



Policy Title: Policy Approval and Distribution Policy

Policy Number: EC.00.01.17031

Applies to: Washington State University's Elson S. Floyd College of Medicine Policies, procedures, guidelines, and statements related to academic and administrative policies that are implemented college wide.

Date: 8/1/2023

1.0 **Policy Statement**

Washington State University's Elson S. Floyd College of Medicine (COM) policies and procedures follow a uniform process and are to be appropriately developed, approved, published, distributed, and tracked in designated and authorized publications and web locations. This policy outlines the consistent policy making process including: drafting, review, approval, and distribution processes for the College of Medicine academic and administrative policies.

- 1.1 COM personnel are to obtain appropriate approvals prior to publication of the COM policies and procedures.
- 1.2 COM policies are to be consistent with provisions of the Washington Administrative Code and the Revised Code of Washington, WSU Executive Policy #5 *Policy Approval and Distribution*, and the COM Bylaws for faculty participation in the leadership of the college.
- 1.3 COM policies, procedures, and guidelines and statements are published and distributed in accessible designated and approved publications and approved web locations.
- 1.4 Guidelines and statements that do not apply college-wide and supplement COM policies, procedures, and guidelines and statements may be published and distributed by departmental or campus websites, with appropriate approval.
- 1.5 Final approval body for all College of Medicine MD Program policies and other policies and guidelines that apply college-wide is the College of Medicine Executive Cabinet.
- 1.6 Policies written by individual Departments within the college and applying only to the department that has authored or revised the policy statement or guidelines must be submitted to the College of Medicine Policy Review Committee, and the Executive Cabinet for review prior to finalization through the Office of Compliance. (The Office of Compliance determines if any policy is exempted from the approval process described in this college-wide College of Medicine Policy Approval and Distribution Policy).

2.0 **Definitions**

Policy: A policy is a plan or general course of action having a broad implication throughout the COM and intended to influence and determine decisions, actions, and other matters. A policy seeks to maintain compliance with the applicable accreditation standards of the Liaison Committee on Medical Education, and applicable laws and regulations. Policies promote operational efficiencies and the College of Medicine's mission, and/or reduces risk to the institution.

Procedure: A procedure is an established method of implementing a College of Medicine policy.

Guidelines: Provides additional instructions for implementing an administrative process or criteria by which decisions or processes are determined.

Statement: An official account of facts, views, opinions, or plans.

Administrative office/Unit lead or Designee: This individual is responsible to develop and administer the policy/procedure.

3.0 **Responsibilities:**

Office of the Dean

4.0 **Procedures**

Document Preparation:

All policy documents are prepared by their respective administrative office, unit lead, designee, or respective standing committee of the faculty council. The policy draft is prepared in accordance with the requirements that include consulting with related stakeholders who review and comment on content, process and consistent with the College of Medicine Policy Approval and Distribution Policy.

Required Format for Policy and Guidelines: The required format for policy and procedure statements and guidelines include the elements as found in the Policy Template found at *(to insert new link when policy ready to be published)*.

Procedures, Records, and Forms: The College of Medicine Office of Compliance manages a central policies website and coordinates approval and the publication of all items included on the website.

Determination of Need and Analysis/Drafting

The administrative office responsible for implementing and administering the policy/procedure analyzes the issues and conceptualizes the substance of the policy/procedure. Policy drafting may originate within a functional office administered by an individual with an administrative title of Associate or Assistant Dean or Director, or by a Standing Committee.

Draft Preparation

The administrative office or Standing Committee, where the policy draft originated, routes the first draft to the constituencies immediately involved or affected by the proposed policy. See Document Preparation above.

Preliminary Review/Approval

Responsible Designee: All constituents' input, together with the draft policy, is routed to the responsible designee within the administrative office of implementation. The Designee may take one of the following actions regarding the proposed policy:

- Return the draft back to the administrative office or Standing Committee noting that the policy is not to be considered further.
- Return the draft back to the administrative office or Standing Committee for further analysis, for consideration of other options, or redrafting.
- Forward the draft policy to the Director of Compliance for further action (e.g. submission to a Standing Committee, Policy Committee, Dean, or College Executive Cabinet, as appropriate).

Policies: Policies, policy statements, and policy changes that affect the entire college are routed for approval per the approval workflow below. Guidelines, and statements written by departments for their own governance should be in compliance with WSU and COM policies, guidelines, and statements are exempt from the approval process described in this college-wide College of Medicine Policy Approval and Distribution Policy.

