

University of New England

Compliance Policy

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Related policies or other documents:	Risk Management Policy, UNE Code of Conduct Staff, University of New England Strategic Plan, Student Behavioural Misconduct Rules, Integrated Project Management framework, Guidelines for Commercial Activities.

1. Rationale and Scope

- 1.1** This policy seeks to provide a uniform approach to compliance, defined by the University as the process of adhering to obligations of applicable laws, regulations, industry codes, organisational standards and principles of good governance.
- 1.2** This policy seeks to promote an effective compliance culture at UNE for upholding good corporate governance practices and providing risk treatments in respect of compliance that are commensurate with legal, regulatory and other compliance risks facing the University.
- 1.3** This policy seeks to promote the effective compliance of University commercial functions / activities in accordance with the Integrated Project Management framework and Guidelines for Commercial Activities.
- 1.4** This policy, in accordance with the UNE Code of Conduct and the principle of diligence, requires all University staff to be diligent in complying with relevant obligations in the course of their duties.
- 1.5** Non-compliance by a student, as outlined in the Student Behavioural Misconduct Rules, or staff member may result in disciplinary action against the individual concerned in accordance with the relevant statutes or agreements. Non-compliance by a staff member may also result in legal action against the staff member, the University or the University with the relevant staff member joined as a defendant.

2. Principles

- 2.1 The University is committed to good corporate governance practices. The University's commitment to compliance is demonstrated by:
- a. support and endorsement from the UNE Council and Audit and Risk Committee for the University's compliance program;
 - b. the active engagement of the senior executive in the identification and management of compliance issues and risks;
 - c. the allocation of appropriate resources throughout the University to manage compliance obligations.

3. Definitions

- i. **Compliance:** Adhering to the obligations of laws, regulations, industry codes, organisational standards and principles of good governance;
- ii. **Compliance program:** The coordinated activities intended to achieve compliance, manage non-compliance and promote continual compliance improvement. This will include an annual self assessment checklist as part of the Compliance Program;
- iii. **Staff member:** Person, whether remunerated or not, who works on the University's behalf; it includes part-time staff, full-time staff, sub-contractors, temporary staff, conjoint staff and volunteers.

4. Policy

- 4.1 UNE is committed to conducting its business and activities ethically and lawfully. Compliance is aligned to the University's core values of responsibility, respect, integrity, ethical decision making and enhancing UNE's performance culture.
- 4.2 This policy is based on the best practice Australian Standard AS3806-2006 Compliance Programs and government components of the ASX Corporate Governance Council, Corporate Governance Principles and Recommendations.
- 4.3 This policy aims to prevent, and where necessary, identify and respond to, non-compliance with the University's obligations under laws, regulations, codes, national governance protocols and its own organisational governance standards.
- 4.4 The compliance policy has the function of monitoring UNE's conformity with its obligations and providing areas for improvement.
- 4.5 The University recognises that it will achieve its goals and objectives more effectively through a risk based compliance program.
- 4.6 The compliance policy adheres to the University quality cycle in systematically planning, acting, monitoring, reviewing and improving especially through the utilisation of stakeholder feedback for the continuous improvement of compliance and compliance policy

5. Implementation

- 5.1** Council, through the Audit and Risk Committee, is responsible for the oversight of the University's commitment to compliance through implementation of the University quality cycle.
- 5.2** The University Secretary and Legal Counsel is responsible for the oversight of the compliance program and its operation conducted by the Audit and Risk Unit.
- 5.3** The Director Audit and Risk will work with individual areas to identify compliance obligations. The Director will advise on procedures for ensuring compliance and processes for managing non-compliance.
- 5.4** The management responsibility for the compliance program will be undertaken by the Director Audit and Risk with the provision of a dedicated Risk and Compliance Coordinator.
- 5.5** Audit and Risk Unit in conjunction with the Records Management Office and Legal Office will maintain a central database of all identified laws, regulations, bylaws, codes and other compliance matters with which the University must comply.
- 5.6** Audit and Risk Unit in conjunction with the Organisation Development Unit will provide education and training to staff on general compliance issues.
- 5.7** Heads of operational cost centres and directors of controlled entities will risk assess identified compliance obligations. Identified non-compliance will be reported to the Audit and Risk Unit.
- 5.8** Where Designated Specialist Compliance Officers are identified, they will assist in the audit quality cycle by advising the Audit and Risk Unit on specialist risk related compliance matters.
- 5.9** The Audit and Risk Unit in conjunction with the Legal Office and heads of operational cost centres and directors of controlled entities, will monitor compliance matters for any changes or new requirements. Internal processes will also be monitored to ensure that effective compliance is in place.
- 5.10** The Director Audit and Risk will provide regular reports on the compliance program to the University Secretary and Legal Counsel and the Audit and Risk Committee. The Committee is entitled to request follow-up action on any issues of concern.

Approval signature

Chancellor/Vice-Chancellor

ANNEXURES: (not subject to approval above)

Relevant procedural documents including forms

copies of, or links to, relevant procedural documents, advice or guidelines, and forms, which may be devised by the responsible administering entity.