar in to UCPL documents or closely follow the format, tempo and style of UCPL documents. Any compliance document at this level should be published as a webpage on the UC web, or on the intranet if it relates to staff.

The key identifier of **other compliance documents** is that they use the following disclaimer:

“This information is subject to University statute, regulation and other documents that have been approved at an institutional level. Once printed the information in the document is considered an uncontrolled version. For any queries, please contact the contact named on the policy, or your department/school’s administrator.”

Responsibilities and Functions

Responsibilities and functions for the drafting and development of compliance documents reflect the hierarchical structure of the University.

In order for compliance documents to remain current, and consequently for risk to the University to be minimised, the following roles and responsibilities exist for the following areas of compliance documents.

1. Council

Council provide the overall governance of the University and are responsible for determining the policies in relation to the management of its affairs ([S 280 \(d\) Education and Training Act 1989 \(New Zealand Legislation website\)](#)).

Council also have the authority under [S 284 Education and Training Act 2020 \(New Zealand Legislation website\)](#) to issue statutes that cover a range of activities including good governance and discipline. Council may delegate this authority in accordance with [S 285](#) and [S 286 Education and Training Act 2020 \(New Zealand Legislation website\)](#).

2. Senior Leadership Team

The ability to create institution-wide compliance documents (UCPL documents) for their areas of responsibility, has been delegated to SLT (see [UC Delegations Schedule \(University Governance website\)](#) to approve compliance documents within their areas of responsibility on behalf of the University.

The SLT members manage the relevant steps of the review and development processes for UCPL documents within their respective portfolios and ensuring compliance with processes, instructions and guidance issued by the Policy Unit.

SLT members are designated policy approvers and are known as Approval Authorities. Each Approval Authority has the delegated authority to approve

- The development of a new compliance document,
- A major review of an existing compliance document, and/or
- Amendments to an existing compliance document content that changes its original intent.

The Approval Authority generally does not conduct the review of a document. This is completed by the Contact Officer. If the Contact Officer identifies major amendments to the document (i.e., a significant proportion of the wording needs to be changed and/or the

intention of whole or part of the document has changed), then the Approval Authority will need to review those changes and approve them.

In the event of a disagreement between an Approval Authority and the Policy Unit the matter will be referred to the University Registrar for a ruling.

Approval Authorities must take new or substantially revised compliance documents awaiting approval to Senior Leadership Team (SLT), for consultation and general visibility.

Where breaches of compliance documents occur the Approval Authority must be informed

3. Policy Unit

The Policy Unit has overarching responsibility for the strategic direction, standardisation, promulgation and efficacy of compliance documents held in the UCPL engine room and assisting other areas of the University to develop other compliance documents that are consistent with them. The Policy Unit maintains the online policy repository; the UC Policy Library.

In order for the University to minimise risk, the Policy Unit must undertake stringent quality assurance on all UCPL documents and provide feedback on other compliance documents.

The Policy Unit's responsibilities include

- Support, guidance and direction in the development and review of compliance documents developed at Senior Leadership, College and Department levels;
- Quality assurance of all UCPL documents;
- Regular needs and gap analysis of UCPL documents and the UC Policy Library;
- The development and provision of templates, guidelines and style guides;
- The development of 'How to...' documents to assist Contact Officers and Approval Authorities and other document administrators with their roles;
- Helping ensure the currency of information;
- Publication of updates about new and revised compliance documents and UC Policy webpages (the Policy Unit will do this and draw attention to these pages using Intercom) and its existence widely promulgated to interested and affected parties;
- Making and approving minor changes in the UCPL (largely style/grammatical) on behalf of the Approval Authorities; and
- Ensuring the compliance documents meet the requirements of the [Public Records Act 2005 \(New Zealand Legislation website\)](#) and the [NZ Universities' General Disposal Authority \(University Information and Records Management website\)](#).

The Policy Unit can approve minor changes to UCPL documents without needing to consult the Approval Authority. However, if there is any uncertainty as to whether a change is minor, the Policy Unit will refer this to the Approval Authority for a determination.

If there is any disagreement between the Policy Unit and a Contact Officer or Approval Authority, the matter will be referred to the Registrar.

4. Contact Officers

A Contact Officer is the person responsible for carrying out scheduled reviews of a compliance document, or for making amendments to the compliance document when it requires an amendment that is not part of the Policy Unit's responsibility.

The Contact Officer will be the person within the University with the best working knowledge of the document's content, and will be best placed to answer any questions with regard to the interpretation of the document or its implementation.

