

POLICY ON POLICIES: DEVELOPMENT AND APPROVAL

I. Introduction

The objective of this document is to provide guidelines and for the formulation, development and review of St. Thomas University (*hereinafter STU or University*) policies. The guidelines outlined here should be viewed as providing general direction, rather than specific prescriptions for action, unless specific actions are required by existing policies or regulations. The President has assigned, in some instances, delegated various University officials, usually the vice presidents, with the implementation of this policy standardization. It is necessary to have some uniform procedure of policymaking to ensure that all University policies and procedures are developed and adopted by officials with the authority to develop the particular policy. It is also necessary to make governing standard consistent and readily accessible to the University community.

This policy does not rescind, revoke, or abrogate existing policies. It provides a framework for the revision of existing policies and for the creation of new ones. A period of transition is to be expected and is provided for to the extent possible while still moving toward compliance.

The University policy process is applicable to policies that:

1. Endure across time and administrations, change infrequently, and set the course for the foreseeable future;
2. Manifest and operationalize the University's mission, vision, values and principles;
3. Apply broadly across the institution;
4. Address compliance with applicable laws and regulations;
5. Promote operational efficiency; and/or
6. Manage institutional risk.

II. Definitions

A. *University Policy:* Applies broadly across the University, or to major components of the University; enhances the University's mission; addresses issues of compliance with laws, regulations, and/or internal standards; promotes operational efficiencies; or reduces institutional risk. For example, the Signature Authority Policy, Policy on Appropriate Use of Computer and Network Resources, and Policy on Conflict of Interest are all University policies.

B. *Procedure:* Sets forth identified steps for implementing a policy.

C. *Responsible Office/Department:* The University office responsible for developing and administering a policy, which includes dissemination of the policy, development of procedures where appropriate, communications and training related to the policy, and timely revisions.

D. *Policy Template:* The standard format that University Policies must follow going forward. It includes a short descriptive title, statement of purpose, scope/applicability, any applicable definitions, sunset review, and any applicable appendices.

E. *Responsible Authority:* The University department, unit, or school oversees the drafting of a new or revised policy and procedure.

III. Policy

Policies often involve matters of procedure but also may contain substantive standards and requirements. Some policies may have University-wide application and are approved by Senior Staff; others may have more limited impact and should be approved by the responsible vice president or designee. Policies are adopted to provide reference and procedural guidelines in the operation, management, and implementation of various programs, services, facilities, and activities at St. Thomas University.

A. Authority

Legal authority over University governance is granted by the Board of Trustees; however, the Board has delegated broad authority in most areas of University governance to the President. The President, has in part, further delegated this authority to a quorum within Senior Staff and/or to the University Vice Presidents within their respective units while maintaining final authority over such policies as necessary and appropriate. All University policies must be adopted and approved by a person or group having authority over the subject matter of the policy. Further, all policies must be consistent with applicable federal, state, and local laws.

B. Format

All University policies will use the format attached to this policy to the maximum extent practicable, *see attachment*. Numbering of policies shall correspond to the prefix number as provided in “I” below, such that a policy under the President’s Office would be numbered as: X(Assigned Policy Hierarchy) – X(Numerical Order of Policy within Hierarchy).X(Version of Policy starting with 0)

C. Transition

New policies and revisions to existing policies approved after the effective date of this Policy shall be in compliance with this Policy. The following process will be utilized to bring existing policies into compliance with this Policy. Where large manuals, guides, or other materials in book form contain policies or where other materials not currently in the form of a policy are now relied upon as the equivalent of a policy, attempt shall be made to identify actual policies contained within such book and to adopt the provisions as policies.

D. Approval Procedure

Each Vice President will be responsible for assuring review, accuracy, and approval of all policies adopted within the particular area of responsibility and authority. In consultation with risk management and compliance, each Vice President, must ensure that the policy is consistent with applicable law and regulations.

All policies must adhere to following approval procedure:

- Initiation of new policies and procedures occurs when the need for a new policy and procedure is identified by the University units, schools, or departments.
- The department, unit, or school oversees the drafting of a new or revised policy and procedure.
- When the responsible authority has finished drafting the policy and procedure, that draft should be submitted to the Director of Risk Management and Compliance.
- The responsible authority should be prepared to answer questions regarding the policy.
- After the proposed policy and procedure has been reviewed by the Director of Risk Management and Compliance, a copy of the proposed policy and procedure will be distributed to the campus community for a comment period of three (3) weeks.
- Once the proposed policy and procedure comment period ends, the policy and procedure will be reviewed by the Director of Administration.
- Once the Director of Administration reviews and approves the policy, the Director of Risk Management and Compliance and Director of Administration will recommend the policy for approval by Vice President that oversees the responsible authority or University Cabinet.
- The final policy and procedure will be uploaded online by the Director of Risk Management and Compliance and a corresponding email will be sent globally directing employees to view the new policy from the responsible authority.

E. *Policy Repository*

New and revised policies are stored online through the *official campus-wide policies and procedures on the [University's Policies webpage](#)*; this serves as the repository for **all** campus wide policies.

F. *Training*

If training on a new policy or revisions to a policy is necessary or advisable, the responsible authority will work with the Director of Risk Management and Compliance and Director of Administration to develop or identify, and provide or make available appropriate training for the University community or relevant subgroup within the University community.

