

# **Compliance Policy**

#### 1. PURPOSE

To support the University to achieve its <u>compliance</u> risk objectives by maintaining a responsive and accountable compliance framework that enables the University activities to be conducted in accordance with legal and internal policy requirements.

#### 2. POLICY STATEMENT

- 2.1. The University will adopt and embed a positive compliance culture with control systems to produce behavioural norms that create effective compliance outcomes.
- 2.2. Evidence of a positive compliance culture includes the following expected behaviours:
  - (a) **Tone from the top:** the <u>University community</u> will act ethically and with integrity. Behaviours that create and support compliance will be encouraged and behaviours that compromise compliance will be unacceptable.
  - (b) Continuous disclosure: bad news (concerns) and good news (opportunities) will be communicated on time to the relevant persons. Council and managers will encourage proactive reporting of compliance concerns to the relevant persons. Council and managers will listen to and respond to concerns and opportunities, and understand the costs and impacts of inaction.
  - (c) **Embedded positive compliance culture:** Ownership and nature of compliance obligations and risks is understood by the University community and as well as consequences for disregarding these compliance obligations. Executive Managers, Risk, Compliance and Audit, and Compliance Officers will assist the University community in understanding its compliance obligations.
- 2.3. The University's Compliance Framework will be aligned with its strategic objectives and risk appetite, and will be based on principles contained within <a href="ISO37301:2021 Compliance Management Systems">ISO37301:2021 Compliance Management Systems</a>.
- 2.4. Members of the University community who breach compliance obligations or fail to participate in compliance training or other compliance programs may be subject to applicable penalties, disciplinary action or both.

## 2.5 Role of Council

Council is responsible for actively demonstrating a commitment to a compliance culture, the Compliance Framework and an effective compliance program.

Council has delegated the responsibility for monitoring systems of internal control, risk management and legal compliance to the Audit, Risk and Compliance Committee and will receive adequate and appropriate reporting on compliance from the Audit, Risk and Compliance Committee and through the Vice-Chancellor.

## 3. RESPONSIBILITY FOR IMPLEMENTATION AND COMPLIANCE MONITORING

## 3.1. Audit, Risk and Compliance Committee

The Audit, Risk and Compliance Committee assists the Council in the discharge of its responsibilities by reviewing the effectiveness of the University's systems and processes for ensuring compliance with laws, regulations and internal policies, and monitoring the results of management's investigation and follow-up of any instances of non-compliance.

## 3.2. Committees of Council

The Committees of Council will actively demonstrate a commitment to a compliance culture.

### 3.3 Vice-Chancellor

The Vice-Chancellor is responsible to Council for the management of the University's compliance obligations.

The Vice-Chancellor will actively demonstrate a commitment to a compliance culture and is responsible for ensuring that the University's commitment to compliance is realised. Through his/her actions and decisions, the Vice-Chancellor will demonstrate to staff, students and the community that the University takes its compliance obligations seriously and that appropriate corrective action will be taken to deal with incidents of non-compliance or potential breaches.

The Vice-Chancellor has delegated elements of this responsibility to Executive Managers, Heads of Department/Organisational Area and a number of other key senior staff, including those in Risk, Compliance and Audit.

**3.4.** The *Compliance Procedures* contain details of the responsibilities for Executive Managers, students and staff.

#### 4. SCOPE OF POLICY

This policy applies to all members of the University community (which includes Council members, students, staff, University Associates, Curtin controlled entities, and all persons participating in University business or activities, including whether as a visitor, adjunct appointee, service provider, or contractor).

This policy applies to the legislative obligations and Policy Framework of the University.

If there is any outsourcing or contracting out of the University's activities, due diligence is required to ensure that the University's standards and commitment to compliance is not compromised.

#### 5. **DEFINITIONS**

(Note: Commonly defined terms are located in the <u>Curtin Common Definitions</u>. Any defined terms below are specific to this document)

## Compliance

Adhering to the requirements of the University's policies and procedures, laws, industry and organisational standards and codes, principles of good governance and accepted community and ethical standards (including ISO 37301:2021 Compliance Management Systems) in the context of the University's risk appetite.

### **University community**

University community includes Council members, students, staff, University Associates, Curtin controlled entities, and all persons participating in University business or activities, including whether as a visitor, adjunct appointee, service provider, or contractor.

#### 6. SUPPORTING PROCEDURES

Compliance Procedures

## 7. RELATED DOCUMENTS/LINKS

Policy Development Procedures

Risk Management Policy

Strategic Planning Policy and Procedures

ISO37301:2021 Compliance Management Systems

Voluntary Code of Best Practices for the Governance of Australian Universities

**Curtin Corporate Governance Framework** 

Corporate Governance Statement

Policy Compliance Officer	Andrew Wait, Director, Risk Compliance & Audit	
Policy Manager	Chief Operating Officer	
Approval Authority	Council	
Review Date	1st April 2025	

# **REVISION HISTORY**

Version	Approved/ Amended/ Rescinded	Date	Committee / Board / Executive Manager	Approval / Resolution Number	Key Changes and Notes
New	Approved	13/02/2013	Council	C 03/13	Attachment 2 to Confidential Document No 00089/13 (Council approved new policy as per new Policy Framework, formerly Compliance Policy and Procedures) effective 27 February 2013
	Administratively Updated	11/02/2015	Director, Legal and Compliance Services		Standards Updated
	Administratively Updated	18/08/2015	Director, Legal and Compliance Services		Links Updated
	Administratively Updated	06/10/2015	Director, Legal and Compliance Services	EC 76/15	Executive Manager Title Changes
	Noted	22/10/2019	Audit, Risk and Compliance Committee	ARRC 52/19	Reviewed no changes required (Attachment A to Item 7.1 Compliance Composite Report.) Also, noted at PMC 17/09/2019 (PMC 62/19)