



**Policy GP-001 Establishment and Framework of Governance Policy and Administrative Directives**

<b>Governance Policy GP-001</b>	<b>Section: Corporate Administration</b>
<b>Issue Date: November 21, 2023</b>	<b>Approval Date: January 24, 2024</b>
<b>Review Date:</b>	<b>Initiating Department: Clerk’s</b>

**Purpose:**

To establish the scope of powers and duties of Council and staff in establishing Governance Policy and Administrative Directives.

This policy will provide a basis for sound decision making and will ensure that policies are implemented in a consistent way. The policy will be a reference and information source for council, staff and the public.

The policy will:

- a) Define roles, responsibility, transparency and accountability;
- b) Implement compliance and consistency;
- c) Provide a Framework for the approval process of both Governance Policy and Administrative Directives

The efficient management of the County, together with the need to respond effectively to unexpected and / or time sensitive situations, as well as, daily administrative process, this policy entrusts staff certain authority and duties while maintaining accountability and transparency.

**Scope**

This Governance Policy and Administrative Directive Framework applies to all members of the County organization, including members of Council, full and part-time employees and contract staff. This document applies to all members of local boards and committees of Council as well as volunteers that engage in the process of creating, reviewing or amending a Governance Policy.

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This Framework will encourage consistency, control, clarity and quality in the development, approval and review process associated with such and a maintenance process that will ensure all policies and directives remain current and relevant to the County's strategic direction and all legislative requirements.

Governance Policy:	Has or is driven by an external focus, with financial or legal implications or guides Council's decision, provide direction over and above identified items within the Strategic Plan, are based on legislative responsibilities and / or relate to service delivery. Governance Policies are approved by Council resolution and may be included in a By-law adopted by Council.
Administrative Directive:	Has focus on internal policies and practices and are designed to promote consistent business practices, improve organization communication, reduce risk and exposure and provide for necessary internal controls over resources and business transactions. Administrative Directives do not guide Council's decisions based on the definition of Governance Policy. Administrative Directives are approved by the Senior Leadership Team.
Corporate Programs/Procedures <sup>1</sup> :	Supplement document to Governance Policy and Administrative Directives, designed to document methods and related actions. Corporate Procedures are approved by the Senior Leadership Team.
Departmental Programs/Procedures <sup>2</sup> :	Has focus on specific and/or relevance to internal corporate activity, also known as Standard Operating Procedures (SOP). Departmental Procedures are approved by the appropriate department head.

## Standards and Procedures

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<sup>1</sup> Included for reference only

<sup>2</sup> Included for reference only

## **Policy GP-001**

All Governance Policies and Administrative Directives shall be subject to the following review process:

- Key Stakeholders (development and review)
- Senior Leadership Team
- Council\* (Governance Policy only)

\*Note: all new Administrative Directives developed will be provided to Council for information only. Comments regarding specific Administrative Directives will be received through the Clerk's Department for discussion with the Senior Leadership Team.

### **Stages of Policy / Directive Development**

All new, revised and recommended repealing of all policies and directives must begin with consultation with the Clerk's Office. All documents are under the ownership of Norfolk County, with all original documents under the care and control of the Clerk's Office.

- (i) Needs identification: includes describing the issue to be addressed, seeking authority to proceed, and selection of the appropriate policy level based on measurable achievement of the Strategic Plan or any applicable Legislation.
- (ii) Policy / Directive development: includes the identification of appropriate stakeholders, consultation / community engagement where applicable, gathering relevant information, draft policy / directive document using the prescribed template and incorporating feedback.
- (iii) Policy / Directive Considerations and Approvals: includes notifying the appropriate stakeholders of the requirement to review the document, presenting said document for endorsement and submitting the documentation for consideration and approval at the identified level.
- (iv) Policy / Directive Implementation: the final stage of the development process. It is ongoing and includes such activities as activating the document, notification, distribution, awareness and education.
- (v) Policy / Directive Review: schedule for ongoing document review. During the drafting stages, consideration will be given to outline appropriate timelines for review. The review date will be incorporated into the document and the review schedule will commence once implementation has been occurred. The review will be initiated by the Clerk's Office; with the identified department taking the lead on the review process.

