



# California Health Sciences University

UNIVERSITY

CHSU COMMITTEES

## PURPOSE

The purpose of the policy is to establish a structure of governance for University committees to provide advisory recommendations to the President or the President's Executive Council for final approval by the President.

## SCOPE

The policy applies to all university level committees and not college specific committees.

## POLICY

University committees play an important role in supporting strategic planning, quality assurance, policy development, academic program delivery, build collaboration among department, colleges and programs, and enriching the student learning experience as well as faculty and staff collaboration. Accordingly, it is the policy of CHSU to have established standing committees and create *ad hoc* committees, as needed, to realize the role committees play in their support of the university.

### I. General

- A. At the beginning of an academic year, the President, in consultation with program deans and director(s), shall appoint all committee members, including the chair and/or vice-chair of the committee to one-year terms. However, a committee chair may serve up to two years. The President and Provost shall be *ex officio* (non-voting) members of all CHSU committees.
- B. The President may establish *ad hoc* committees, or task forces, as needed, to address specific issues. Upon completion of the specific purpose for which it is established, the *ad hoc* committee or task force shall be disbanded by virtue of the completion of its assigned work.



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- C. Recommendations made by all university committees are advisory to the President. The President requires that any committee decision, proposal, or recommendation must be submitted to the President's Executive Council prior to review by the President. The President may accept, modify or reject a committee decision, recommendation, or proposal. The President has sole discretion to reject the decision, recommendation, or proposal if they deem it to be contrary to the interests of the university.
- D. Each committee shall conduct its business and activities in compliance with applicable law and university policies. Unless otherwise provided, committee decisions will be made by a simple majority vote and a quorum of the committee must be present for voting.

### II. Standing Committees

#### A. President's Executive Council (PEC)

The PEC is the senior leadership body that:

- Develops CHSU's strategic direction;
- Provides direct support and advice to the President; and
- Has input and impact on key decisions, campus-wide initiatives, and issues of importance to CHSU.

The PEC shall meet regularly and assist with the development and implementation of university policies, procedures, and guidelines. The chair of the PEC is the President.

#### B. Enterprise Risk Management Council (ERMC)

The ERMC identifies and evaluates significant risks and exposures that CHSU may face and provides informed advice to the University administration and CHSU Board of Trustees regarding the risks that merit high-level attention. In addition to identifying risks, the ERMC makes recommendations regarding managing and mitigating risks and reevaluates risks periodically to determine whether the threat outlook for a particular risk should be either downgraded or increased based on effective risk mitigation efforts. In support of the risk evaluation process, the ERMC may consult with risk owners, faculty, staff, students, outside advisors, and/or the Board of Trustees. The ERMC tracks risks that include, but are not limited to, high-level legal and compliance risks. The ERMC shall coordinate with the Policy Development Committee when risk mitigation strategies include



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the development of additional policies to effectuate the mitigation. The ERMC shall maintain a risk assessment plan that includes an annual review of the risk register. High level risks are aligned with the CHSU Strategic Plan to ensure compatibility of action plans. The ERMC is advisory to the President and the Board of Trustees' Audit and Compliance Committee. The ERMC shall prepare and submit regular updates to the President which, in turn, shall be submitted annually to the Board of Trustees for its consideration. The President is the chair of the ERMC.

### C. Policy Development Committee (PDC)

The PDC's goal is to administer a clear, coherent, and well-communicated process for creating new policy, and amending current policies, as a way to improve the university's agility, effectiveness, and compliance with law and accreditation standards. The PDC guides best practices in university policy governance and ensures collaboration and consistency in the development of university policies. The PDC tracks approval for all policies throughout the university and each college or program, including maintaining the RACI for each policy. RACI is a responsibility charting protocol used to ensure that appropriate parties are involved in the development of or revision to a policy. Under RACI: R is the administrator ultimately responsible for the policy; A is the administrator accountable for implementation of the policy and is typically the policy owner responsible for drafting or revising a policy; C is those stakeholders that should be consulted on the policy and revisions to the policy; and I is those who should be informed following approval of the policy. Before a policy is presented to the PDC for initiation of the approval and tracking process, the policy developer/owner must identify a RACI and must ensure that the final draft has been reviewed and approved by the R, A, and C.

PDC is the collaborative body with the authority to:

- Inventory all institutional policies, including those contained in student and employee handbooks or similar documents;
- Develop a process and governance framework through which institutional policies are formulated, vetted, approved, reviewed and maintained, communicated and enforced;



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- Review and recommend for adoption, new and significant changes to existing university policy. Recommendations are forwarded to the President for final evaluation and action;
- Advise the President and President's Executive Council regarding policy development protocols;
- Serve as the final locus for dialogue in collaborative policy formulation after the opportunity for comment by key stakeholders;
- Create a policy repository to serve as an authoritative source for policies, as well as maintain an archive of past policies;
- Work collaboratively with department heads, deans and program directors, committee chairs and others to ensure widespread understanding of the PDC process and the policies needed pursuant to law, accreditation standards or higher education best practices;
- Assess and improve existing policies for consistency or conflict with other policies and evaluate current practice of compliance with the policies; and
- Manage responsibility charting for the university using the RACI or similar framework.

Standing members of PDC may include at least one representative from the Office of Human Resources, the Business Office, and each college as well as the Provost and Vice President for Legal Affairs.

