Australasian College for Emergency Medicine

Policy Framework

FW-933

Document Review

Timeframe for review:	Every five years, or earlier if required
Document authorisation:	Board (3/1)
Document implementation:	Governance Committee
Document maintenance:	Manager, Governance and Risk
Accessibility Type:	Internal Operational Document

Revision History

Version	Date	Pages revised / Brief Explanation of Revision
V1	April-2025	Draft to ELT 6 March 2025 (endorsed) - Draft to Governance Committee 24 March 2025 (endorsed) – Approved by the Board 7 April 2025
V1.1	May-2025	Minor edits – updated Related Documents and Document Hierarchy/Responsibility and Approval Authority table, tier 4, added Coordinators.

Copyright

1. Purpose and Scope

This document is intended to set a broad framework for the development of governing documents including regulations, policies and other procedural related guidance material within the College, and to clarify principles for consistency in the management of these throughout their lifecycle. This framework, and the documents it covers, are applicable to members, trainees and staff of the College and incorporates all decision-making and overseeing entities or individuals. Specifically, the framework is designed to:

1. ensure that a clear and consistent governance and management approach is adopted in the development of all College policy that enables improved compliance with relevant legislative and regulatory requirements;

2. enable efficient and effective decision making, which incorporates quality assurance and risk management practices, where appropriate; and

3. establish clear accountabilities and delegated authorities for individual roles and entities.

2. Terminology

ACEM/the College

means the Australasian College for Emergency Medicine.

College member

means a person admitted as a member of the College pursuant to the provisions of the ACEM Constitution and associated regulations.

Trainee

means an individual enrolled in an ACEM training program and, for the purposes of this policy, undertaking College requirements for the purpose of attaining eligibility for election to Fellowship of the College.

Governing body

means the ACEM Board, the Council of Advocacy, Practice and Partnerships (CAPP), or the Council of Education (COE).

Executive Leadership Team (ELT)

means the Chief Executive Officer (CEO) and senior executive staff, as determined from time to time by the CEO.

College Entities

refers generically to the various types of entity created under the jurisdiction of a governing body, being a: committee; subcommittee; or an ancillary entity. Committees and subcommittees may be either standing or ad hoc.

Council (CAPP/COE) Policies and Procedures

refers to COE (Education and Training [E&T]) policies and procedures, and CAPP (Emergency Medicine [EM]) policies/standards.

Note: The term 'standards' is a collective noun for all outward-facing ACEM policies, guidelines and statements that either:
- outline a direction that ACEM is committed to pursuing with respect to key EM issues, or
- specify best practice actions and procedures relating to an area of EM, or
- set out the opinion of ACEM on an issue impacting on the practice of EM.

Charters

means the operational components of the Board and the two Councils (CAPP and COE).

High/Medium/Low Risk

refers to risk as outlined within the ACEM Risk Management Framework and is applied to ACEM document hierarchy and responsibility.

3. Background

The College Board is empowered by the Australian Securities and Investments Commission (ASIC) Act, the Australian Charities and Not-for-profits Commission (ACNC) Act and works in accordance with the Australian Medical Council (AMC) and the Medical Council of New Zealand (MCNZ), to regulate the College's activities. In establishing a Policy Framework, the Board clarifies and exercises its responsibilities over governance of the organisation.

4. Policy Statement

The Policy Framework is guided by the principles set out in the ASIC and ACNC Acts and describes the hierarchy of governance documentation utilised by the College to oversee its business. At a macro-level, this hierarchy of College documentation can be demonstrated via figure 1 below:
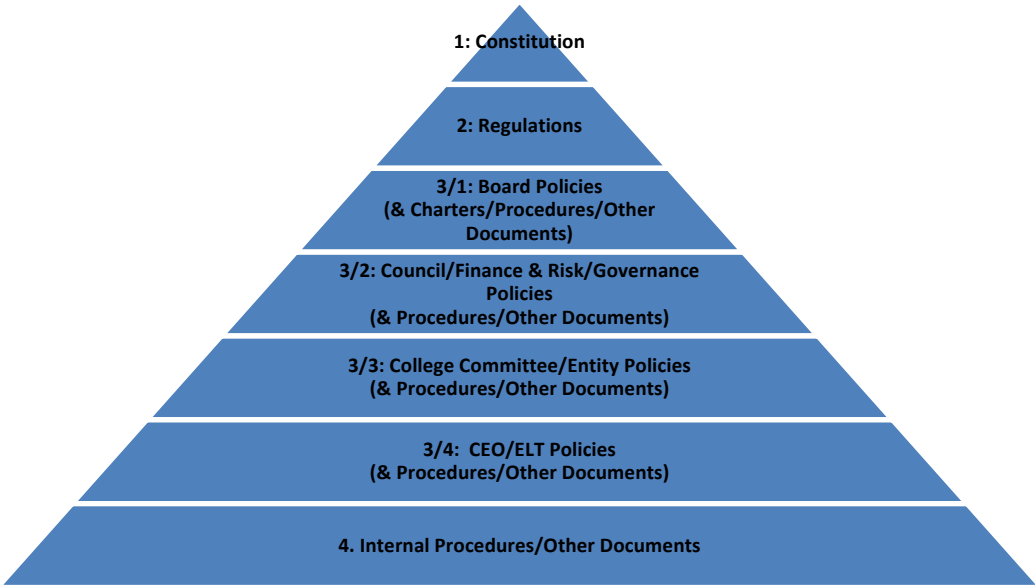

Figure 1: Hierarchy of College governance documentation

Each level of documentation is overseen by, and the responsibility of, entities such as the Board, the Councils, a Committee, the CEO, ELT, an individual, or the College membership more broadly. This relationship can be demonstrated in the table diagram:

