



Policy Type	<input checked="" type="checkbox"/> New Policy <input type="checkbox"/> Revision
Policy Number	<a href="#">01.1.01</a>
Policy Category	Policy Governance
Effective Date	07/31/2015
Last Update	07/28/2015

## Policy Development & Approval Policy

---

### Type

---

**Institution-Level (relates to structure and infrastructure of the organization)**

### Rationale

---

The policy establishes a process for 1) developing, reviewing, approving, promulgating and maintaining new Baylor College of Medicine (BCM) policies; 2) formalizing and publicizing existing BCM policies among members of the BCM community; 3) documenting formulae for periodic review, update and training of relevant parties on new and existing BCM policies; 4) describing entities responsible for regular examination of BCM policies; 5) describing entities responsible for implementation and administration of policy content; 6) approving policies by standard procedure, as well as establishing a limited exception to the standard procedure described herein.

In satisfaction of these objectives, this policy illustrates the distinction between the policy-making functions of the Board of Trustees and the responsibilities of the administration and faculty to administer and implement policy. This distinction demonstrates BCM’s commitment to faculty engagement in policy governance of both academic and administrative matters and ensures faculty exert a strong, consistent voice in all governance matters and take an active, meaningful role in policy administration. The collaboration between the Board of Trustees, administration and faculty emphasizes BCM’s engagement in ongoing, integrated and institution-wide research-based planning and evaluation processes, utilizing key personnel across the institution to evaluate mission impact and alignment of proposed policies in the interest of achieving maximum institutional effectiveness.

Lastly, this policy also provides notice to all stakeholders that policies developed and promulgated without adhering to the parameters and processes described in this document are not eligible for consideration by the approval authority. Rogue policies cannot take effect due to significant and unreasonable risks posed to the accuracy of content and reliability of due diligence measures undertaken prior to review and approval.

### Stakeholders Affected by this Policy

---

Stakeholders who must comply with this policy include any individual, student, faculty member, administrator, staff member, group or committee that participates in developing, revising or sponsoring a BCM policy.

### Definitions

---

#### Concepts

**Academic Policy.** Policies in this category pertain to academic, instructional or student activities at various levels. All academic policies must be reviewed and approved through the procedures described in this policy. Academic policies are always reviewed by the Institutional Policy Committee (IPC) prior to formal review by the Office of the General Counsel, and may also require formal review or approval by the Faculty Senate and/or Academic Council prior to ratification by the appropriate Approval Authority. Academic affairs and school-level policies are specific types of academic policies.

- i. **Academic Affairs.** Academic affairs policies may pertain to faculty administration, instruction or student activities in constituent degree-granting programs within BCM, and apply broadly to faculty and student populations therein. Affairs-level policy is generally subject to ratification by school Deans, the Provost or the Office of the President and Executive Dean, and impacts activities at two or more schools at BCM. Consequently academic affairs-level policy subject-matter includes but is not limited to:
  1. **General Academic Affairs**, such as academic program issues, curriculum, admissions, graduation and advancement issues;
  2. **Faculty Affairs**, such as promotions, appointments, grievances, evaluations, and academic freedom concerns;
  3. **Student Affairs**, such as student services, complaints, evaluations, financial aid.
- ii. **School-Level.** School-level policies may apply to one or more academic programs within a BCM school, and only apply to the students enrolled in that school's programs. Typically these policies are fundamental to the achievement of the academic program's mission, and may address program infrastructure, milestones for achievement, or rules regarding status and responsibility applicable to educators and learners. School-level policies typically take effect after ratification by the Provost and/or Dean of the school affected by the policy.

**Administrative Policy.** Administrative policies typically establish non-academic operational rules and promote organizational efficiencies or compliance with applicable laws, and tend to apply broadly to members of the BCM community. Administrative policies are always reviewed by the IPC prior to formal review by the Office of the General Counsel, in addition to review by the Offices of Risk Management and/or Compliance if applicable. IPC approval of administrative policy is subject to ratification by the appropriate Approval Authority, which is the Office of the President or the Board of Trustees. Institutional and functional-unit policies are specific types of administrative policies.

- i. **Institutional.** Policies in this category are distinguishable by their ubiquity: non-compliance poses legal or other risks to the continued existence, prestige, integrity, safety, accreditation, and/or ethics of BCM operations and/or status as a health sciences university. Institution-level policies vary in scope but typically pertain to physical structures, property, infrastructure and/or non-academic operations of the university. Consequently, institution-level policies may require compliance by the Board of Trustees, senior leadership, administrators, employees and/or invitees in order to be effective. For example, some institutional policies might apply to individuals or groups in multiple divisions or colleges, while others apply at large to all faculty, staff, students, and/or visitors. All institution-level policies must be reviewed and approved through the processes described in this policy.
- ii. **Functional-Unit.** Functional-unit level policies are typically focused-inward, applying narrowly to the operations of an individual unit or department (i.e. clinical services), or to specific audiences such as staff in specific operational roles (i.e. supervisors). Functional units are delegated the authority to author, implement and manage these policies and their associated procedures, subject to the approval of Executive Leadership. All functional-unit level policies must be reviewed and approved through the processes described in this policy.

**Authoritative Version.** The authoritative version of a governance policy is 1) formally approved by the appropriate authority, and 2) published in the Policies & Procedures Library on the BCM intranet website, or 3) made accessible on the website of the primary responsible office and/or appropriate handbook. For the purposes of this policy, the authoritative version may be alternatively referred to as "authoritative policy."

**BCM Policy.** A collective reference encompassing all governance policy types, whether administrative or academic in nature.

**Policy.** Writing intended to guide actions and assist in the conduct of BCM affairs. Characteristically, a policy...

- Reflects a governing principle that mandates or constrains action,

- Has a stakeholder application,
- Changes infrequently, setting a course for the foreseeable future,
- References but does not delineate how to implement the mandated or constrained action
- Helps ensure compliance with applicable laws and regulations,
- Reduces institutional risk, and
- Is approved at executive levels of the university (president, provost, vice presidents, or deans), with the understanding that all such institutional governance writings must ultimately be approved by the Board of Trustees.

**Procedure.** A procedure describes how to implement a policy and its directives.

**Rogue Policy.** A policy that is created after the effective date of this policy, developed and/or disseminated without adhering to the governance parameters and process established herein. Rogue policies do not require stakeholder compliance, and shall be removed from any and all websites, handbooks and other stakeholder communication vessels upon discovery.

**Substantive Change.** A substantive change is a significant modification to the content or scope of a policy document.

Examples of substantive changes to a policy might include: the addition of considerable stakeholder fees (where no fee was included in a prior draft); expansion of the class or number of stakeholders whose compliance is mandatory; alterations to procedure, if included in the policy itself; addition of responsible offices and/or associated duties; heightened accountability for Responsible Office(s) and/or noncompliant Stakeholders. Examples of non-substantive changes include: reformatting policy content for clarity while making minor changes to content (if any); title or room number changes; modification of fee schedules; rephrasing, where the meaning or impact of the clause is not altered; removal of words or sentences that expose BCM to legal or other appreciable risks without fundamental alteration of the policy's purpose or impact; addition of wording that reduces/eliminates legal or other appreciable risks.

### **Active Participants in Governance**

**Approval Authority.** An office formally charged with policy approval and governance oversight, as stated in relevant sections of BCM bylaws, faculty bylaws or standing committee charters.

**Note** - While the ultimate Approval Authority is the Board of Trustees, other approval authorities include the Office of the President/Executive Dean, Office of the Provost and Academic Deans. The Approval Authority varies by policy category. The Approval Authority receives the advice and consent of designated faculty, staff, students and/or senior leadership on BCM policies, but has the institutional authority and responsibility to give effect to new and revised versions of policies. Because BCM bylaws state that the Board of Trustees has vested legal authority and responsibility to "regulate and manage the affairs of the corporation," the Board is the appropriate entity to promulgate BCM policies consistent with the mission and fiscal plan for stability. This governance framework clearly distinguishes the obligation of the Board to ratify or "make" policy from the obligations of administration and faculty to provide input, manage and implement policy. Consistent with this framework, some policies may also require approval from executive leadership prior to review by the Board of Trustees. Consequently, policies that lie solely within the realm of academic affairs and apply across multiple BCM schools require approval from the Provost; policies that reside solely in one school require approval from the school's dean. In special cases where policy matters are fundamentally academic (e.g. admissions) or administrative (e.g. risk management) in nature, standing committees of the faculty and/or ad-hoc committees of functional-units have been delegated the authority to draft, review and implement policy subject to the discretion of and/or ratification by the requisite governing body or approval authority. While approval authorities are not permitted to unilaterally modify or eliminate content from a policy under review, approval authorities have the discretion to delay policy approval until any expressed concerns about the subject-matter are addressed.