Procedures: Policies that affect the entire college are routed for approval per the approval workflow below and must be reviewed by the Policy Committee, and approved by the Executive Cabinet, and Dean.

Comments: The Office of Compliance notifies faculty that they have 10 days to comment on the policy, guidelines, or statements.

Reviewers' Considerations: Reviewers are to consider a draft's consistency with college priorities and directions, impact on operations, ease of administration, provisions of the Washington Administrative Code and the Revised Code of Washington, WSU Executive Policy #5 Policy Approval and Distribution, and the College of Medicine Bylaws for faculty participation in the leadership of the college.

Dean Review: A policy draft and comments are forwarded to the Dean. The Dean may approve, approve with revisions, or return to the Policy Committee for further review.

Legal Review: The Office of Compliance may route the draft for preliminary review and/or approval by the Attorney General's Office and others suggested by them for a more thorough review.

Executive Cabinet Review: The Dean brings the policy draft and comments to the Executive cabinet. The Executive Cabinet may approve, approve with revisions, or return to the Policy Committee for further review.

Notification of Decisions: The Director of Compliance informs reviewing and implementing organizations of the College Executive Cabinet's decisions regarding the proposal.

Final Approval/Implementation

After final approval, the policy, guidelines, or statement is implemented and distributed in accordance with distribution requirements described below.

Distribution

After the proposed policy, guidelines, or statement is approved, the Director of Compliance ensures that the document is published in the appropriate approved college publication and/or website.

Publication

Approved publications and website for posting of College of Medicine policies and procedures are listed below. (Department websites should link to official college policy websites as appropriate.)

WSU Academic Catalog

College of Medicine MD Student Handbook

College of Medicine Academic Policies

College of Medicine Operations Policies

Review of Existing Policies and Procedures

The administrative office/unit lead or designee or the Standing Committee where the policy/procedure originated is responsible for ensuring that a policy/procedure document reflects current practices and are up to date. Policies are to be reviewed comprehensively at least once every three years and should be updated as necessary consistent with the procedures provided above. The College of Medicine Office of Compliance shall track and notify appropriate parties of the need for policy/procedure review.

Use the procedures indicated above when reviewing or revising policies, guidelines, and statements. Maintain the original policy number and list the review date(s) in section 7.0.

Retention of Policies and Procedures

The Compliance Office in coordination with the issuing administrative office/unit lead or designee or Standing Committee is responsible for retaining policies and procedures for at least six years after they are superseded.

5.0 Related Policies and Bylaws

Washington State University Executive Policy Manual, Executive Policy #5

[EP05 – Policy on Policies | Office of Policies, Records, and Forms | Washington](#)

[State University \(wsu.edu\)](#) Revision Approved November 2, 2022

Faculty Bylaws of the Elson S. Floyd College of Medicine, reviewed and updated annually on Month, date, 2023

COM Policy Template

[Equity Lens Tool](#)