Leading the consultation process also forms a part of the Contact Officer's responsibilities, as they are the person with the greatest understanding of the document's content and are best placed to identify who will be affected by any changes. What is required for consultation will be dependent on the document in question. Several rounds of consultation may be necessary if a document changes significantly over the course of development and quality assurance (normally four weeks of consultation would be sufficient).

Consultation is an excellent way to obtain visibility, support Te Tiriti o Waitangi principles (particularly partnership) and allow the wider University community to contribute to the development of compliance documents so ensuring quality consultation is important. While parties to the consultation process may not always agree on the final result, their input is valuable in crafting and refining the document.

The Contact Officer is responsible for educating stakeholders and the wider University on policy changes and new policies (the Contact Officer should do this using Intercom email or other means of university wide advertising).

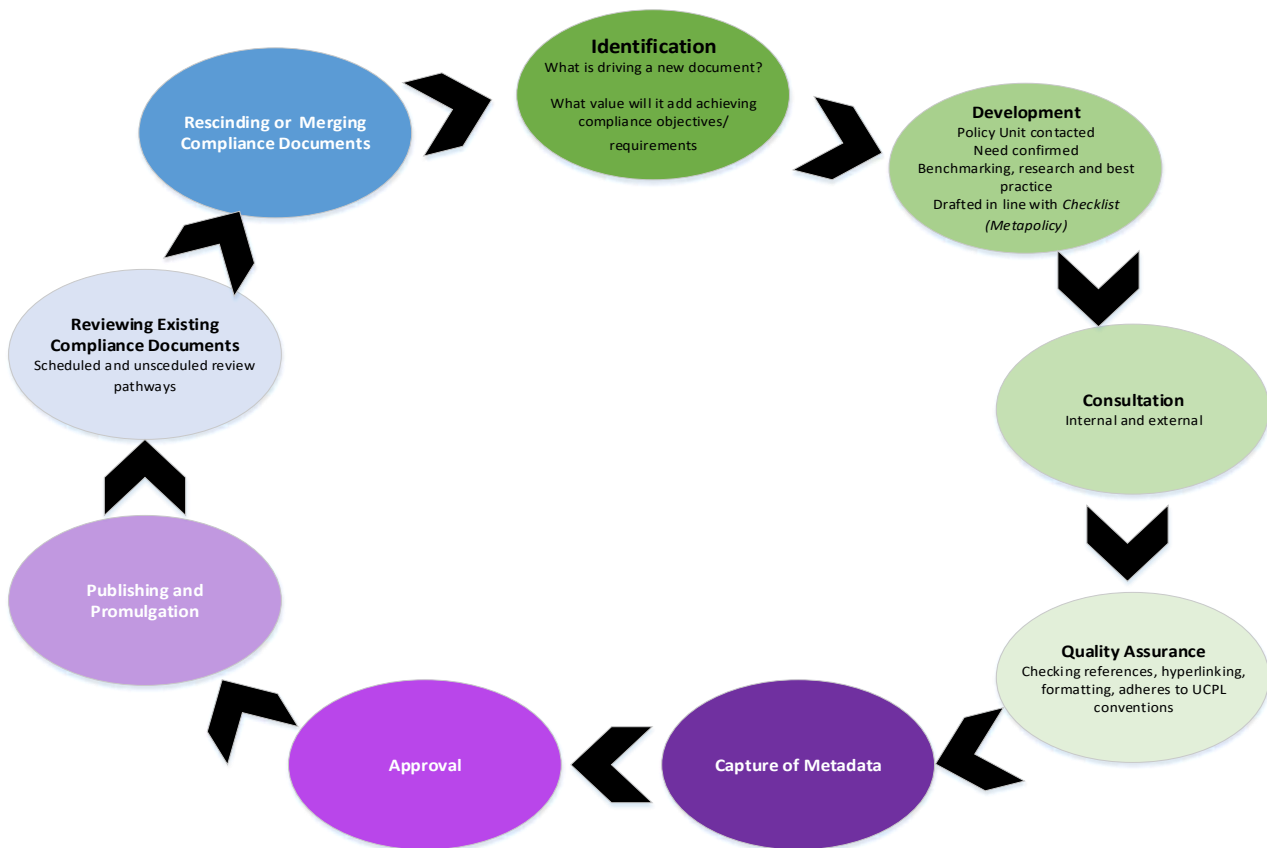
UCPL Document Lifecycle

This section summarises the lifecycle a UCPL document. The lifecycle of a UCPL document is different to the lifecycles of other compliance documents as they are not centrally administered.