**Gatekeeper.** A gatekeeper is a deliberative body composed of faculty and/or staff that may be authorized to evaluate the sufficiency of policy content, procedures, short and long-term effects of implementation, and/or consequences of management. Gatekeepers control the policy development process, and are ultimately

responsible for the advancement of policies, forwarding only those policies that meet gatekeeper-defined standards to the next phase of the governance process.

**Mission Leader.** The Mission Leader oversees a functional-unit's internal policies and/or procedures in the interests of consistency, communication and coordination with BCM Policies and applicable laws.

Note - The individual, committee or department serving as Mission Leader will vary based on which functional-unit requires the policy's development. For example, if a policy is related to activity in the Office of Research, the Mission Leader would be Research Oversight Administration Support, which would review, sign-off and then return the policy draft back to the Policy Officer after formal approval to enter Phase 3.

**Policy Officer.** The Director of Policy Governance is the "Policy Officer."

**Policy Sponsors.** Policy sponsors may be a member of the BCM community, groups of BCM community members, standing committees of the faculty, or institutional committees such as the IPC (defined below) that are either 1) authorized to act by virtue of position, bylaws or charters, 2) formally appointed and charged, or 3) self-designated to develop a policy proposal and present it to the Director of Policy Governance for review and placement on the Institutional Policy Committee agenda.

Note - Characteristic of the university's values of respect and teamwork, any interested party or group may initiate the development of new policies or updates to existing policies. This flexibility enables quick and effective communication from members of the BCM community to administration, and streamlines efficient response to emerging governance needs.

**Responsible Office(s) & Primary Responsible Office.** Responsible offices are the entities charged with supervision, implementation and/or maintenance of a policy and/or related procedures. In cases where a policy requires multiple responsible offices, one of these will be designated as the primary responsible office to 1) assume leadership of procedural actions necessary for policy implementation, including but not limited to development of internal procedures; 2) serve as primary contact for questions related to the policy; 3) supervise stakeholder compliance and/or coordinate compliance with other responsible offices; and 4) raise concerns regarding practicability of existing policy where unforeseen contingencies arise, and advocate for revision as needed.

**Stakeholders.** Stakeholders are 1) individuals or groups affected by a proposed policy and/or its related procedures, 2) academic units or administrative offices responsible for implementing the proposed policy, or 3) individuals in similar positions or categories across the institution who must abide by the provisions of the proposed policy. Depending on the subject-matter, a stakeholder may be a policy sponsor and a responsible office simultaneously.

## **Governing Bodies**

**Institutional Policy Committee.** The Institutional Policy Committee (IPC), an institutional committee of BCM appointed by the President and Executive Dean, is the governing body responsible for preliminary review and approval of all governance documents solemnizing BCM Policy, and serves as the primary gatekeeper to the governance process. Moreover, the IPC ensures that the Board of Trustees and senior leadership consistently incorporate the voices of faculty, staff and students in the governance process, especially with regard to decision-making and development of policy content. The IPC is always active during Phase 1 of the Governance Process (refer to Standard Procedure for Policy Development and Approval, under Tools).

Note - The IPC provides input to the Office of the General Counsel regarding classification, clarity, compliance roles, supervision responsibilities, resolution of ambiguity, consultation with subject-matter experts, institutional impact to stakeholders, and approves documents to enter Phase 2 of the policy governance process.

**Academic Council & Faculty Senate.** The Academic Council (AC) and Faculty Senate (FS) are the governing bodies empowered by the President to develop and/or enact academic policies subject to ratification by the Board of Trustees. Consequently, they are responsible for formal review and approval of certain academic policies, as well as institution-level policies impacting the academic mission and/or educational character of BCM. While the IPC is active during Phase 1, the AC and FS are active during Phase 2 of the policy governance process, but only if the policy under review is academic or institution-level in nature. As gatekeepers to approval, the AC and FS provide leadership input to the President on education mission alignment, impact to faculty and/or students, as well as the BCM's commitment to diversity where applicable, and formally approves policies to enter Phase 3.

Note - The AC is the governing body responsible for evaluating faculty affairs policies according to its charter and the Faculty Bylaws, in the interests of maintaining a culture of excellence that fosters clear communication, scholarly achievement, innovation, ethical behavior and high productivity among BCM educators.

Note - The FS is a governing body with authority to evaluate general academic and student affairs policies according to its constitution and charter, in the interests of achieving academic excellence, consistency and fairness.

## Policy

---

### I. Policy Development and Approval.

- a. **Governance Principles.** This policy establishes a framework to ensure that BCM governance policies are not only readily accessible to the BCM community, but also well-developed, comprehensible, supportive of the BCM mission, contain clear guidelines for stakeholder compliance, and achieve accountability by identifying responsible persons and/or offices tasked with supervision. All BCM governance policies shall be:
  - i. Presented in a common format utilizing the [BCM Policy Template](#),
  - ii. Formally approved through the processes described herein,
  - iii. Maintained in a central location accessible to stakeholders,
  - iv. Linked to procedures for implementing the policy where appropriate, and
  - v. Kept current within an organized system for periodic review and update.
- b. **Policy Governance Process: Four Phases.** There are four consecutive phases of the Standard Procedure for BCM Policy Development and Approval: 1) Development, 2) Formal Review, 3) Approval and 4) Management. These phases are described in depth under "Procedures." Roles and responsibilities of seminal actors vary by phase. Policies are clearly distinguishable by category, and will progress through each phase according to the procedure described for each category defined herein. While every effort will be made to produce a complete and accurate draft during Development (Phase 1), due to the complex trajectory of the governance process, editing may occur during later phases, resulting in multiple document versions. This Policy requires each party engaged in the governance process to review and approve the same version of a given policy. Thus, whenever a policy draft approved by a body subsequently undergoes a "substantive change," it becomes an alternate "version" of the former draft and must be sent back to that body for review and approval. Non-substantive policy modifications made during Phase 2 or 3 do not result in the creation of an alternate policy version, and therefore shall not be resubmitted to the Phase 1 governing body (the Institutional Policy Committee), whose approval remains valid.
- c. **Policy Index: Numbering.** Authoritative versions of BCM policies will be published and indexed on the governance intranet website (<http://intranet.bcm.edu/index.cfm?fuseaction=Policies.main>) according to a three-part numerical code. The code's first part identifies the major organizational area covered, the second part identifies the sub-division within the major organizational area, and the last part identifies the policy within the sub-division. The Policy Officer will be responsible for determining, labeling and verifying the correct numerical code for new and existing policies.

- d. **Policy Format & Content.** Formatting and content principles provided by the [BCM Policy Template](#) are intended to guide and standardize document preparation by policy sponsors. As of the effective date of this policy, all BCM policies will conform to this standard format. **At a minimum, Policy Sponsor submissions must address the following template sections:** *Title, Category, Rationale; Stakeholders Affected by this Policy; Policy; Responsibilities; Stakeholder Compliance, and Policy Background. If applicable, Policy Sponsors should also address the Definitions, Procedures for Implementation & Review, Tools, Related Policies, and Applicable Laws, Regulations & Standards sections of the template.* Please consult the Procedures section of this Policy for detailed instructions.
- II. **Scope.** This policy applies to all BCM policies developed and approved after the effective date of this policy, and establishes rules of policy creation, revision, approval, management and training essential for effective policy governance of BCM's constituent schools, faculty, staff and students. Nevertheless, accredited BCM schools and programs and functional-units (i.e. Office of Research) may independently propose, refine, update and "self-approve" procedures, guidelines or protocols to guide customary internal management functions with very narrow, specific and limited applications within the unit or school itself. Approval of such limited, internal procedures, etc., shall occur pursuant to existing school, program, or unit policy for development and approval of the same, provided that corresponding policies undergo the Expedited Procedure for BCM Policy Development and Approval (as described under "Procedures") and are consistent with other BCM policies promulgated according to this policy. Moreover, policies applicable to the internal operations of a school, program, functional-unit, center or department shall not conflict with BCM-wide governance policies, but they may be more restrictive.
- III. **Stakeholders & Expectations for Compliance.** Compliance with this policy is mandatory for any individual, group or committee participating in the authorship, update, approval or distribution of a new or revised BCM policy.

