Doc No. CPL001 v1.0

POLICY FRAMEWORK

Dungog Shire Council

Document Control

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Document approval

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1 PURPOSE

This Framework aims to establish a standard approach to writing, approving and reviewing Council owned documents. These documents are used to provide direction and consistency within Council to ensure process efficiency and improvements.

2 SCOPE

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This Policy applies to all Councillors and Council staff.

3 DEFINITIONS

To assist in the interpretation of this framework, the following definitions apply:

Administrative Amendment:	A housekeeping change to a policy such as wording, updating a section name, position re-titles, typographical errors or reference to legislation which does not alter the scope, purpose or intent of the document
Minor Amendment	A change to a current policy that is of an insubstantial nature, not affecting the meaning or intent of the policy. Minor amendments may reflect changes to responsibilities or operational aspects of a process.
Major Amendment	A change to a current policy that is likely to impact upon the intent of the policy and/or on other related policies, stakeholders, aligned procedures, systems, or codes of conduct.
General Manager	The person appointed as the General Manager of Dungog Shire Council under the Local Government Act 1993.
Executive Leadership Team (ELT)	The formal meeting of senior management team including the General Manager and Directors.
Office of Local Government (OLG)	The NSW Government agency responsible for strengthening the sustainability, performance, integrity, transparency and accountability of the local government sector
Approve	Authorised for use by the relevant authority without the need for further consultation, endorsement, or adoption

Endorse	A supportive position for a document and authorisation to proceed to adoption by the relevant authority (e.g. Council)
Adopt	To formally assume as the organisation's position on a particular topic/focus.

4 FRAMEWORK STATEMENT

A Framework is created to provide a structure for management and operational activities that combine policy documents, procedures, guidelines and allows for the implementation of principles set out in policies.

A policy is adopted for any area of the Council's operation where direction or purpose needs to be set in order to conduct Council business.

A policy is operationalised through procedures which give instructions and set out processes to implement a policy. In order to effectively and efficiently manage policies and procedures, this framework establishes a hierarchy and sets out the requirements and standards for each step of the development and improvement process. All policies and procedures must be developed, deployed, monitored and revised in accordance with this policy and any relevant legislation.

A policy is used by Council to:

- provide clarity and consistency;
- improve decision making;
- inform judgements and guide actions;
- manage risks and entitlements;
- explain why things need to be done or need to change;
- fill gaps not covered by legislation or to impose conditions or constraints not defined elsewhere; and
- implement legislative requirements.

5 DOCUMENT HIERARCHY

This Framework consists of seven tiers of corporate documents, both internal and external. These are outlined below:

- Policy (Council or Management)
- Guidelines (Internal or External)
- Procedure
- Code
- Plan/Strategy
- Integrated Planning and Reporting Documents
- Other Relevant Documents

Whilst Work Health & Safety (WHS) documents are contained within the document hierarchy and overarching Policy Framework, specific WHS Documentation has been developed to meet WHS requirements. *Refer to the Controlled Document Register* (23/30702) for a detailed list of documents.

5.1 Policy

Council Policy

A Council Policy is a rule or position statement which can only be adopted by formal resolution of Council. It provides direction and guidance to both the organisation and community in respect to Council's position on a particular matter.

Council policies are either required by legislation or influence the strategic direction of Council. As shown in the *Decision Making Flowchart* set out in item 6 of this policy, a council policy is endorsed by the Executive Leadership Team and adopted by Council. These policies must not exceed the general power granted to Council under the appropriate legislation; where this contradiction occurs, the appropriate legislation must take precedence.

As further shown in the *Decision Making* Flowchart, before a Policy is created, an assessment must be made to determine if an existing policy can be amended to fulfil a need.

Due to the external focus, or community interest, the stakeholder consultation for council policy would follow the guidance provided in the adopted Community Engagement Strategy and Community Participation Plan, or where otherwise required under legislation.

Once adopted by Council, a policy becomes an official Council Policy and can only be rescinded by subsequent resolution of Council. Policies must be reviewed within a specified timeframe in the document control table and further adopted by Council, regardless of whether amendments were made.

