

CHS Policy Framework

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1. Purpose and Introduction

The purpose of this policy is to outline the process that the ECA Higher Education Institute Pty Ltd trading as ECA College of Health Sciences (CHS) will apply for establishing, maintaining and updating policies. It explains the operation, review and development of all CHS policies.

CHS has established a comprehensive Policy Framework that governs its corporate and academic operations. All College policies and procedures can be found within the CHS Document Centre. Most policies are published on the College website. Policies are developed and reviewed through a structured decision making and approval process described in this document. The Governing Board is the ultimate authority to approve, change, suspend or cancel a policy. Policies are designed to assist the College perform its operations in a compliant, efficient and effective manner with an appropriate evidence trail and commitment to learning and continuous improvement. As a general rule, the procedures and guidelines are developed to support the implementation of the approved policies.

2. Scope

All policies and guidelines drafted and submitted for approval to the Governing Board or the Academic Board must comply with this framework.

3. Definitions

Item	Definition
<i>Governance</i>	The processes by which CHS is governed including delegation of authority, responsibility, accountability and stewardship and control exercised in the operation of the organisation.
<i>Instruments of governance</i>	<ol style="list-style-type: none">1. TEQSA Act 20112. TEQSA HES Framework (Threshold Standards) 20153. AQF Regulations4. Resolutions of Academic Board and Governing Boards5. Policies, Procedures and Guidelines
<i>Policy</i>	A formal statement or directive that gives effect to external regulatory requirements. Policies guide decision making and govern areas of academic and administrative operation. Policies have CHS application and can only be approved by the Governing Board (governance), Academic Board (academic matters) or Principal (operational).
<i>Procedure</i>	A directive outlining the specific tasks, processes and responsibilities required to effectively implement a policy or regulation.
<i>Guideline</i>	A statement offering advice and guidance on the implementation of CHS policy or procedure within the context of a specific area/department.
<i>Staff</i>	Any person who is an employee of CHS and includes full-time, part-time, sessional or casual staff.
<i>Student</i>	Any person enrolled as a student of CHS. This includes full-time, part-time, both online and face-to-face.

Item	Definition
<i>Senior executive</i>	Principal and other Managers
<i>Approval authority</i>	Governing Board, Academic Board and Principal.
<i>Policy owner</i>	Member of Governing Board, Chair Academic Board (or nominee), a member of Executive Management Team (or nominee). Policy Owners are responsible for ensuring policies and associated documents are developed, approved and implemented in accordance with this framework. Policy Owners can delegate tasks to Managers.
<i>Template</i>	Approved format for policies, procedures, guidelines and supporting documents.
<i>Promulgation</i>	The official announcement to CHS stakeholders of a new policy or one which has undergone significant revision.

4. Policy Statement

ECA Higher Education Institute Pty Ltd (trading as ECA College of Health Sciences) is governed by the Corporations Act 2001, the principal legislation regulating companies in Australia. It regulates matters such as the formation and operation of companies including the conduct of officers. CHS is also governed by a number of Acts which regulate the Higher Education sector: the Education Services for Overseas Students Act (ESOS) 2000, the Tertiary Education Quality Standards Agency Act (TEQSA) 2011; as well as a number of regulatory frameworks: TEQSA Higher Education Standards Framework, the Australian Qualifications Framework and the National Code of Practice for Registration Authorities and Providers of Education and Training to Overseas Students 2018.

Policies, procedures and guidelines complement these Acts by:

- providing direction for the good management and effective operations of CHS;
- ensuring compliance with legislative and regulatory requirements;
- supporting the achievement of CHS's strategic goals; and
- improving the management of risk.

A new policy should be developed when the need for the same arises either due to the operational necessities or as a result of legislative changes or to create efficiency. Policies are developed around significant issues, linked to a philosophical position and require a formal process of approval. Policies are seen to be enduring over extended periods of time and are available to CHS and its community of stakeholders.

5. Instruments of Governance

5.1. Governing Board

The powers and functions of the Governing Board include establishing policies relating to the governance of CHS as well as oversight of the academic activities, as detailed in the CHS Constitution and the CHS Governing Board Charter. The Governing Board delegates the responsibility for the academic-related matters to the Academic Board. Governance policies approved by the Governing Board typically relate to:

- Statutes, regulations and standing resolutions
- Strategic positioning
- Risk management
- Fiduciary responsibility

- Delegations of authority
- Legislative and common law compliance

5.2. Academic Board

Academic policies are approved by Academic Board and endorsed by the Governing Board, including:

- Academic quality assurance and standards
- Quality of learning and teaching
- Curriculum design and delivery
- Assessment, progression, entry requirements
- Academic grievances and appeals

5.3. Principal

The Governing Board delegates responsibility for the efficient conduct of the College's day to day operations to the CHS Executive Management Team under the leadership of the Principal. The Executive Management Team collectively plans, organises and manages the operations upholding operational priorities, plans, policies and directions given by the Governing Board and the Academic Board.