## Compliance: Roles & Responsibilities

---

**Policy Sponsor Responsibilities.** The Policy Sponsor acts as a catalyst for governance change, and is strongly encouraged to engage subject-matter experts as well as stakeholders impacted by the policy during Phase 1 in order to surmount potentially significant latent concerns. The Sponsor is responsible for ensuring all content and format requirements have been met, and that the document is complete and accurate before submitting a draft to the Policy Officer. It should therefore be noted that a policy in development is not considered "complete" unless appropriate and impacted individuals, offices, departments and/or divisions are involved in its genesis.

**Specific Consequences for Non-Compliant Stakeholders.** Rogue policies are not eligible for approval by an approval authority, and cannot take effect due to significant and unreasonable risks posed to both the accuracy of content and reliability of due diligence measures undertaken prior to review and approval. Thus, rogue policies are null and void. Rogue policies do not require stakeholder compliance, and shall be removed from any and all websites, handbooks and other stakeholder communication vessels upon discovery.

Any BCM community members with knowledge of a rogue policy should bring it to the attention of the Policy Officer immediately, who will work with BCM Communications to remove the policy from any websites, and attempt to identify and contact the Policy Sponsor in order to bring the document into the governance process.

**Responsible Office.** Although the Office of General Counsel is responsible for the posting of all BCM policies and notifying affected personnel, the Office shall rely on the Institutional Policy Committee (IPC) to determine whether a BCM policy is academic, functional-unit, institutional or school related. In addition, this policy emphasizes BCM's commitment to excellence in governance by appointing a Director of Policy Governance (hereafter "Policy Officer"). The Policy Officer is responsible for using a dedicated set of resources to carry out policy-related responsibilities while serving as a resource for policy sponsors, stakeholders, responsible offices

and executive leadership; serving as a facilitator and *ex officio* member of the IPC, and; serving as a steward that reports to the General Counsel. In order to maximize the institutional value of policies approved and promulgated under this policy, the Office of the General Counsel relies on the IPC for initial review and approval of new and revised BCM policies. Consult the [Institutional Policy Committee Charter](#), as well as the “Definitions” and “Procedures” sections of this Policy for more detailed information on IPC policy governance responsibilities and mechanisms for action.

## Procedures for Implementation and Review

---

This procedure is integral to policy effectiveness because it establishes a system whereby the Office of the General Counsel can engage faculty, staff, student and executive voices throughout the governance process in the interest of creating policy documents that safeguard consistent, lawful and productive university operations. Unless a policy qualifies for the Expedited Procedure for BCM Policy Development & Approval, it must navigate through each of the four consecutive phases of the Standard Procedure, described below.

### **Standard Procedure for BCM Policy Development & Approval**

- I. **Phase 1: Development of Policy.** BCM Policy will be developed, revised and refined under the direction of the Office of General Counsel, which shall appoint a Policy Officer to oversee the development process. Participants in the Development Phase include the Policy Sponsor, Policy Officer, and the Institutional Policy Committee (IPC). Generally, Policy Sponsors work cooperatively with subject-matter experts and other interested constituents to draft a policy, and then submit a completed version to the Policy Officer for inspection and consultation. After due diligence is completed, the Policy Officer forwards the draft to the IPC for review.
  - a. **Submission of Policy Draft: Format & Content.** - The Policy Sponsor is responsible for ensuring all content and format requirements have been met and that the policy document is complete and accurate before submitting a draft to the Policy Officer. Note - Sponsor-directed submission of policy documents to the IPC and/or Approval Authorities is not permitted.
    - i. **Proper use of the template** requires that Policy Sponsors enter subject matter in each of the following categories according to these rules:
      1. **Title.** The title must clearly state the policy’s topic or specify subject-matter.
      2. **Category.** A policy category must be selected from the template’s drop-down menu.
      3. **Rationale.** This section shall briefly state the justification for the policy, which necessarily includes the policy’s purpose as well as a brief statement of risk(s) to BCM in the event of non-compliance (e.g. risk of lawsuit, loss of accreditation, potential HIPAA or EEOC violations, unsafe work environment). Regarding the policy’s purpose, sponsors should relay antecedents that highlight the need for the policy or circumstances precipitating its development.
      4. **Stakeholders Affected by this Policy.** This section must clearly identify and describe any individuals and/or groups who must notified of and comply with this policy.
      5. **Policy.** This section contains the policy language itself, which necessarily includes: (1) a description of principles intended to guide the actions of individuals or conduct of BCM affairs, (2) scope of the policy’s application, and (3) a statement mandating stakeholder compliance.
      6. **Responsibilities.** This section must identify the Responsible Office(s) and/or persons charged with supervision, implementation or maintenance of the policy and/or related procedures. If more than one person/office is responsible for implementation or management, Policy Sponsors should list all offices and designate one as the “Primary



Responsible Office.” This section should also describe the policy execution and management obligations of Responsible Office(s) and/or person(s), including but not limited to: general responsibilities, specific tasks, schedule for routine review and update of the policy.

7. Stakeholder Compliance. This section must describe stakeholder responsibilities for collecting, using, executing and/or applying the policy subject matter, as well as specific consequences of non-compliance including but not limited to: criminal or civil liability at the local, state and/or federal levels; accreditation or licensing consequences; loss of BCM student, employee or invitee privileges; interference with property or bodily integrity.
8. Policy Background. This section must clearly identify policy sponsor(s), any subject-matter experts consulted or involved in authorship as well as their area of expertise and contact information, and the Approval Authority.

ii. ***If applicable, Policy Sponsors should also address*** other sections of the template in the following manner:

1. Definitions. This section contains definitions of any term(s) of art, jargon specific to the Policy Sponsor or Responsible Office, as well as any terms that might be misunderstood by a layperson.
2. Procedures for Implementation & Review. This section typically includes a mechanism or plan for supervising stakeholder compliance, specific steps a Responsible Office can undertake to self-monitor or demonstrate compliance with its policy responsibilities, acceptable documentation thereof, and a schedule for routine review and update of the policy language. Procedures may also include instructions or forms.
  - *As a general rule, procedures should be incorporated by reference to the procedure’s title, and not fully articulated in the policy itself. A policy should include a procedure section only if process is material to implementation of the policy.* This affords Responsible Offices the latitude to expedite processing of new or updated procedures based on identified urgencies, practical issues and other concerns identified by senior leadership. This is also true when the Responsible Office is a functional unit.
  - *Policy Sponsors should use the following situations as a guideline for determining that a procedure is material to implementation and must be fully articulated in the policy:*
    - i. A uniform (standard) method of Responsible Office implementation or Stakeholder compliance is required to achieve policy effectiveness and compliance with applicable law, and
    - ii. the procedure is so integral to policy development that the policy cannot be understood independent of the procedure, or
    - iii. If substantive procedural changes are unlikely for at least five years post-approval.
3. Tools. This section allows Policy Sponsors to provide additional information to Stakeholders or Responsible Offices, depending on the subject-matter of the policy. If addressing Stakeholders, this section should provide further information on concepts and/or compliance thresholds to clearly guide stakeholder action, or offer specific actions stakeholders can undertake to comply. At his/her discretion, the Policy Sponsor may effectuate clarity by presenting specific criteria, examples or thresholds described in narrative form, PDFs of webpages or URLs



(with a brief description of content), figures, pictures, checklists or fillable forms that help stakeholders identify potential policy violations. If addressing Responsible Office(s), this section should describe standard protocols for review and management of policy subject-matter (e.g. best practices), if this information has not already been included under procedures. At his/her discretion, the Policy Sponsor may effectuate clarity by presenting standard protocols in narrative format or through PDFs of webpages or URLs that link to best practices, and other guidelines published on authoritative websites maintained by local, state or federal agencies, government, accrediting bodies, and so on.