Management Policy

A Management Policy is a guiding principle which provides direction to staff on the operational approach to be taken in relation to a particular issue. These standards are approved internally by the Executive Leadership Team.

Management Policies have an internal focus and are applicable to the whole of the organisation. As a management policy has the potential to affect large numbers of staff, stakeholder consultation will include representatives from throughout Council.

Policies must be reviewed within a specified timeframe in the document control table and further adopted by ELT, regardless of whether amendments were made.

5.2 Guidelines

Internal Guidelines

Internal guidelines are created for internal operations and must be endorsed by the Executive Leadership Team. An Internal Guideline is a document that provides a consistent and structured approach to a function within a Council and must be adhered to by staff. An Internal Guideline may be connected to a Policy, however, does not change as frequently as a procedure. Both internal and external guidelines must use the same template

External Guidelines

External Guidelines accompany a policy and relate to the commitments that Council has made to the public. External Guidelines must be reported to and endorsed by Council. While these guidelines may change more frequently than the policy they relate to, they may be changed without a Council resolution. Both internal and external guidelines must use the same template.

5.3 Procedure

A procedure can be a set of instructions or a business process which outlines the method by which a task or function is to be undertaken, or can provide an overview of tasks required by a role. They have an internal focus and normally only affect a small number of individuals.

Internal procedures are generally established by a Coordinator/Manager and approved by the Manager or Director of the area.

5.4 Code

A Code is a document that outlines a set of rules and responsibilities that must be upheld by all staff at Council. Codes that Council currently maintain are the 'Code of Conduct' and 'Code of Meeting Practice'. The content within a code is transparent and clearly defines the obligations of Council. A Code must be adopted by Council before it can be enforced.

5.5 Plan/Strategy

A Plan/Strategy is a plan of action designed to achieve a long term or overall aim or objective. The aim of Plans/Strategy documents are to assist Council to move towards better practices and improved community outcomes. A Plan/Strategy generally lists a series of actions to be undertaken over a number of years. The Plan/Strategy must identify the funding source for these actions, and must be budgeted prior to being prepared. Before preparing a Plan or Strategy, Managers should consult their Director, and must ensure that all actions being committed to in the strategy are budgeted in the adopted Operational Plan. A Plan or Strategy must be adopted by Council before it can be implemented

5.6 Integrated Planning and Reporting Documents

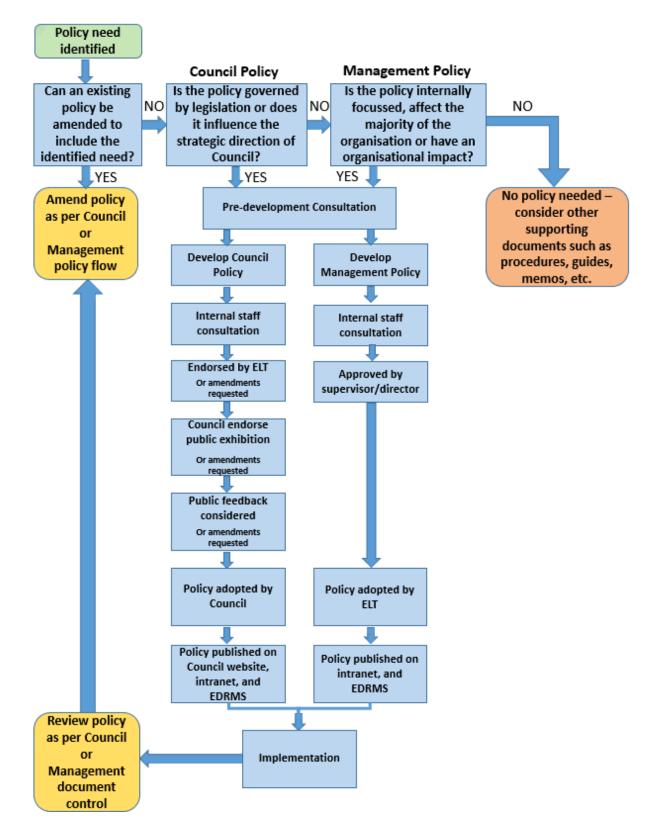
Integrated Planning and Reporting Documents are managed in accordance with the requirements of the Local Government Act 1993.