Throughout the lifecycle of a UCPL document, continuous monitoring occurs to confirm accessibility, relevance, and compliance within the University and with legislative requirements. This function is the responsibility of the Policy Unit, with input from the wider University community when issues are identified.

Other compliance documents should emulate a lifecycle as similar to UCPL document lifecycle as much as practicable.

The below diagram illustrates the lifecycle of a UCPL compliance document.



Related Documents and Information

Legislation

- [Education and Training Act 2020 \(New Zealand Legislation website\)](#)
- [Public Records Act 2005 \(New Zealand Legislation website\)](#)
- [Treaty of Waitangi \(Te Tiriti o Waitangi\) Act 1975 \(New Zealand Legislation website\)](#)

UC Policy Library

- [Delegations of Authority Policy \(PDF, 980KB\)](#)

UC Website and Intranet

- [Approval Authority Instructions \(University Policy Library website\)](#)
- [Contact Officer Instructions \(University Policy Library website\)](#)
- [Document History and Version Control Guidelines \(University Policy Library website\)](#)
- [Health & Safety Toolkit \(University Human Resources intranet\) \(Staff Only\)](#)
- [HR Toolkit \(University Human Resources intranet\) \(Staff Only\)](#)
- [NZ Universities' General Disposal Authority \(University Information and Records Management website\)](#)

- [Policy Drafting Style Guide \(University UC Policy Library webpages\)](#)
- [Policy Review Process \(University Policy Library website\)](#)
- [Templates, Examples and ‘How to ...’ documents \[left side bar\] \(University Policy Library website\)](#)
- [UC Delegations Schedule \(About UC website\)](#)

Appendices

- [Appendix A](#): Checklist for Development of New and Existing UCPL Compliance Document
- [Appendix B](#): Approval Authority Schedule

Document History and Version Control Table			
Version	Action	Approval Authority	Action Date
<i>For document history and versioning prior to 2013 contact ucpolicy@canterbury.ac.nz</i>			
1.00	Document created.	University Registrar	May 2014
2.00	Scheduled review by Contact Officer.	University Registrar	Jun 2015
2.01	Amended hyperlinks and removed references to automated workflows.	Policy Unit	Aug 2016
2.02	Minor amendment to the “UC Policy Library website” section regarding the downloading or printing of policies, Appendix B director titles updated to reflect Executive, Deputy VC of Research changed to Research and Innovation in Appendix B	Policy Unit	Nov 2016
2.03	Unscheduled review by Contact Officer, contact “person” changed to “officer” in some places, updated hyperlink to delegations schedule.	Policy Unit	Apr 2017
3.00	Scheduled review by Contact Officer, major changes to reflect direction of the website, strategic direction of the UCPL and created university wide policy direction for consistency	University Registrar	May 2018
3.01	Minor changes to Council documents section.	Policy Unit	Sep 2018
3.02	Unnecessary comma removed	Policy Unit	Oct 2018
4.00	Scheduled review by contact officer, minor changes to content to reflect existing practices	Policy Unit	March 2019
4.01	Minor amendment to the <i>Consultation</i> sub-heading.	Policy Unit	March 2019
5.00	Scheduled review by CO, amended Appendix A to include reference to	Policy Unit	May 2019

	legislation and relevant external compliance documents, minor changes to definitions and content.		
5.01	Unscheduled review, major changes to content, additional text added and content rearranged	Executive Director, People, Culture and Campus.	July 2020
5.02	Unscheduled changes, minor changes to <i>Disclaimers as status identifiers (a) section</i> to bring in line with new practice.	Policy Unit	Aug 2020

This policy remains in force until it is updated.

Appendix A

Checklist for Development and Review of New and Existing UCPL Document

Following the consultation phase and before seeking ratification from the Approval Authority, the Contact Officer should apply the following checklist to the proposed new compliance document. The Policy Unit can assist, as required.