4. ***Related Policies.*** This section is essential to identifying overlap between BCM policies, and weighing the need for a new policy against changing or updating existing policies. This section should reference any existing BCM policies that contain language and/or associated procedures that are significantly impacted, changed, nullified or made effective by the development of the new policy.
  5. ***Applicable Laws, Regulations & Standards.*** This section should include references to accrediting standards and local, state and/or federal laws and regulations directing, impacting and/or mandating the university policy in development.
- b. ***Research and due diligence*** - Once a complete policy draft has been received from the Sponsor, the Policy Officer conducts research and due diligence. The Policy Officer must ensure that the policy has been correctly categorized, evaluated in comparison to similar policies at peer institutions, and evaluated with respect to fiscal, accreditation and other practical impacts; policy background and document history have been correctly annotated; appropriate subject-matter experts and necessary stakeholders have been consulted during the development process; and the Responsible Office is aware of and endorses the policy in development as harmonious with related policies. In some cases selected tasks may be delegated to the IPC by the Policy Officer, who will serve as fact-finder and facilitator. Once due diligence is complete, the Policy Officer approaches the IPC to complete the policy development process.
- c. ***Institutional Policy Committee.*** The Institutional Policy Committee's (IPC) advice and consent propels the policy from draft development to completion, with approval signifying that the policy is considered accurate and complete by the IPC, and clear to proceed with formal policy review. The IPC provides input to the Office of the General Counsel regarding classification, clarity, compliance roles, supervision responsibilities, resolution of ambiguity, consultation with subject-matter experts, institutional impact to stakeholders, and approves documents to enter Phase 2 of the policy governance process. The Policy Officer and IPC Chairperson collaborate on agenda planning, evaluate the policy draft to determine if it meets this Policy's definition of a "policy" and falls within the scope of this Governance Process, and if not, decline to move the document through the Process.
- i. After consultation with the IPC Chair, the Policy Officer will present the policy in development to the IPC (alternatively "Gatekeeper") for preliminary review. Depending on the policy's subject matter, the focus of preliminary review may be "knowledge," "input" or "approval."
    1. ***Review for knowledge and/or input*** - BCM policies presented for "knowledge" are those policies that the Gatekeeper should be made aware of. Policies presented for "input" are those that can be refined and improved through the diversity of perspective and stakeholder advocacy the IPC provides. For instance, policies presented to the IPC for knowledge or input might be mandated by changes in existing laws, accreditation standards, agency requirements, grant administrator communications such as program information notices, etc., which specify means for compliance, and whose impact is limited to a particular department, service area, or narrow class of tasks. *Policies presented to the IPC for knowledge and/or input do not require contemporaneous approval.*

2. Review for approval - Policies presented for “approval” require formal Committee vote and approval to proceed to Phase 2 of the governance process. Moreover, policies presented for “approval” may be required by law but characteristically vague with regard to criteria, requirements or guidelines for compliance; of uncertain breadth, or the impact of policy implementation likely extends far beyond the Responsible Office sponsoring or implementing the policy; or of crucial importance to achieving BCM mission(s), strategic plan(s), goals or objectives.
  - a. After reviewing a policy presented for approval, the IPC may approve, approve with amendment(s), or reject a policy with recommendations for sponsor refinement. Moreover, if the Institutional Policy Committee finds the policy lacking, it may request more information from subject-matter experts (SMEs), direct the sponsor to confer with specific SMEs, and/or make recommendations to the policy sponsor for improvement or resolution of concerns. Policy drafts deemed inadequate may be revised, resubmitted and reconsidered by the IPC at a later date.
  - b. In extreme cases, the Gatekeeper may veto a policy if editing cannot rectify concerns cited during review, or if the document advocates for something adverse to the BCM mission. In cases of veto, the IPC must submit a written statement regarding the nature of its opposition, which shall be conveyed by the Policy Officer to the Policy Sponsor as well as the General Counsel.
  - c. If the IPC deems the offering sufficient to merit approval, after incorporation of IPC-suggested changes accepted by sponsor (along with a brief summary of Gatekeeper findings or recommendations), the Policy Officer then sends the document to Phase 2. As a consequence of its central gatekeeping role, IPC approval activates the Policy Officer’s duty to shepherd IPC-approved policy drafts through the remaining phases of the governance process.

II. **Phase 2: Formal Policy Review.** BCM Policy will be refined under the direction of the Office of General Counsel. The Policy Officer shepherds the policy through formal policy review, which always begins with an institutional risk assessment. The Office of the General Counsel may, in its discretion, require an additional level of formal policy review depending on the subject-matter of the policy, and the General Counsel may consult additional offices and/or executive leaders regarding mission alignment and best practices. In cases of IPC veto, if designated entities choose to proceed with review, each must record a brief statement considering the veto’s reasoning and forward to the Policy Officer. If substantive changes are made to an IPC-approved policy during any step of the process described below, the Policy Officer is required to resubmit the revised version to the IPC for approval before proceeding with submission to an approval authority.

- a. **Institutional Risk Assessment.** The Office of the General Counsel ensures BCM policies are consistent with established laws, regulations and other statutory requirements that could expose BCM to undue burden, risk or legal liability, and confirms that policies under review are being routed to the correct approval authority based upon an independent evaluation of the policy content, applicable law, ongoing strategic initiatives and related policies. Consequently, if a policy under review effectuates regulatory compliance or reduces litigation risk, the Office of the General Counsel may consult with the Offices of Compliance and/or Risk Management. If the policy is deemed deficient, the General Counsel may take any of the following actions: (1) return the document to the Policy Officer and/or sponsor with questions, suggestions or recommended changes; (2) reject the policy and inform the sponsor that the review process will not proceed due to fundamental concerns about the policy’s content, rationale or associated procedure; (3) suggest modifications to language causing concern. If the policy is approved, the General Counsel may forward the policy directly to an approval authority (and send the policy into Phase 3) or require a mission alignment assessment be completed prior to approval. Determination will be made according to policy-subject matter.

b. **Mission Alignment Assessment.** Advice and consent proffered by a governing body or mission leader drives a policy from Phase 2 to Phase 3, and completes Phase 2 of the policy governance process by providing leadership input to the President on any of the following matters: education mission alignment as well as the BCM's commitment to diversity where applicable; impact on faculty, staff, and/or students; impact on internal operations of a functional-unit, department or office. Consequently, these are the appropriate entities to advise the Office of the General Counsel and evaluate whether a policy document adheres to best practices, is consistent with accreditation standards, clinical or grant requirements, benefits a particular BCM mission, streamlines or enhances some aspect of BCM operations, and/or improves the quality of education or services offered. Depending on the policy subject-matter, the evaluator may be the Academic Council (AC), Faculty Senate (FS) or a mission leader. If a policy is academic and relates to faculty affairs, it will most likely be reviewed by the AC. If a policy relates to general academic affairs or student affairs, the FS is the most likely reviewer. Additionally, some academic or institutional policies are so broad and impactful that evaluation requires participation of both governing bodies to be effective, such as [30.1.02 - Academic Program Approval Policy](#). If a policy relates to a given functional-unit, school or BCM mission area (such as clinical or research activities), consultation with the mission leader is appropriate. Review by an entity tasked with mission oversight terminates the formal review process, with approval signifying the policy is considered appropriate and constructive by the governing body or mission leader, and clear to proceed to the Approval Authority (Phase 3).

III. **Phase 3: Policy Approval.** BCM Policy review will be finalized and completed under the direction of the Office of General Counsel, tasking the Policy Officer with oversight of the approval process. The Approval Authority must consider policies submitted by the Policy Officer, who should also submit a summary of the IPC's findings, recommendations for refinement, or veto statement if applicable or requested. The proper Approval Authority will be determined according to the policy category and corresponding governance responsibilities as articulated in relevant BCM documents (see table below). Each Approval Authority shall review, approve or reject policies in a manner consistent with its own bylaws, charter and/or other relevant documents articulating governance duties, with the expectation that all policies (regardless of category) shall be subsequently ratified by the Board of Trustees before taking effect.

<b>Policy Category</b>	<b>Approval Authority</b>
Academic	Provost
Functional-Unit	Senior Vice President of Associated Unit
Institutional	Board of Trustees
School	Dean(s) of Associated School(s)

IV. **Phase 4: Policy Management.** When an Approval Authority ratifies a BCM Policy, it becomes an authoritative version and is returned to the Policy Officer for management. Management includes: authoritative policy publication, communication to stakeholders, training stakeholders on authoritative policy meaning and mechanics of policy approval; monitoring stakeholder compliance with this policy, including removal of rogue policies; scheduling review of policies that are either ripe for modification due to changes in applicable law or due for routine update based on sponsor-defined criteria; providing timely updates to BCM leadership about regulatory changes impacting existing authoritative policy and/or triggering the need for a new policy. For further information on the Policy Officer's management responsibilities or procedures facilitating stakeholder compliance under this policy, consult the "Compliance" section of this policy.