5.7 Other Relevant Documents

Other relevant documents refer to documents that have been created to support the policy or procedure. Examples include templates, forms, fact sheets, etc. These are approved internally by the relevant supervisor or manager. Reference to relevant documents must be stated in the policies that they apply to.

6 DECISION MAKING FLOWCHART

The decision making flowchart will assist to determine which policy is required to be developed, amended or not needed. (*See WHS Document Development and Control Procedure for additional information on WHS documents*)



7 APPROVAL AND REGISTRATION

All policies and procedures are to be endorsed and approved in accordance with the following table before they become operational.

	Арр	Approval Authorities				
	Supervisor/Manager	ELT / GM	ELT	Council		
Council Policy			Endorse	Adopt		
Management Policy		Endorse	Endorse			
Procedure		Approve				
Code			Endorse	Adopt		
Plan/Strategy		Endorse	Endorse	Adopt		
Integrated Planning and Reporting Documents			Endorse	Adopt		
Other relevant documents	Approve					

To guide the relevant approval authorities, the definitions are provided below:

Approve	Authorised for use by the relevant authority without the need for further consultation, endorsement, or adoption
Endorse	A supportive position for a document and authorisation to proceed to adoption by the relevant authority (e.g. Council)
Adopt	To formally assume as the organisation's position on a particular topic/focus.

A policy or procedure will remain in force unless formally rescinded by the relevant Approval Authority or superseded by another policy or procedure. This must occur by formal resolution of Council or by endorsement of ELT.

Where organisational structure change results in a change in role responsibilities, the existing responsibilities and accountabilities will revert to the equivalent position in the new structure until the policy or procedure is formally amended to reflect the new or amended position title, authority or role that takes its place.

Once a document is finalised, a member of the Governance and Integrated Risk team will ensure that it is in the correct template and updated in the controlled documents register and on the website and intranet.

<u>Note:</u> relevant policy authority must be given to Managers, Executive Managers, and Directors to approve and rescind corporate documents.

8 CONTENT

Policies are developed in order to provide parameters and guidelines for the achievement of the Council's strategic and operational objectives, giving consideration to statutory, best practice and quality management requirements.

- **Compliance:** Policies must comply with the relevant principles set out in relevant legislation, Council resolutions, integrated planning & reporting documents and development procedures.
- **Consistency:** Terminology used in the policy must be similar to that used in relevant legislation and must ensure not to change the meaning of the legislation. Use of the prescribed templates and procedures will ensure consistency of format, content, and process.

• **Clarity**: All policy documents will contain clear, concise English, enabling a wide range of users to understand the content. Where prescribed terminology is used (e.g. extracted from legislation) a clear description of the terminology must be given in the definitions section of the policy document.

9 STAGES OF POLICY DEVELOPMENT

The five stages of policy development are:

- **Needs Identification:** This stage includes identifying the matter to be addressed, seeking authority to proceed, and selection of the appropriate policy level which will contribute to achievement of corporate goals.
- **Policy Development:** This stage incorporates the identification of appropriate stakeholders, commencement of the consultation process, gathering relevant background information, authoring the policy document, and incorporating feedback.
- **Policy Endorsement and Approval:** This stage includes notifying the appropriate officers and/or Council, of the requirements to evaluate the draft policy, and submitting it for public exhibition (where necessary), endorsement and approval.
- **Policy Implementation:** This is the final stage in the policy process, but is ongoing. It includes such activities as issuing a controlled document number for the policy, notification, distribution, awareness and education.
- Policy Review: During the policy drafting stage, consideration will be given to the appropriate timelines for reviewing the policy. A review schedule will be incorporated into the policy document, which will commence once policy has been approved.