6.0 Key Search Words

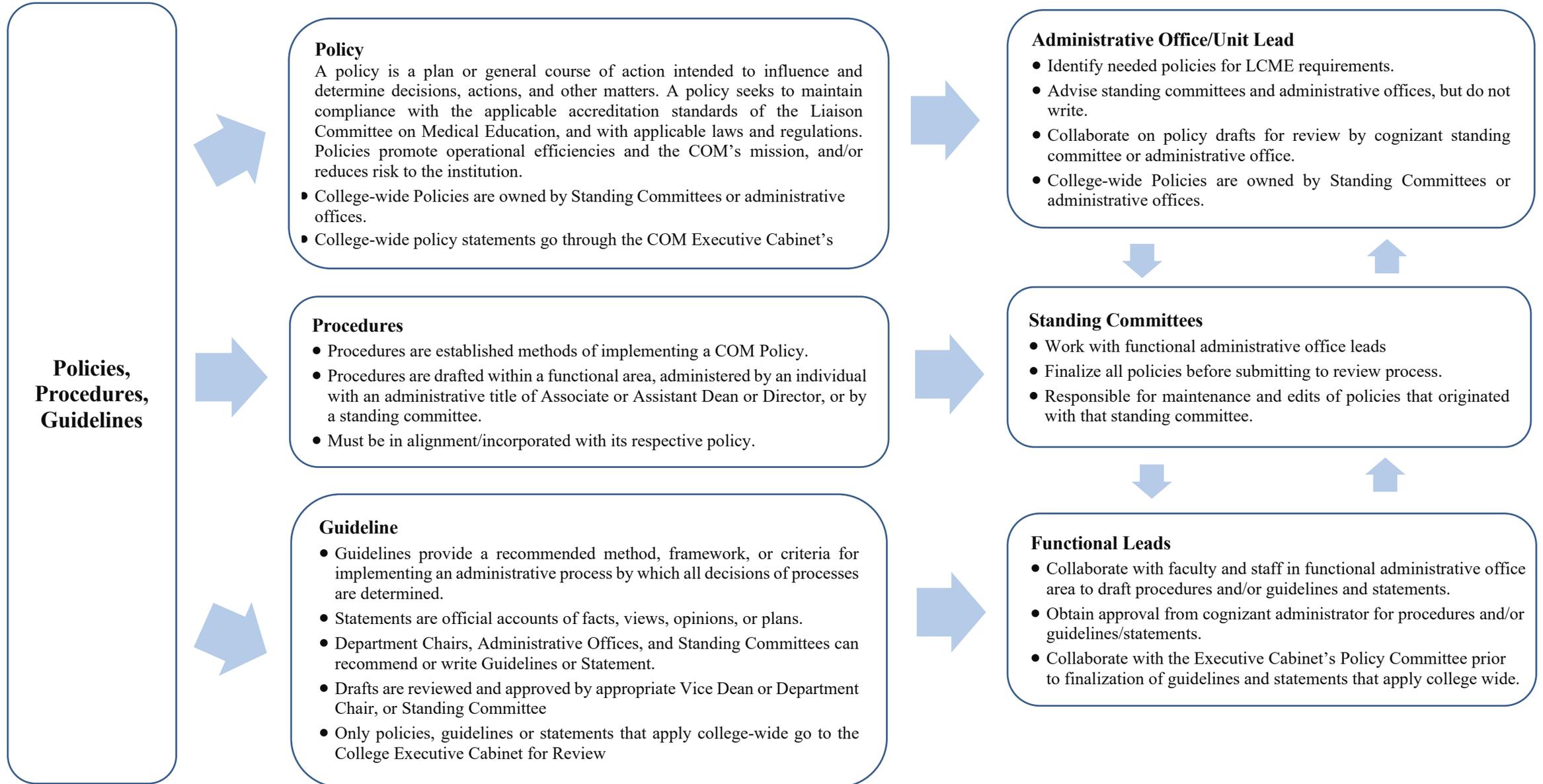
Policy, guidelines, procedures, approval

7.0 Revision History

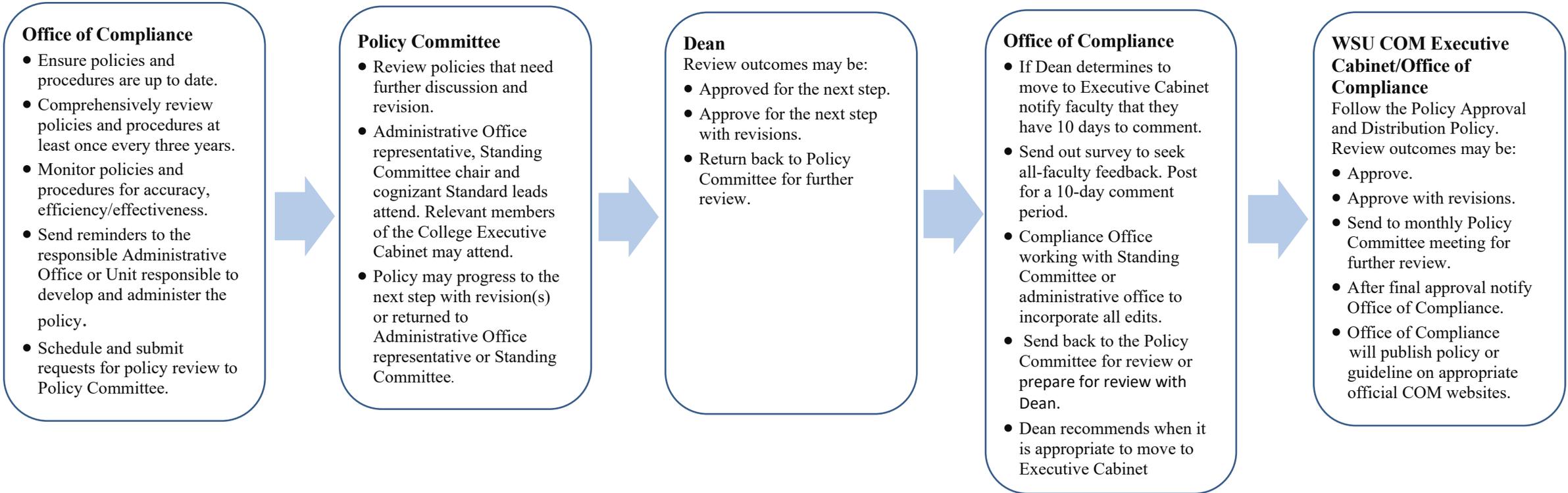
Original Approval Policy number 1/13/2017 EC.00.01.170131