**Expedited Procedure for BCM Policy Development & Approval**

While authoritative policies must generally travel through the progressions described above, occasionally changes in law mandate urgent creation of new BCM policies and/or revision of existing policies. Such legal exigencies often require policy changes be processed swiftly in order to avoid undue burden on BCM operations. Thus, policies presented to the Institutional Policy Committee (IPC) for knowledge, input, or pursuant to changes in law,

regulations, or accreditation standards, or other reasons deemed appropriate by the Office of the General Counsel, may follow this procedure. The Expedited Procedure consists of the following consecutive steps:

1. The Policy Sponsor submits the policy to the Policy Officer,
2. The Policy Officer presents the policy for knowledge or input to the IPC.
3. Once IPC input has been gathered (if given), the document is conveyed by the Policy Officer to the Office of the General Counsel for review.
4. At the discretion of the General Counsel, impacted members of senior leadership and chairs of the Academic Council (AC) and/or Faculty Senate (FS) will be informed of the proposed policy changes as soon as practicable and may provide input on policy content, if appropriate. If required by a committee chair, formal approval may be sought from the AC or FS at a later date.
5. After General Counsel completes its review and editing, the Policy Officer presents the document to the proper Approval Authority for review.
6. Post approval, the Policy Officer undertakes the same management responsibilities described in Phase 4 of the Standard Procedure for BCM Policy Development and Approval.

#### **Plan for supervising stakeholder compliance**

This plan includes the following main components: providing education and training to relevant members of the BCM community on the policy governance process; instructing policy sponsors how to submit a policy for approval and utilize the Policy Officer as a resource of information and support; publishing approved policies in a location easily accessible to stakeholders; ongoing vigilance for “rogue policies,” and expedient removal of such policies from departmental websites; establishing a mechanism for routine communication of policy changes to affected stakeholders and the community at large, such as an email newsletter or message, and/or presentations to standing committees.

#### **Plan for demonstrating Responsible Office compliance**

The Office of the General Counsel may illustrate its compliance with this policy through the consistent accumulation of new authoritative policies on the policy governance intranet website, and routine addition of older policies in the format standardized by this policy; documentation of trainings provided with respect to this policy and associated procedure; relative accessibility of Policy Officer to senior leadership, stakeholders, policy sponsors and governing bodies; demonstration that policies can be successfully developed and approved using these governance procedures within a designated timeframe and/or within a reasonable time; revision of this policy whenever it is evident that the procedure is unclear or unduly burdensome.

#### **Documentation required for the Responsible Office to demonstrate compliance.**

Policy Officer will track whether a policy has been reviewed and/or approved by essential parties at each phase of the governance process. The Policy Officer will ensure review is completed by a representative of each committee, department or individual who must review and/or approve the document, which the Policy Officer will store and maintain in the “Document History” section of the BCM Policy Template, as part of the complete file of documentation associated with each authoritative policy version. Authoritative versions of new and revised institutional policies must be published on the policy governance intranet website in the Policies and Procedures Manual for accessibility. Select academic policies will also be made available to the public in satisfaction of SACSCOC Standard 4.3, including policies concerning student admissions, grading and refunds.

In addition to other interested parties identified by the Policy Officer, affected stakeholders must be notified via email that an authoritative policy has been posted. Academic, school or functional-unit policies will be published on their respective webpages and/or in handbooks, if applicable. Furthermore, functional-unit policies concerning internal operations that do not impact stakeholders, or alternatively concerning internal processes or procedures necessary to effectuate BCM policy are not to be included in BCM policies themselves or in the policy library on the governance intranet website, but should be included in the library of policies maintained by the functional-unit and posted on its intranet page or otherwise made generally accessible to staff. Authoritative policies in any category will only be made public if required by law, accreditation standards or as directed by senior leadership.

#### **Authoritative Policy Dissemination Procedure**

The Policy Officer sends simultaneous written notice of all policy publications to the Executive Director of Academic Communications and Recruitment, Associate Vice President of Public Affairs, and personnel from each BCM school tasked with handbook oversight. The Executive Director of Academic Communications and

Recruitment will include written notice of any academic policy publication(s) in an issue of the Faculty Commons Newsletter, which is transmitted via email to all BCM faculty members on a monthly basis. The Associate Vice President of Public Affairs will include written notice of any administrative policy publication(s) in the NewsLink Newsletter, which is transmitted via email to all BCM staff members on a weekly basis. Personnel from each BCM school tasked with handbook oversight will ensure policies affecting students are added to each handbook, as well as disseminated directly to students, within thirty days of receipt of notice from the Policy Officer.

### **Schedule for review and update**

This policy shall be reviewed and revised as necessary but at least every 5 years.

## **Related Policies**

---

All BCM policies published on the policy governance intranet website, office and/or department websites must adhere to this policy.

## **Applicable Laws, Regulations & Standards**

---

Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) Comprehensive Standards related to this policy include 2.5 (Institutional Effectiveness), 3.2.6 (Board/Administration Distinction), 3.7.5 (Role of Faculty in Governance), & 4.3 (Publication of Policies).

BCM demonstrates its compliance with **SACSCOC Comprehensive Standard 3.2.6** through the institutional policy for BCM Policy Development and Approval. This policy provides a standard procedure for development and approval of BCM policy while describing roles and responsibilities of actors participating in each phase of the governance process. Importantly, this policy illuminates the distinction between “policy-making functions” of the Board of Trustees and the “responsibility of the administration and faculty to administer and implement policy.” This distinction is characterized by active participation of BCM stakeholders, primarily faculty and administrative staff at various phases of the governance process to 1) evaluate policy content for clarity, correct categorization and compliance concerns (Phase 1); 2) anticipate practical challenges to implementation and/or internal operations (Phase 2); 3) ensure coordination between the Office of the General Counsel, responsible for supervising compliance with this policy, and administrative offices/units tasked with implementing a BCM policy (Phase 2); 4) ensure clearly defined parameters for both stakeholder compliance and monitoring thereof by the responsible administrative office (Phase 1); 5) ensure efficient implementation and supervision of BCM policies (Phase 4). In contrast, the policy governance role of the BCM Board of Trustees is limited to enacting new and revised policies that are consistent with the Board-directed mission and vision for a financially stable institution offering academic, clinical and research education and services.

In accordance with **SACSCOC Comprehensive Standard 3.7.5**, BCM demonstrates its commitment to faculty engagement in policy governance of both academic and administrative matters through the creation of governing bodies with administrative and academic personnel representing each of the four graduate schools within Baylor College of Medicine. In academic matters, faculty are formally engaged from the moment of genesis; whether a policy revision is initiated by a relevant faculty subcommittee or initiated by a standing committee, each empowered with authority through the Academic Council, the diverse perspectives of basic science and clinical faculty members are incorporated into the nucleus of ideas and plans that evolve into written policy. With regard to administrative matters which are not academic but may impact BCM’s educational mission, faculty input may be solicited by Policy Sponsor(s), the Policy Officer and/or senior leadership during the drafting and/or subsequent development process. Further, faculty participation extends beyond the drafting process. Efforts to construct a forum in which faculty exert a strong, consistent voice in all governance matters, as well as take an active, meaningful role in policy administration, has resulted in the incorporation of governing bodies comprised primarily or exclusively of distinguished faculty members. The Institutional Policy Committee (IPC), Academic Council (AC), and Faculty Senate (FS) each function as “gatekeepers.” Gatekeepers are governing bodies in charge of 1) policy review, 2) refinement of policy content and 3) approval of policies, either to proceed from the development phase into formal review (IPC) or from formal review to approval (AC & FS). As a rule, BCM policies

must be routed through the IPC (in its capacity as gatekeeper to the process) and through the AC or FS (if the policy is academic or institution-wide in application) *prior to* consideration by an entity with approval authority. Policies that do not fall within an exception to the standard procedure for approval and have not been previously approved by the appropriate gatekeepers are not eligible for consideration by the approval authority and cannot take effect. Casting faculty governing bodies as gatekeepers clarifies and affirms the essential nature of faculty engagement to BCM governance.

BCM's governance strategy consistently incorporates diverse perspectives of faculty and staff by making their participation essential to Development (Phase 1) as well as Formal Policy Review (phase 2). In accordance with **SACSCOC Comprehensive Standard 2.5**, BCM demonstrates its engagement in "ongoing, integrated and institution-wide research-based planning and evaluation processes" by utilizing key personnel in various roles across the institution to evaluate mission impact and alignment of policies during Formal Review, in the interest of achieving institutional effectiveness for all governance policies. This step of the Formal Review process is not only intended to evaluate the impact of a policy on a particular BCM mission, but also to assess whether a policy can streamline and/or enhance some aspect of BCM operations, or improve the quality of education or services offered.