9.1 Policy Owner

A policy owner will be designated for all policies and will bear responsibility for regular review of the policy and for incorporating required changes.

9.2 Relationship/impact on other Policies

It is the responsibility of the writer to assess any areas of overlap, contradiction, or integration with other policies and to discuss these issues with the owner.

9.3 Policy Currency

The electronic version of each policy will be verifiable as the current version, whilst printed versions will contain a document control disclaimer warning that the printed copy may not be the current version.

10 POLICY DEVELOPMENT AND REVIEW

Policies may be developed or reviewed on the following basis:

10.1 Development

The need for the development of a new Council Policy may be initiated by one or more of the following:

- Councillor Request by one or more elected councillors for a policy to address an identified strategic requirement.
- General Manager recommendation due to introductions or amendments to legislative requirements, or as identified on an operational basis.
- Staff recommendation to the General Manager based on operational need.

10.2 Review

All policies are required to be reviewed at least once per Council term, unless otherwise stated by legislation or in response to one of the following:

- A request made to the General Manager by staff or elected councillors
- A change in legislation requirements
- Within 12 months following a local government election

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10.3 Outcomes of a Review

Upon completing a review of a policy, any changes are to be approved by the relevant approval authority in accordance with the table below.

	Policy (Council)	Policy (Management)	Procedure	Code	Plan/Strategy	IP&R Documents	Other relevant documents
Minor Amendment (including administrative amendments)	Endorsed by ELT. New minor version number applied (i.e. V1.1, V1.2, etc.)	Endorsed by ELT. New minor version number applied (i.e. V1.1, V1.2, etc.)	Approved by ELT/GM	Endorsed by ELT. New minor version number applied (i.e. V1.1, V1.2, etc.)	Endorsed by ELT. New minor version number applied (i.e. V1.1, V1.2, etc.)	Endorsed by ELT. New minor version number applied (i.e. V1.1, V1.2, etc.)	Approved by manager/ELT. New minor version number applied (i.e. V1.1, V1.2, etc.)
Major Amendment	ELT to re-endorse the recommended changes. Council to place on public exhibition where required and formally adopt the recommended changes New major version number applied (i.e. V2.0, V3.0, etc.)	ELT to re-endorse the recommended changes. New major version number applied New major version number applied (i.e. V2.0, V3.0, etc.)	ELT to re- endorse the recommended changes. New major version number applied New major version number applied (i.e. V2.0, V3.0, etc.)	ELT to endorse the recommended changes. Council to place on public exhibition where required and formally adopt the recommended changes New major version number applied (i.e. V2.0, V3.0, etc.)	ELT to re-endorse the recommended changes. Council to place on public exhibition where required and formally adopt the recommended changes. New major version number applied (i.e. V2.0, V3.0, etc.)	Advice sought from OLG. ELT to re-endorse the recommended changes. Council to place on public exhibition where required and formally adopt the recommended changes.	Approved by Manager/ELT. New major version number applied (i.e. V2.0, V3.0, etc.)