Operational policies approved by the Principal typically include:

- Staffing
- Marketing
- Agents
- Fees
- Refunds

Minor amendments to higher level policies may also be approved by the Principal and notified to the Governing Board.

6. Policy Development, Approval and Review

6.1. Policy Development

Policies should describe the underpinning principles regarding the matter under consideration and state the CHS's position in an unambiguous manner. Typically, a policy is written to outline the College's position in terms of management of a given issue to provide a direction for performing a process or an activity in a compliant and efficient manner. A policy should be valid for at least 2 years unless operational reasons warrant changes. A policy may incorporate the corresponding procedures for its implementation. When a major policy is written it may be necessary to have a separate procedure or guideline that will be easier to adjust in practice without the need for changing the policy itself.

Policies are developed and reviewed through a structured decision making and approval process, detailed in the supporting procedure. As a rule, policies elaborate on one or more aspect of a regulation and the procedures and guidelines are developed to support the implementation of the regulation or policy. Any procedures and guidelines must be submitted for approval with the policy document.

Creation of a new policy or significant revision of an existing policy will be necessary for a number of reasons including:

- Changes to legislation
- Significant operational changes
- Changes in the strategic direction of the College
- Outcomes of reviews and audits

- Significant changes in practice across the tertiary sector
- Two yearly review cycle

The following matters must be considered when researching and analysing the need for a new policy or revision of an existing policy:

- Rationale for the policy (organisational changes, legislative/compliance requirements)
- Relationship with existing policies and government legislation
- Development of a supporting procedure
- Resource implications
- Statement or plan explaining how the policy's effectiveness and impact will be measured and evaluated

A policy is to be written in such a way that:

- CHS's position is clear around the issue, particularly in areas where some differing views might exist – consider key words that need to be included somewhere in the statement as a starting point.
- Ultimately a policy statement must say something that directs, or impacts on, actions across CHS.
- The philosophical underpinnings are connected to, and consistent with, the overall beliefs of CHS.
- It is a concise and tight statement but broad enough so that it is not subject to constant change.
- It enables changes to procedures to be made to meet changing circumstances without causing the policy itself to be changed where appropriate.
- It provides a clear direction for guidelines and/or procedural statements to be written to implement the policy position.

No one person writes a policy. It is expected that all policies are developed and written by a small team of relevant staff, and that the draft of a new policy is communicated to those who are directly affected by the policy statement before submitting it for final approval. The Director of Quality and Accreditation has the delegated responsibility to manage the development, implementation and monitoring of policies. Draft policies must be submitted to the Director of Quality and Accreditation for review and improvement, who will then submit it to the appropriate approving body for final approval. When approved, the policy will be promulgated via the normal communication channels.

6.2. Policy Review

All policies are reviewed every 2 years. Shorter review periods may be necessary if a policy is rather complex and or addresses new operational areas. Professional judgement is essential to make sure the policy is fit for purpose. New policies or policy changes are generally initiated by the Executive Management Group. The majority of policies are created pursuant to operational or compliance audits or reviews undertaken at the end of an academic year or as part of pre-accreditation or pre-registration activities.

6.3. Policy Updates Process

Responsibility for vetting and managing all policies rests with the Director of Quality and Accreditation (DQA). Draft of new policies are initially circulated for comment to the functional managers and those most impacted by the proposed policy or revision. Revised policies reflecting desired operational arrangements are submitted to the DQA for compliance review, after which the draft policy forwarded to the Academic and or Governing Board for review and consideration. In some instances, policies are drafted/proposed by one of the Academic Board committees (e.g. Learning and Teaching Committee) or the Governing Board committees (e.g. Audit and Risk Committee) but these must also be submitted to the DQA for stakeholder consultation, review, amendment and submission to the AB and or GB as appropriate.

The Governing Board or the Academic Board may approve or seek further clarification or even refer the policy to an external expert for review and advice prior to approving or rejecting the same. This is normally reserved for complex policies related to complex regulatory requirements. Most policies are simple and straight forward. Note that each policy/procedure has a nominated officer who is responsible for its implementation.