In satisfaction of **SACSCOC Comprehensive Standard 4.3**, authoritative versions of new and revised institutional policies must be published on the policy governance intranet website for accessibility.

## Tools

---

### [BCM Policy Template](#)

### [Standard Procedure for Policy Development & Approval \(Diagram\)](#)

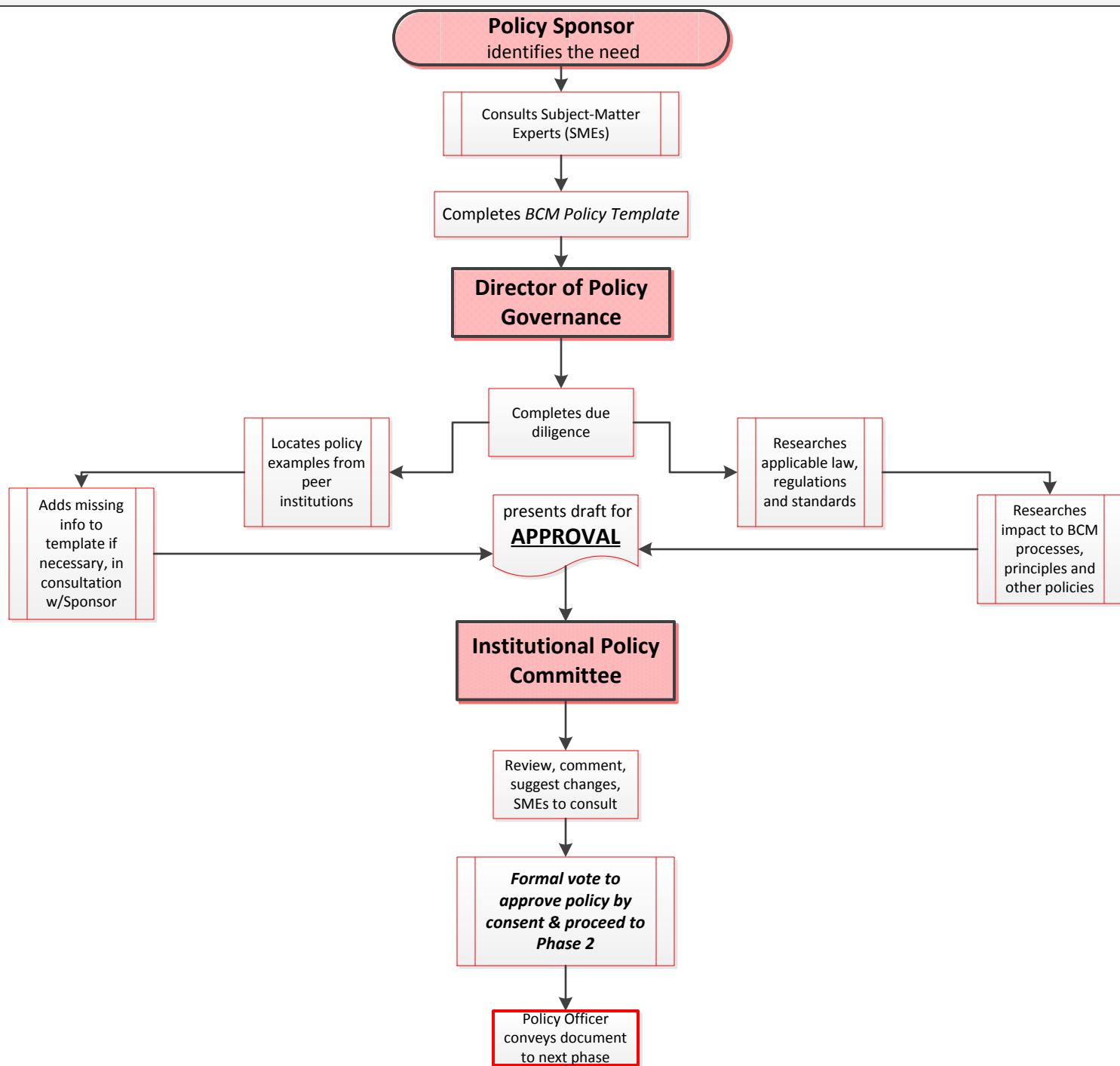
### [Expedited Procedure for Policy Development & Approval \(Diagram\)](#)

### [Policy Sponsor Checklist: How to Submit a Policy in Development for Review](#)

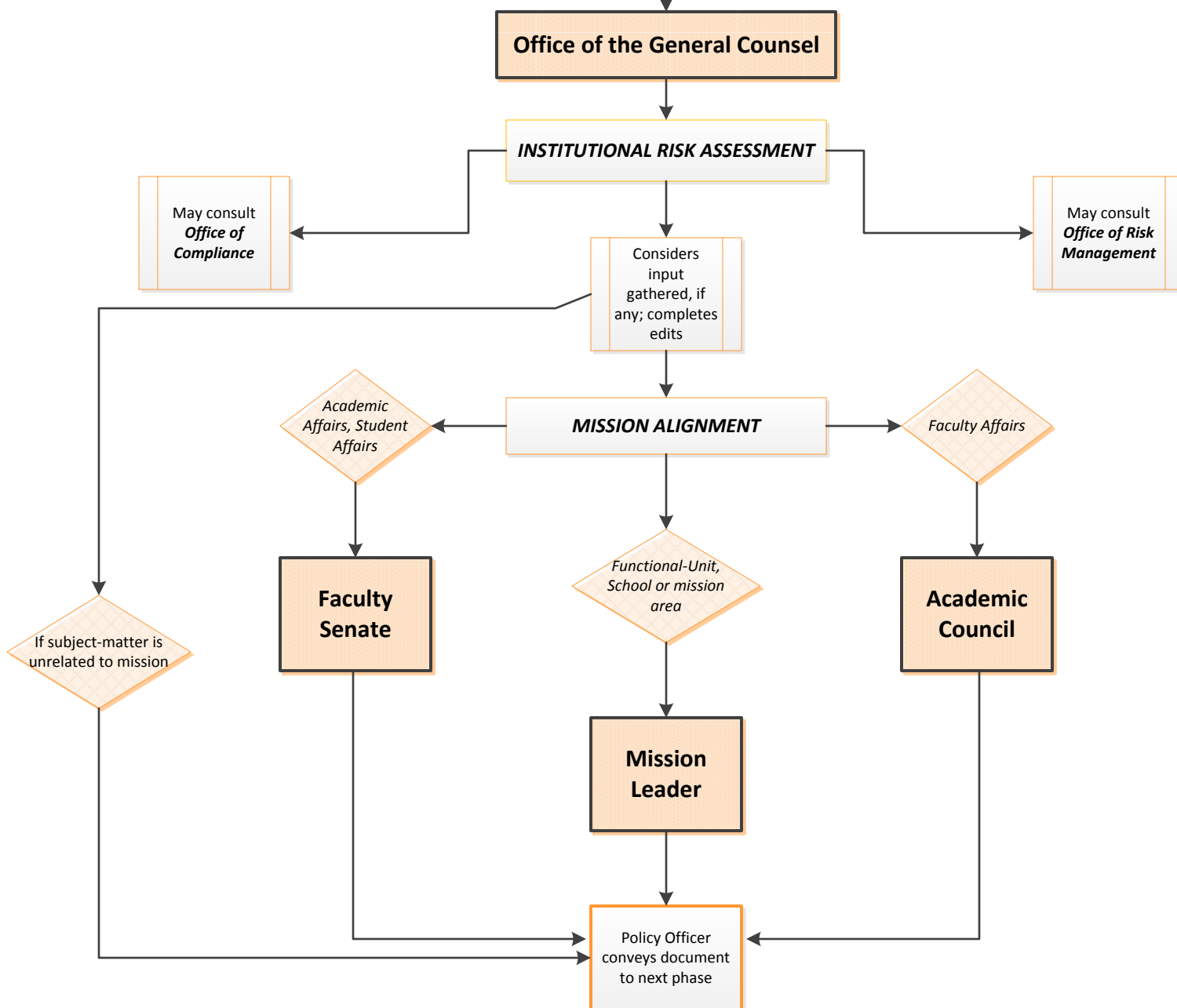
# Policy Development & Approval: Standard Procedure