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No changes required after scheduled review	Council to place on public exhibition where required and formally adopt the reviewed policy. New major version number applied (i.e. V2.0, V3.0, etc.)	ELT to re-endorse the reviewed policy. New major version number applied (i.e. V2.0, V3.0, etc.)	ELT to re- endorse the reviewed procedure. New major version number applied (i.e. V2.0, V3.0, etc.)	ELT to endorse the reviewed document be adopted by Council. Council to place on public exhibition where required and formally adopt the reviewed document. New major version number applied (i.e. V2.0, V3.0, etc.)	ELT to endorse the reviewed document be adopted by Council. Council to place on public exhibition where required and formally adopt the reviewed document. New major version number applied (i.e. V2.0, V3.0, etc.)	ELT to endorse the reviewed document be noted by Council. Council to note the review. No alterations to version numbers required.	Management to recommend to ELT to note the review and no changes required. No alterations to version numbers required.
Document no longer required	ELT to endorse rescission and recommend to Council. Council to formally resolve to rescind the document. Document and version numbers remain allocated to the rescinded document and are not for re-issue.	Management to recommend rescission to ELT. ELT to formally resolve to rescind the document. Document and version numbers remain allocated to the rescinded document and are not for re-issue.	Management to recommend rescission to ELT. ELT to formally resolve to rescind the document. Document and version numbers remain allocated to the rescinded document and are not for re- issue.	ELT to endorse rescission and recommend to Council. Council to formally resolve to rescind the document. Document and version numbers remain allocated to the rescinded document and are not for re-issue.	ELT to endorse rescission and recommend to Council. Council to formally resolve to rescind the document. Document and version numbers remain allocated to the rescinded document and are not for re-issue.	Advice sought from OLG and included in the recommendation from ELT to Council to formally rescind the document. Document and version numbers remain allocated to the rescinded document and are not for re- issue.	Management to formally approve rescission. Document and version numbers remain allocated to the rescinded document and are not for re- issue.

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11 DOCUMENT CONTROL

Document control ensures that document within an organisation are up-to-date, reliable, consistent, checked and formally approved.

Governance is responsible for document control for all council and management policies. The business areas are responsible for organisational and internal procedures and related documents.

11.1 Policy & Control Document numbering

All policy and procedure documents will be allocated a controlled document number that will be issued once adopted/endorsed. Controlled document numbers will be issued by a member of the Governance and Integrated Risk team and reflect the document type. The same consistency will be applied to Work Health and Safety documents, with a prefix "W" to indicate it is a WHS document.

Document Type	Prefix	Document Type	Prefix
Council Policy	CPL	Management Policy	MPL
Organisational Procedure	PRO	Code	COD
Plan/Strategy	STR	Integrated Planning and Reporting Documents	IPR
Other Relevant Document	ORD		

Once a document is adopted or endorsed (where specified), it will be known as Version 1.0 (major version number). Any further drafts or minor amendments will progress sequentially e.g. 1.1, 1.2 (minor version number). The next formal adopted/endorsed version of the document will be version 2.0, etc. Where a document is formally rescinded, the document number will remain allocated and not be available for reissue.

12 RISK ASSESSMENT

As part of the approval process, a risk assessment will be undertaken and a date for review for the relevant policy will be determined.

Policies will be reviewed at least once per Council term, depending on the risk assessment of the policy.

The following criteria is used to determine risk:

- Implications of statutory requirements;
- Implications for operational effectiveness and efficiency;
- Potential for negative impact on;
 - $\circ \quad \text{Operational activity} \quad$
 - Strategic objectives
 - Environmental / economic factors
 - Reputation
 - Complex procedures or technical information; or
- Change is likely to occur (e.g. legislative, environmental, organisational, etc.)

Based on the determined risk assessment a review period is applied to each policy using Document Number MPL001 v1.0 Policy Framework – Policy & Procedure the following:

- High risk review annually
- Medium risk review every 2 years
- Low risk review every 4 years.

13 POLICY ACCESS & IMPLEMENTATION

All employees will have access to council polices, management policies, organisational procedures, and supporting documents via the document management system, Intranet and Website.

Staff training (and/or education) will be provided as part of the implementation of new policy or procedure there is a significant impact upon staff and/or internal practices.

All staff emails will inform staff when a policy has been adopted or updated. Employees without electronic access will be notified by their supervisor when policies are approved.

Printed copies will be placed on noticeboards and will be provided upon request.

The public will have access to relevant policies through the Council Website. Printed copies of polices will be made available upon request.

14 ASSOCIATED DOCUMENTS

Refer to the following documents for further guidance:

- Controlled Document Register <u>Record 23/30702</u>: <u>Governance Controlled</u> <u>Document Register (formerly named Policy Register - 2023)</u>
- Controlled Document Procedure
- Work Health & Safety (WHS) Document Development and Control Procedure
- Policy Templates

15 REVIEW

This Policy will be reviewed as required at intervals of no more than four years.



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