### **Compliance**

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Policies and Directives must comply with all relevant legislation and / or other relevant municipal governance documents (i.e. Municipal Act, 2001, Occupational Health and Safety Act, The Planning Act, County By-laws, Council resolutions, and / or the Strategic Plan)

### Consistency

Terminology used in the Policy / Directive documents shall reflect the terminology used in any related legislation. Staff must ensure compliance with the County of Norfolk Guidelines, Standards and A.O.D.A. manual. Use of the prescribed templates will ensure consistency of format, content and process. Review of all terminology used will be the responsibility of the Clerk's Office prior to the release of said documents for the approval process.

### Format

Documents should include all or some of the following sections as appropriate and may include other sections as appropriate:

- (i) Purpose
- (ii) Scope
- (iii) Definitions
- (iv) Standards and Procedures
- (v) Responsibilities
- (vi) Communication
- (vii) Evaluation
- (viii) Legislative Reporting Requirements

### Clarity

There are two aspects relating to transparency in the development of Policy and Directive documents. They are:

- (i) **Clarity of Writing:** all documents will contain plain, clear, concise wording, allowing for a wide range of users to understand the content. Where legislated or otherwise prescribed terminology is used, a clear description of the terminology should be contained in the Definitions section of the document to allow cross-referencing and comprehension.

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- (ii) **Clarity of Approval:** all documents shall clearly state where responsibility for final approval lies and when approval was formally given and when the document is due for review.

Staff shall ensure that compliance with A.O.D.A. standards are met.

The Clerk's Office may approve minor updates that do not change the original intent of the Policy / Directive document. (i.e. title changes, department name changes, grammar, spelling, document numbering etc.)

If a Governance Policy or Administrative Directive has an associated procedure, that procedure shall be attached as an appendix for information and cross reference. Development of internal procedural documents are not subject to the provisions of set out through this policy.

### **Responsibilities**

Council is responsible for the development and evaluation of Governance Policies of Norfolk County. Ensuring that all policies, practices and procedures are in place to allow for the implementation of Council decisions and direction. Council is responsible for the approval of all Governance Policy.

The Senior Leadership Team is responsible for the consideration and approval of all Administrative Directives and has the authority to approve amendments to those directives.

All staff will ensure that they consult with other affected departments and, if necessary, obtain legal advice as part of the document development process.

All Council members, Board and Committee members, volunteers and staff are responsible for being knowledgeable of, and act in accordance with Governance Policy and Administrative Directives, where applicable.

The Deputy County Clerk is responsible for administration and coordination of the program, establishing templates and guidelines to assist staff in policy development, providing consulting and guidance.

All parties are responsible for reading, understanding and asking questions to clarify which document development should be followed.

All levels of approval for both Governance Policy and Administrative Directives are dictated by compliance level.

Governance Policy development will be initiated when any of the following matters activate the need:

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- (i) Has or is driven by an external focus with financial or legal implications or guide Council decision;
- (ii) Legislative requirements that the County is required to develop a policy;
- (iii) Relative to service delivery levels;
- (iv) Significant liabilities to the County;
- (v) Significant matters affecting constituents and / or the tax rates;
- (vi) Public transparency and accountability;
- (vii) Strategic direction over and above items identified in the Corporate Strategic Plan

All Governance Policy will be approved at the Council level.

Administrative Directives development will be initiated when any of the following matters activate the need:

- (i) Has staff authority by virtue of office;
- (ii) Has focus on internal programs, procedures and practices and are designed to promote consistent business practices;
- (iii) Improve organizational communication;
- (iv) Reduction of risk and exposure;
- (v) Provide for necessary internal controls;
- (vi) Implementation of Council direction;
- (vii) Matters that do not fall under the scope of Governance Policy;
- (viii) General regulation and administrative management of the County, including but not limited to legislative requirements.

Administrative Directives do not guide Council's decisions based of the definition of Governance Policy and are approved by the Senior Leadership Team.

### **Communication**

All Governance Policy and Administrative Directives will be made available to all Council members, staff and the general public to encourage accountability and transparency. All documents will be made available in accessible formats as requested.

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This policy shall be provided to all Members of Council with each new term of Council.

### **Legislative Reporting Requirements**

All Governance Policy and Administrative Directives will be reported to the associated Legislative Authority as required.

All Governance Policy and Administrative Directives will be in compliance with related legislation.