G. *Applicability*

This Policy shall be considered applicable to all policies in the University that affect more than one department, unit, or school. Questions about the applicability of this Policy shall be directed to the Director of Risk Management and Compliance.

H. *Archiving/Prior Versions*

Every policy and procedure, once implemented, should be reviewed on a periodic basis to ensure that the policy and procedure remains current and necessary. If the need for a revision is identified, the responsible authority must review the existing policy and procedure carefully to determine whether it continues to reflect current practice and responds to a need in the University community. If the responsible authority feels that changes to the policy and procedure are in order, then he or she will prepare a draft of a revised policy and procedure in a format that highlights the proposed changes. If the responsible authority feels that the policy and procedure is no longer

needed and should be eliminated, then he or she will prepare a written statement to that effect for submission to the Director of Risk Management and Compliance.

If the responsible authority concludes that a policy within its areas has no continuing applicability it may propose retirement of the policy through the same review and approval channels outline in Section III.D of this Policy. Retired University policies will be archived but accessible by contacting the responsible authority. All previous versions of amended or revised policies must be archived.

I. Assigned Policy Hierarchy

All policies shall generally conform to the official policy hierarchy.

1. President's Office
2. Legal, Compliance, and Administration
3. Human Resources
4. Athletics
5. Contracts, Grants, and Purchasing
6. Facilities and Safety
7. Technology and Communications
8. Academic Affairs and Research
9. Advancement and Public Relations
10. Student Affairs

Each policy shall specify the responsible authority responsible for monitoring compliance with the policy and provide a schedule for periodic review of the policy and procedures established by the policy.

Responsible Authority: *Office of the President and Administrative Affairs*

USING THE STANDARD CAMPUS-WIDE POLICY FORMAT

A standardized format will be used for University policies and procedures and will include certain minimum information – denoted with a **(R)** for **Required** and **(O)** for **Optional**.

Page format: Margins – Top 1.5”, Bottom, Left, and Right 1”; Header 0.5” and Footer 0.5”; Different First Page checked; Entire document in Times New Roman



Full color logo (with no tag line); height: 0.3”/ width: 1.65”
Located only on 1st page.

Right justified;
8 pt. Font

Policy Title (R)
Approved by: Approval Authority (R)
Effective: Date or TBD if Draft (R)
Revised: Date or TBD if Draft (O)
Policy No.: X-X.X(R)

POLICY TITLE (R) - The title must identify the key purpose of the policy in as few words as possible. –
Centered; small caps checked; line spaced before 6 pt. and after 8 pt.; 12 pt font

I. Purpose (R) – From this point forward all line spacing must be 6 pt before and 8 pt after; 12 pt font

This is the most important section of the policy document. It will provide direction for the intended audience. When drafting the policy purpose, keep the following in mind:

- The statement must be concise with sentences that are clear and understandable for the given audience;
- Acronyms may be used if spelled out completely the first time used; and,
- Use strong action words (shall, must, are responsible for).

The policy purpose typically answers questions such as:

- Why is the policy needed?
- Which institutional objectives will the policy uphold?
- Are there any internal or external requirements that mandate, inform or support the policy?
- What is addressed by the policy?
- What does the policy intend to do?
- What behavior(s) does the policy require?

II. Scope/Applicability (R)

A succinct statement answering questions such as these:

- To which departments, colleges, or areas of the institution does the policy apply?
- To whom does the policy apply (students, faculty, staff, administrators, visitors)?

Policies and procedures that are generally applicable to more than one college or unit of the University must create and submit a University-wide policy. Matters pertaining only to the internal procedures of a given college or unit are not within the scope of this instructional policy template and must be obtained from the specific college or unit. However, in the event of an inconsistency between a provision in a college or unit policy and a provision in a University policy or regulation, the University policy or regulation shall prevail.

III. Definitions/Key Terms (O)

A list of words that may be contained in, or that are related to, the policy as a whole and that ideally will operate as search terms in a policy database. Use these questions to help create your key terms/definition list:

- To which departments, colleges, or areas of the institution does the policy apply?
- What issues or topics are related to the content of the policy?

When listing definitions/key terms use the following format -

A. Apple includes.....

B. Banana is defined as

C. Cupcake means

The key term is bold and the definition is not. Also, all terms must be listed in alphabetical order.

IV. Procedures (R)

A procedure is a set of mandatory steps established to implement the policy and/or to manage the activities specific to the policy. It describes a process that must be followed to achieve the desired outcomes. These statements should be specific to the policy and answer questions such as these:

- How will the policy be carried out?
- Who is responsible for carrying out the policy?
- If the policy requires individual action: what are the steps one must take?
- If the policy requires an institutional response: what are the steps the institution/department will take in its response?

V. Guidelines (O)

Guidelines contain information about how to accomplish some task or reach a specific goal. They are provided as suggestions; in other words, they are not mandatory. They may be presented as “best practice”.

VI. Applicable Legal Requirements (O)

This policy is designed to comply with applicable legal requirements, including

VII. Related Policies (O)

A list of policies, their citation and web link that relate to the proposed policy.

VIII. Sunset Review (R)

This policy shall be reviewed in --- years from its effective date to determine its effectiveness and appropriateness. This policy may be reviewed before that time as necessary to reflect substantial organizational, physical, or academic change(s) at STU or any change required by law.

IX. Appendices (O)

Attach any form, examples, or documents.

Responsible Authority: *Office of*
Department of
School of