Review/Revision 1/13/2017 12/13/2019 8/1/2023

WSU College of Medicine (COM) Policies, Procedures, and Guideline Overview



Workflow: College Executive Cabinet Policy Review and Approval Process for College-Wide Policies/Guidelines/Statements



Policy Committee Members: Theresa Bervell - Chair, David Garcia, Chris Martin, Brett Oglesbee, Jim Record (Ad hoc)

Executive Cabinet and the Standing Committees Admissions, Curriculum, Equity, FCEC, FRPT -Faculty Rank, Promotion and Tenure, Scholarship and SEPAC.

Office of Compliance Policy Specialist: TBD



NEW Policy Example Template with Elements

Policy Title: Student Clinical and Education Work Policy

Policy Number: CU.08.01.170808

Applies to: All medical students assigned to participate in clinical activities and/or related educational sessions.

Date: 2/14/2022

1.0 Policy Statement

Washington State University's Elson S. Floyd College of Medicine (COM) seeks to maintain an appropriate balance among clinical activities, educational sessions and unscheduled time for all medical students that optimizes patient safety, student education, and student well-being. As such, the COM establishes as policy that:

- 1.1 In concordance with the Accreditation Council for Graduate Medical Education's work hours policy standard, COM student clinical and education work is limited to a maximum of 80 hours per week.
- 1.2 All hours that students spend in clinical activities and related educational sessions must be counted toward the 80-hour weekly limit.
- 1.3 Students may voluntarily remain longer than 80 hours in unusual circumstances where, in the student's judgment, the extra time benefits patient care or the student's education. Such additional time will be counted toward the 80-hour limit.
- 1.4 At minimum, an 8-hour rest is required between work periods.
- 1.5 Clinical work periods must not exceed 24 hours of continuously scheduled clinical work.
- 1.6 Students may be on overnight call or 24 hours of continuously scheduled clinical work no more than every 4th night.
- 1.7 After 24 hours of continuous clinical work, students should have at least 14 hours free of clinical activities or related educational sessions.
- 1.8 Students must be provided with one (1) day in seven (7) free of all educational and clinical responsibilities, averaged over a four-(4)-week period, inclusive of call.
- 1.9 The COM is responsible for educating students, faculty, and staff about fatigue and fatigue mitigation strategies.
- 1.10 Students will track and report their duty hours in a timely fashion.
- 1.11 The COM is responsible for overseeing student duty hours and any violations of student duty hours.

2.0 Definitions

Clinical activities: Curricular, time-limited instructional events that are based on or substantially related to the clinical care of patients. Such activities may include, but are not limited to, direct patient care, patient rounds, patient documentation, case conferences and

clinical lectures in healthcare delivery that take place as part of their clinical training.

Duty hours: Hours that students spend on their scheduled clinical curriculum activities and/or related educational sessions.

Educational sessions: Curricular, time-limited instructional events delivered to students to impart knowledge that may but need not be substantially clinical.

3.0 Responsibilities

Office of Curriculum

4.0 Procedures (subject to change—see the Office of Curriculum for updated procedures)

Reporting and reviewing duty hours: Students are required to document duty hours in their portfolio within the learning management software. Clerkship Directors (CD) are responsible for reviewing student duty hours reports within their respective clerkship.

Managing duty hour violations: When a student experiences a duty hour violation, the student must report the violation to the respective CD with an explanation of the circumstances. The CD will notify the Associate Dean of Clinical Education (ADCE) of the individual violation. If a pattern of violations exists, the CD will be responsible for reporting the violations to the ADCE and the Clinical Experience Subcommittee of the Curriculum Committee (CES). The ADCE is responsible for reconciling individual violations of duty hours on the ADCE's respective campus. The CES will be responsible for jointly working with ADCEs to resolve patterns of violations.

5.0 Related Policies

N/A

6.0 Key Search Words

Duty hour restrictions, reporting violations.

7.0 Revision History

Original Approval Policy number 4/13/2016 CU.08.01.161216 CU.08.01.170808

Review/Revision 8/8/2017 12/13/2019