Document Hierarchy	Responsibility and Approval Authority
1. Constitution	Board & College Membership
2. Regulations	Board
3/1. Board Policies (high risk) (& Charters/Procedures/Other Documents)	Board
3/2. Council/Finance & Risk/Governance Policies (& Procedures/Other Documents)	Councils: CAPP and/or COE Finance & Risk Committee, Governance Committee
3/3. College Committee/Entity Policies (& Procedures/Other Documents)	Committees/Entities
3/4. CEO/ELT Policies (& Procedures/Other Documents)	CEO/ELT
4. Internal Procedures/Other Documents	Managers/Coordinators

4.1 Constitution

The College's constitution, as the governing document for the ACEM, is a legal instrument outlining how the organisation should operate. It details how the College is structured and governed as well as its main activities. It also explains the roles, responsibilities and powers of the Board, Executive Directors, management and members. It contains the College's agreed processes for the appointment and removal of Executive Directors, the powers and responsibilities of Executive Directors and the procedures for conducting board, general and special meetings.

4.2 Regulations

The College's Regulations are the second tier of governance documents and as such sit below the Constitution in terms of authority. The Regulations are established to assist in the regulation of the organisation in the areas of governance, training programs, recertification, and SIMG assessment, and are approved by the Board.

4.3 Policies

The third tier of governance documentation within the College is policies. Policies exist at several levels within the College including those overseen by:
- the Board (3/1),
- key Councils (includes overseeing outward-facing EM Standards)/Finance and Risk Committee/Governance Committee (3/2),
- Committees/Entities (3/3), and
- the CEO/ELT (3/4)

Principles for policies

1. A policy is a statement of principles or position that is intended to direct decision-making and operations that supports the achievement of the College's vision, strategy and objectives. Policies have a longer-term focus and are applied across the College as a whole. They form the foundation of the College's governance processes.

2. Policies support the achievement of outcomes, address compliance with legislative obligations, and reduce institutional risk by establishing standards and internal controls. The principles outlined in policy are shaped by:
   - the legislation and regulations that govern the College
   - national and international standards and community expectations
   - the vision the College articulates in its strategic plan
   - a commitment to respecting human rights within a free, tolerant and inclusive society

3. The latest approved version of all College policies will be stored and managed on College IT servers. Where the Policy is relevant and required by membership, the most recent version will be available on the College website.

4. Policies are to be reviewed at least every five years; however, some will require more frequent review depending on their nature. The review schedule should be established at the time of development or subsequent revision of that policy.

Policy categories

There are three categories of policy within the Policy Framework:

1. Governing Policy

   Governing policy pertains to strategic positioning or investment, risk management, fiduciary responsibility, legislative and common law compliance. It gives effect to statutory or regulatory requirements and relates to the processes of decision making and the controls and behaviours that support effective accountability and performance outcomes.

2. Council/Committee Policy

COE/E&T policy relates to the core academic business of the College and covers matters of learning, training, assessment, Specialist International Medical Graduates (SIMG), and Continuing Professional Development (CPD). E&T Policy includes but not exclusively selection, assessment, and examinations.

CAPP/EM/Standards Policy (outward facing) relates to advocacy tools to protect and advance the professional interests of members and the discipline of EM in Australia and Aotearoa New Zealand.

3. Operational Policy

Operational policy relates to policy designed to support strategic intent and articulates both operational imperatives and outlines principles for administrative activities.

It is important to note that operational policies may exist at different levels of the hierarchy of College governance documentation. A high-risk governing policy on the other hand is only likely to be within the Board's remit.

4.4   Internal Procedures and Other Documents

The fourth tier of documentation within the College are internal procedures (and other documents), which are managed by individual teams and/or Managers, to support operational policy. Also see Procedures and Other Documents.

4.5   Procedures and Other Documents

The College uses a range of document types at different levels to support the implementation of its Constitution, Regulations and Policies. These include but are not limited to handbooks, manuals, standard operating procedures (SOP), guidelines, etc., but for the purposes of this document, will simply be referred to as procedures. Other supportive documentation includes Terms of Reference, position statements, frameworks, registers, forms, etc.

Principles for procedures

1. Procedures outline the operational steps required to implement policy and should:
   - provide clear instructions on the way policy will be implemented
   - step through the actions required to implement policy principles
   - assign responsibilities
   - enable monitoring of policy implementation

2. Procedures may be further supported by additional operational procedures that relate to a specific area. These operational procedures are maintained by the relevant organisational unit. Guidelines also provide advice which assist in the establishment and implementation of effective practices. Guidelines may be publicly available or limited to distribution within the College, depending on their nature.

3. Procedures are to be reviewed at least every five years, or more frequently as required.

5.   Approval Authorities

As outlined in table 1, authority and responsibility for review and approval of College documentation occurs at various levels. Whilst the Board has ultimate responsibility for the College's outcomes, in practice this is achieved through the delegation to other College entities and personnel. A clearly articulated and widely understood policy and approval decision framework allows for the business of the College to be managed in a timely manner, whilst maintaining oversight of key decisions.

6. Review Schedules

All College documentation covered under this Policy Framework, including the Framework itself, will be reviewed in line with published timeframes. The maximum timeframe for the completion of a review is five years, however documents can be reviewed earlier if required. If a minor edit is required, the version is to be updated to a point system (i.e. V5 updated to V5.1, V5.2 etc.). However, a minor update will have no effect on the next review date, which is calculated from the date of the most recent major review. A review schedule is recommended to ensure that the Board or Committee can conduct a thorough review of the relevant documentation in a staggered approach across a calendar year. See Related Documents.

7. Related Documents

Doc #	Document Name
To be developed	ACEM Departmental Documentation Registers
To be developed	Policy Development and Review
IG-628	Information Governance Framework