Phase

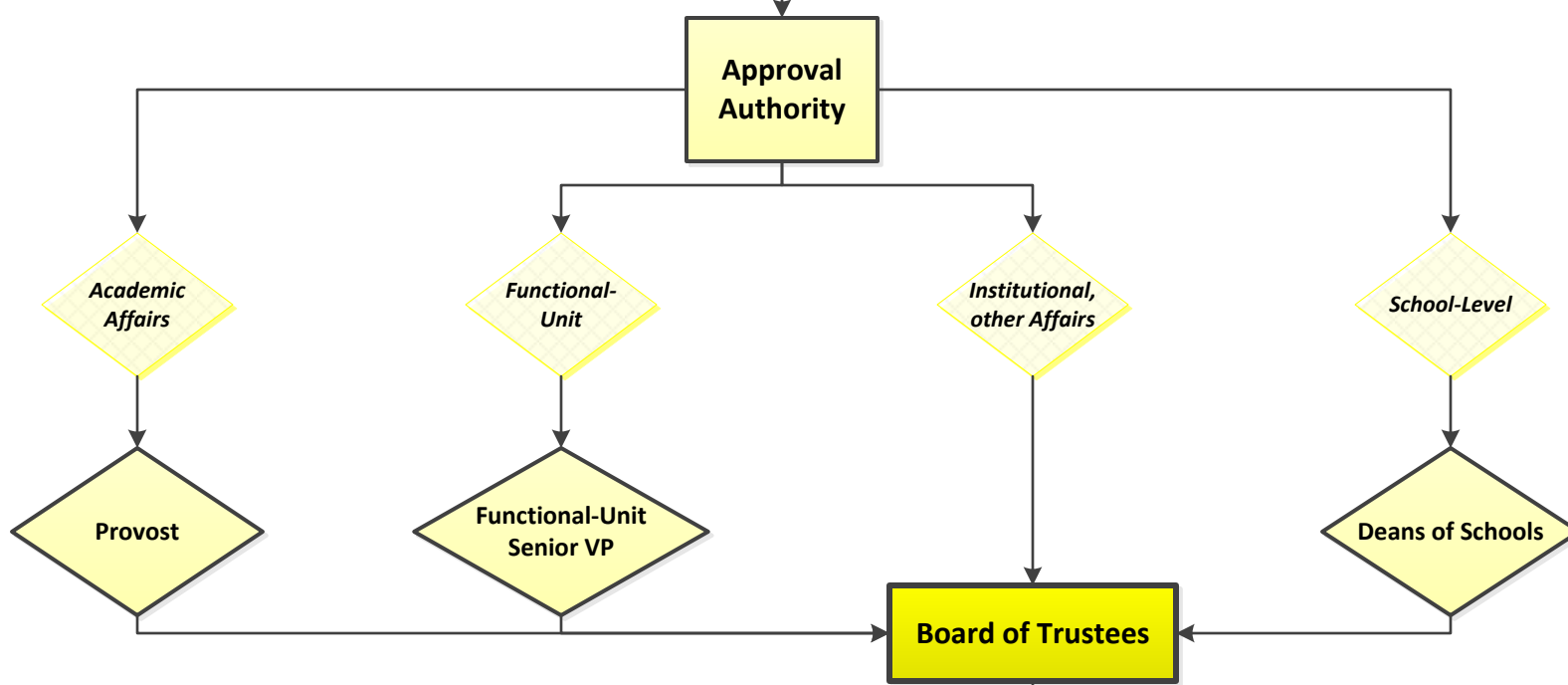
## Phase 1: Development of Policy



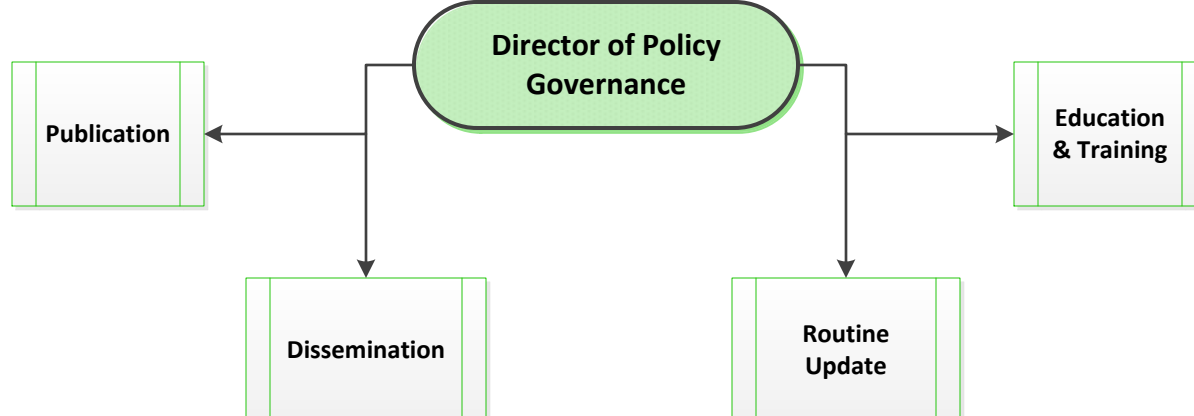
## Phase 2: Formal Policy Review



## Phase 3: Approval of Policy



## Phase 4: Management of Policy

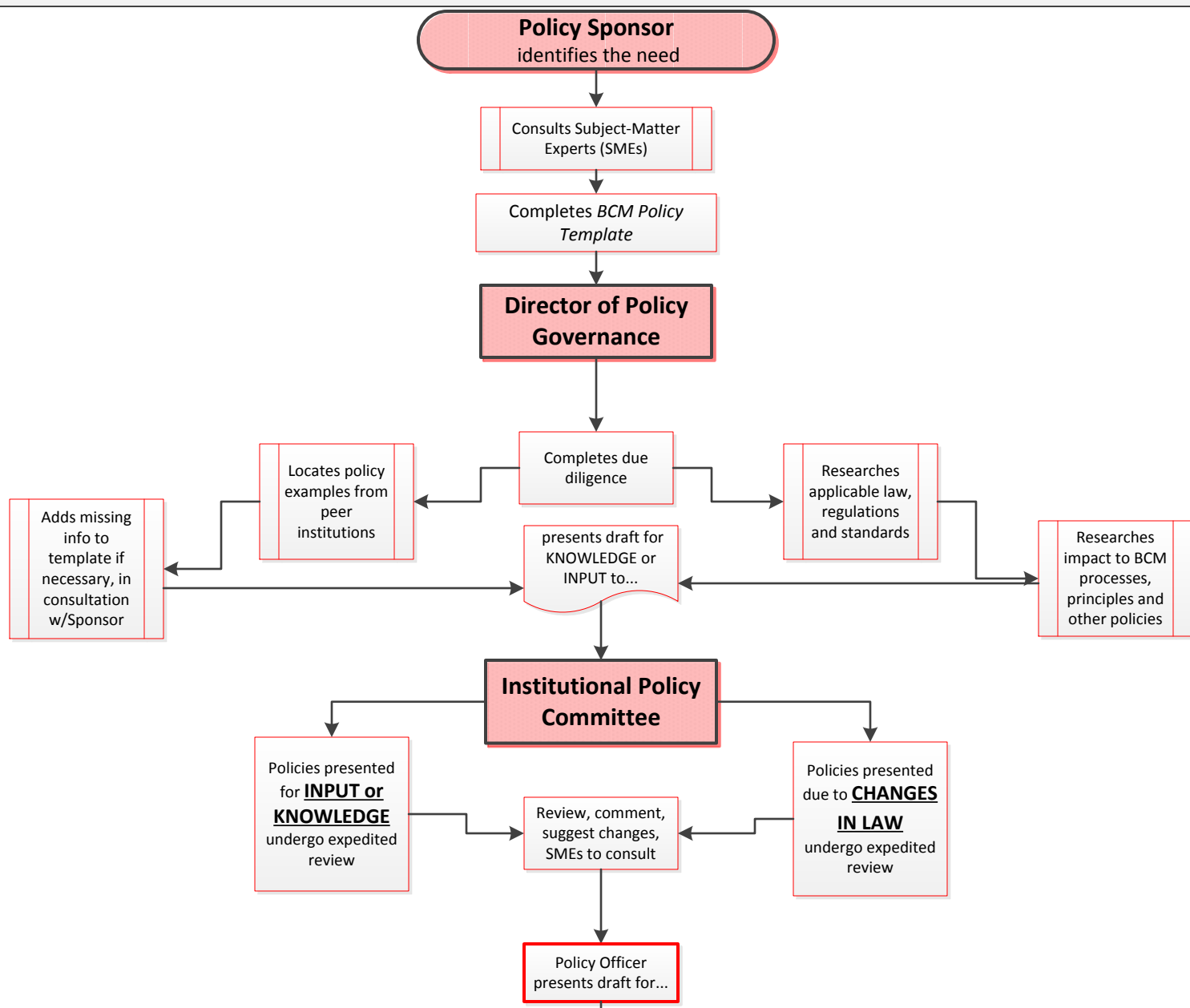