	Yes	No- minor <i>(no change necessary)</i>	No – major <i>(recommended amendments)</i>
Compliance Document Format			
Have all the following been provided: <ul style="list-style-type: none"> • title • last modified • review date • approved by • Contact Officer? 			
Has the template been applied correctly and the material presented in terms of the specified guidelines?			
Has the University branding been applied consistently throughout the document (including appendices)?			
Compliance Document Content			
Does the title adequately reflect the purpose and content?			
Has the document been classified and described appropriately?			
Is the review date realistic?			
Has the person with overall responsibility for the compliance document been accurately identified (see approval delegations)			
Have any powers to approve/or carry out tasks identified in the document been delegated in line with the Delegation Schedule and other existing delegations?			
Is the identified Contact Officer the appropriate person to handle administrative enquiries about the compliance document and the first contact for the review process, i.e., the person with			

operational responsibility for the compliance document?			
Does the introduction clearly and concisely identify the purpose?			
Has the organisational scope been identified and is it acceptable?			
Are the definitions provided accurate, relevant, and consistent with those used elsewhere?			
If a policy statement is included, is it actually a policy or is it in fact a procedure, set of guidelines or something else?			
Are procedures or guidelines clearly identified as such? (NB: these should offer advice; compliance may be expected though not necessarily mandatory.)			
Is the compliance document comprehensive: <ul style="list-style-type: none"> • Issues clearly stated? • University position or response identified? • Acceptable minimum standards detailed? • Sensitive to or takes account of relevant and applicable cultural views and positions? • Does the compliance document cover all relevant compliance issues? • Consequences or penalties set out if there is a breach or unacceptable deviation from the policy content? • Are appeal processes clearly identified, where appropriate? 			
Have compliance costs, where relevant, been identified?			
Have all related compliance documents been identified?			
Are the appendices relevant and appropriately presented?			
Has all relevant background and consultation material been included in the appendices?			

General	
Has the AVC Māori been consulted where the policy touches on matters that impact Māori <ul style="list-style-type: none"> • students, • staff, • the Māori community. 	Comment:
Is there clear evidence that a robust consultation process has occurred involving all interested stakeholders?	Comment:
Is the Contact Officer clearly aware of the process for obtaining approval, lodging a copy with the Policy Unit for deposit in the UC Policy Library, and reviewing the compliance document in due course?	Comment:
Have you reviewed referenced internal (UC documents) and external (legislation, best practice etc.,) compliance documents? <ul style="list-style-type: none"> • Is there any overlap or conflict with other compliance documents in existence? • Have you advised the CO's on other UCPL compliance documents that you have identified a potential conflict? • Have you updated the document to reflect current legislation, regulation, best practice, accepted standards etc.,? 	Comment:
Has the Policy Unit fully carried out the assurance check?	
Other comments:	

Appendix B

Approval Authority Schedule

In accordance with delegations approved by Council ('delegated authority' applies to some but not all policy documents).

Classification	Approval Authority	Operational Responsibility
Academic	Deputy Vice-Chancellor (Research)	<ul style="list-style-type: none"> Academic policies in the research and postgraduate area (regulations are separate and dealt with by Academic Board and Council)
	Deputy Vice-Chancellor (Academic)	<ul style="list-style-type: none"> Academic policies mostly in the area of academic administration and undergraduate areas
Facilities Management	Executive Director, People Culture, Campus	<ul style="list-style-type: none"> Management of, and best practice guidelines for, the physical campus environment
Finance	Chief Financial Officer/Executive Director, Panning, Finance & ITS	<ul style="list-style-type: none"> Financial matters
Health & Safety	Vice-Chancellor	<ul style="list-style-type: none"> All policies and procedures related to health & safety compliance, occupational health, ACC and environmental safety
Human Resources	Executive Director, People Culture, Campus	<ul style="list-style-type: none"> All policies and procedures related to management of staff and employment issues
Information and Technology Services (ITS)	Chief Financial Officer/Executive Director, Panning, Finance & ITS	<ul style="list-style-type: none"> IT best practice policies and guidelines
International	Deputy Vice-Chancellor (Research)	<ul style="list-style-type: none"> International matters
Legal Compliance	General Counsel and University Registrar	<ul style="list-style-type: none"> Legal and regulatory compliance matters
Library	Deputy Vice Chancellor (Research)	<ul style="list-style-type: none"> Library matters
Research, Consultancy, and Intellectual Property (IP) issues	Deputy Vice-Chancellor (Research)	<ul style="list-style-type: none"> Research issues Outside commercial activities by staff and students
Student Services	Executive Director of Student Life, Services and Communications	<ul style="list-style-type: none"> Code of Conduct for Students Equal Educational Opportunities – equity and access Accommodation Other issues relating to student welfare

University Management	Council Vice-Chancellor	<ul style="list-style-type: none">• Governance issues• Management matters
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