6.4. Procedures for Policy Updates

- Suggestions for policy reviews and updates can come from any relevant committee or the executive team or as a result of external reviews.
- Academic policies are generally drafted by the academic leadership team to ensure alignment, consistency and relevance.
- Revised policy drafts including a short report that explains the background and rationale as well as the impact on the total policy framework architecture are compiled by the Director of Quality and Accreditation based on the relevant Committee suggestions or other sources and submitted to the Academic Board or Governing Board for consideration.
- Policy changes may also come as a result of changes to regulatory requirements, e.g. TPS requirements.
- The Academic Board may refer the suggested policy changes back to the DQA for further work or ask for additional explanations etc.
- The Academic Board and or the Governing Board may approve or reject the suggested policy changes based on sound academic criteria with particular focus on compliance and academic quality assurance as well as maintenance of academic standards.
- The Dean is required to implement all approved academic policies and the Director of Administration and Student Services is required to apply all student-related administrative policies as approved by the Governing Board.
- The Governing Board may cancel a policy if it is of the view that the policy approved by the Academic Board is materially in breach of the regulatory requirements or not aligned with the College's suite of policies and international norms and standards or otherwise can cause material damage to the College's registration or the accredited programs, provided however that such power is not exercised unreasonably and only applied in exceptional circumstances.
- The Director of Quality and Accreditation is tasked with maintaining a register of all approved policies and to ensure that such policies are reviewed at the intervals specified in each policy or guideline document to ensure currency and validity. The DQA shall ensure that all cancelled policies are removed from the register and the affected parties are informed in writing of such cancellation.
- All operational and financial policy changes should be brought to the Governing Board for consideration. However, where any such policies have the potential to impact the academic quality or support services to students the Governing Board shall consult the Academic Board before approving such policy changes.
- The Governing Board and the Academic Board shall discharge their decision making authority in such a manner that places academic primacy above any other considerations. To this effect any operational and financial policy changes shall be tested against this criterion before approval by the Board.
- Where there is a conflict in terms of academic policies and an operational and financial policy change the latter shall take precedence.

6.5. Version Control

All policies are version controlled. Version 1 is the original version when the policy is first approved by the governing body. This remains valid till the next revision and approval in which case the version will be 2 and so on. The Director of Quality and Accreditation shall maintain a register of all approved policies, guidelines, procedures and forms which shall record:

- The title of the policy and procedure or guidelines or form;

- The current version and date approved;
- The policy owner; and
- The next review date.

All superseded policies shall be archived and be only accessible through the Director of Quality and Accreditation for historical checks.

6.6. Policy Consistency

The ECA College of Health Sciences has made a strategic decision that as far as possible the College should keep its policies consistent with those developed and applied by Asia Pacific International College (APIC), CHS's sister institution within the ECA Group. There are several reasons for adopting this strategy: (i) it will aid implementation of some of the policies, particularly those that relate to shared services; (ii) APIC policies have been tested and adjusted for compliance over time (having gone through multiple audits and checks); (iii) having consistent (but not the same) common policies across many areas will facilitate greater cooperation between APIC and CHS in areas of administration and compliance (e.g. in staff training or underlying processes); and (iv) all the policies that were adapted or sections of policies adapted from APIC have been revised to fit into the CHS institutional, governance, operational and quality assurance framework, thus ensuring that all policies will be fit for purpose. Note that the ECA College of Health Sciences has been established within ECA that is a mature organisation with a considerable (>10 years) of higher education experience (APIC was first formally registered in 2006). It is thus important that that experience and assets created are exploited in the strategy, design, development, resourcing, operation and documentation of CHS.

7. Dissemination and Implementation

7.1. Policy Dissemination

All policies including the Policy Framework will be disseminated through the normal communication channels, as appropriate, including:

- CHS website
- CHS Policy Library
- Student and staff orientation programs
- Posters and window displays
- Targeted training sessions
- Management and team meetings
- Meeting agendas and minutes

7.2. Implementation

The Policy Framework will be implemented through:

- Staff induction processes
- Operational plans and activities
- Inclusion in position descriptions
- Consultation and training

8. Records

Records associated with this policy will be maintained according to the ***CHS Records Management Policy***.

9. Related Documents

- CHS Constitution
- CHS Delegations Policy and Schedule
- CHS Governing Board Charter
- CHS Academic Board Charter
- CHS Quality Management System

10.Related legislations

- Higher Education Support Act 2003
- Tertiary Education Quality and Standards Agency (TEQSA) Act 2011
- TEQSA Higher Education Standards Framework (Threshold Standards) 2015
- Education Services for Overseas Students (ESOS) Act 2000 and National Code of Practice for Providers of Education and Training to Overseas Students 2018 (National Code 2018)
- Australian Qualifications Framework (AQF).