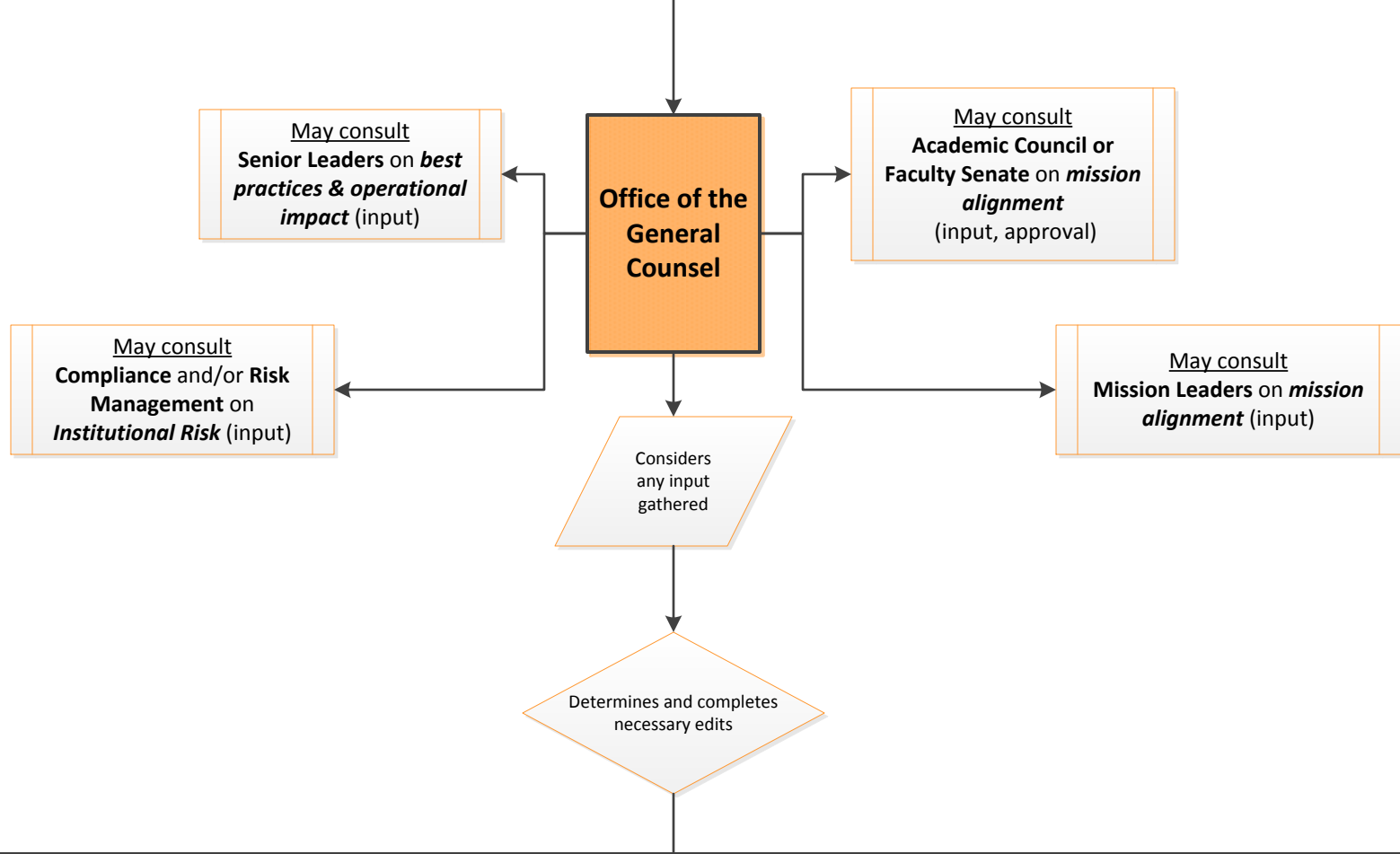
**Policy Development & Approval: Expedited Review Procedure**

Phase

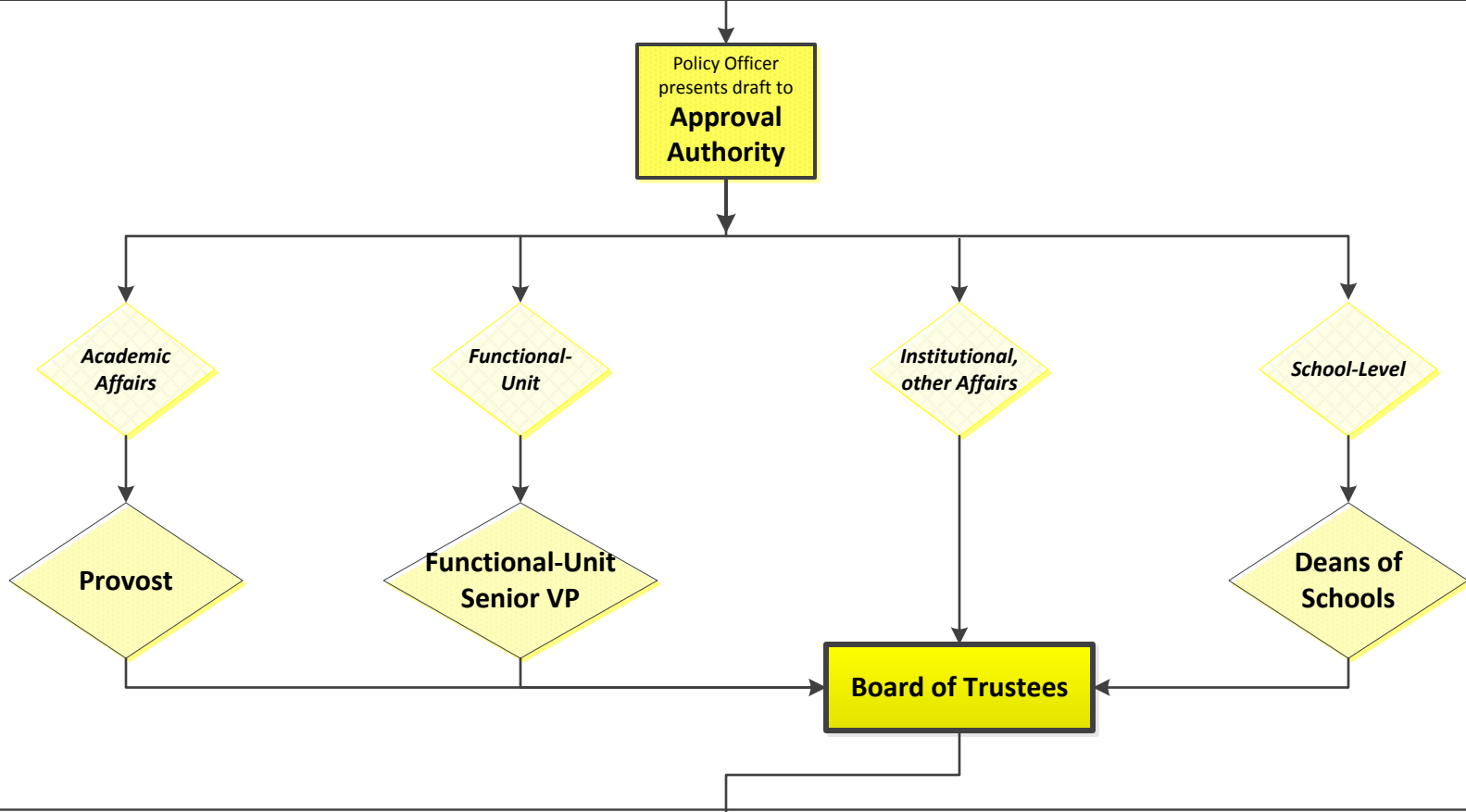
**Phase 1: Development of Policy**



**Phase 2: Formal Policy Review**



**Phase 3: Approval of Policy**



**Phase 4: Management of Policy**

