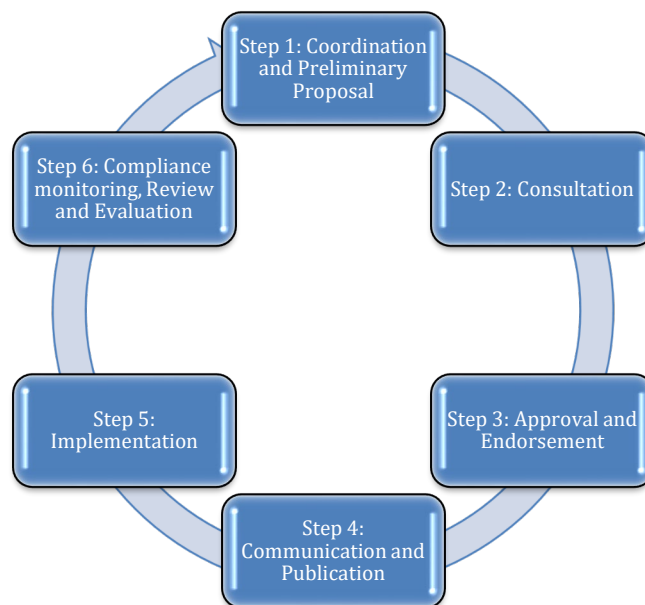


Policy Proposal, Approval, Dissemination and Review Process

*Note: The diagram depicts the life cycle of **all** Ara statutes, regulations, policies, procedures, guidelines and protocols. For simplicity, only the term 'policy' is used below to describe the process.*



1 Coordination and Preliminary Proposal

Coordination and intelligence gathering stage. Determining if there is a need.

A new policy may be initiated after identifying that a need exists to address a gap or meet compliance standards. Mitigates against uncoordinated policy proliferation.

The Director of Organisational Insights and Compliance should be consulted at this point. All new policies must be created using the approved template.

Preliminary proposal has several components:

- 1 The new policy is developed by an individual or committee using the Ara template and guidelines and supported by the Director of Organisational Insights and Compliance;
- 2 A draft is widely promulgated amongst relevant persons for comment/input;
- 3 A quality control checklist should be applied to the draft (see Appendix B of the **Metapolicy**).
- 4 **Benchmarking:**
 - a The policy is reviewed against other similar policies in other organisations to inform policy and practice through comparative analysis. Identifying points of similarity and points of difference and making judgements based on these findings. Essentially these

judgements relate to the identification of good practice policy provisions and practices for Ara institutional policy requirements.

- b The policy must be reviewed to ensure that it complies with the Metapolicy and all relevant legislation and regulations and adhere to necessary standards of care.

2 Consultation

Central to the policy cycle and key to successful policy implementation. The purpose is to improve the quality of policy decisions through access to relevant information and perspectives, including exchange of problem and solution definitions, alternatives, and criteria; ensure understanding, acceptance and legitimacy of proposed policies; promote consensus about policy choices; anticipate challenges to the policy process by providing transparency, accountability and opportunities for participation.

A draft of the new policies and draft policy amendments that are deemed a major change and as such require the approval of the Approval Authority be distributed through the Waituhi alerting staff, unions and students (where applicable) of the availability of the draft and how to respond with suggestions and comments. The duration of the consultation period will be 10 working days from the date it is made available.

Each recommended addition or deletion needs to be considered and a decision made as to whether to reflect them in the final policy. It is good practice to provide feedback to all policy stakeholders that contributed to the consultation process, acknowledging where recommendations were – and were not – adopted.

Consultation is not required where policy requires amendment for legislative currency, changes to roles/ titles/ names, and or where the policy amendment is not considered to have significant changes to the principles, intent, and procedures Policy is considered to support and evolve with the business needs and we encourage staff to promote change and feedback,

3 Approval and Endorsement

Following a rigorous development and consultation stage (Step 1-5), the appropriate Officer Responsible must take the policy to the Approval Authority for endorsement. The Approval Authority must then formally approve the policy, in writing, prior to moving to Step 5.

4 Communication and Publication

The newly approved policy is then lodged with either the Academic Quality Unit or the Organisational Insights and Compliance Unit, who is responsible for its deposit in the QMS Library and notification of its existence on Waituhi.

5 Implementation

Implementation should be considered early in the development of a proposal and include considerations of the following in the meeting the policy:

- a Specification
- b Conflicting objectives
- c Conflicting directives
- d Required competencies

- e Resourcing requirements:
 - i Communication requirements.
 - ii Additional guidelines, procedures, templates, and forms.

6 Compliance Monitoring, Review and Evaluation

As per the policy template, a review date will be determined and documented; generally, triennially but this is determined by the type of policy. All reviews will be initiated by the Academic Quality or the Organisational Insights and Compliance Unit (depending on the policy type) three months (90 days) before the review date with an email to the Officer Responsible and follow ups as necessary. Ad hoc reviews and amendments may also occur. It is the responsibility of the Officer Responsible to ensure these are forwarded to the Academic Quality Manager or the Director of Organisational Insights and Compliance.

Review includes review of the policy document and determining its relevance to the current practices as well as what is 'best practice' for Ara.

Internal audit and quality assurance programs will monitor compliance and evaluation efforts. The intention is to embed progressive monitoring and evaluation of policy implementation (see Internal Audit schedule and reporting). Integrating evaluation into policy design and implementation adds rigor, consistent with the idea of carefully considered decisions made by a well-informed, accountable decision maker.