### **D. Environmental Health and Safety Committee (EHSC)**

The EHSC is responsible for developing recommendations of steps necessary to ensure a safe and healthy work and learning environment for all members of the university community. The EHSC promotes a safe work and campus environment by coordinating programs and services to improve safety and reduce health and environmental risks to the university in a manner consistent with responsible fiscal and environmental stewardship. Unless otherwise determined by the President, the chair of the EHSC shall be the Vice President of Operations. Members of the EHSC may include a representative from the Business Office, Department of Information Technology, Office of Institutional



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Effectiveness, Assessment and Research, along with other appointed members. The Director of Security shall be a standing member of the EHSC.

### **E. Diversity, Equity, and Inclusion Committee (DEIC)**

The DEIC's responsibility is to make recommendations to the President and President's Council to:

- Foster a climate that promotes a better understanding of, and an appreciation for, diversity within their sphere of influence of the CHSU community and encourage others to do the same;
- Facilitate the implementation of existing diversity strategies, programs, and initiatives;
- Develop programs that promote mutual respect, valuing differences, as well as cross-cultural understanding;
- Assist in highlighting, recognizing, and publicizing diversity initiatives to promote campus-wide cooperation and participation; and
- Share and vet diversity strategies, initiatives and information within their campus communities and constituents.

The Title IX, Diversity & Equity Coordinator, in collaboration with each college's student affairs and admissions offices and the Office of Human Resources, must approve any of the DEIC's recommended activities aimed at promoting diversity and inclusion efforts.

In addition to the chair and members of the DEIC appointed by the President, the Title IX, Diversity & Coordinator shall be a standing member of the DEIC.

### **F. University Wellness Committee (UWC)**

The UWC oversees the CHSU campus wellness programming efforts. It is composed of students, faculty, and staff representatives from all professional programs on campus.

The CHSU wellness activities are developed with input solicited from students, faculty, and staff. The UWC plans activities that promote and encourage healthy diet, physical activity, stress management, resilience, life balance, sleep and time management and fatigue mitigation, and other elements of a healthy lifestyle within the campus



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community. Some resources and events are specifically aimed at empowering CHSU students to cultivate physical, emotional, and interpersonal/community wellness habits as part of their professional development.

In addition to the chair and members of the UWC appointed by the President, CHSU's full-time behavioral health professional shall be a standing member of the UWC.

### **G. Research and Scholarship Committee (RSC)**

The RSC facilitates the development of the CHSU research strategic plan and infrastructure development in collaboration with the University's research administration. The RSC's charge includes the following areas of responsibility:

- Working with each college's faculty development committees to help assure appropriate training for new faculty in research methodologies.
- Establishing and maintaining policies (in conjunction with the President, the PDC and VP for Research) that allow for efficient decision-making regarding the allocation and distribution of internal seed funding for research.
- Reviewing and recommending policies related to research activities by students, faculty and staff, in compliance with the University's policy development policy and procedures.
- Providing a forum to collaborate and organize and prioritize a primary research interest or focus for the University in pursuing extramural research grant support.
- Collaborating with community partners to plan and prioritize refereed research related events sponsored by the University.
- Working with the Office of the Sponsored Programs to ensure that faculty and students working on research projects are educated and compliant with relevant policies

The RSC consults with the faculty, Deans, Directors, and the VP of Research to facilitate and promote research activity, including interdisciplinary and interprofessional scholarship and research collaboration..



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In addition to the chair and members of the RSC appointed by the President, the college-level director(s) of research and the CHSU Director of Sponsored Programs shall be standing members of the RSC. The VP of Research shall be an ex-officio (non-voting) member of the RSC.

### **H. Assessment and Outcomes Committee (AOC)**

The AOC reviews policies and guidelines that help ensure that all CHSU graduates achieve competency in the CHSU Global Learning Outcomes (GLOs) and makes general policy recommendations to the college deans/directors and faculty to guide the continuous quality improvement processes specific to education, research and service of all University resources and programs. The AOC prioritizes and makes recommendations for the institution-wide performance improvement activities, such as quality improvement projects, institutional assessments, and progress towards strategic plan goals.

With direction from the college deans or directors, the AOC is specifically responsible for ensuring that:

- Data related to student learning outcomes from all programs is available for AOC review;
- Appropriate outcome data is being collected from each program for all levels of assessment data, including the data necessary to support CHSU's meeting accreditation and stakeholder standards to maintain programmatic viability
- Appropriate assessment analyses are conducted to identify areas where improvements are needed to ensure programmatic quality; and
- CHSU is developing and implementing a strategy to ensure documentation of continuous quality improvement.

In addition to the chair and members of the AOC appointed by the President, the Assistant Vice President for Institutional Effectiveness, Assessment and Research, and the associate deans for academic affairs of each college shall be standing members of the AOC. Any University level administrators involved in the assessment of student learning outcomes will also be ex-officio (non-voting) members on the AOC.



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## I. Institutional Review Board (IRB)

The University Institutional Review Board (IRB) plays a crucial role in ensuring that research involving human participants complies with ethical rules and standards and regulatory requirements. The primary responsibilities of the IRB committee include:

1. Protection of human participants: The IRB's main concern is to safeguard the rights, welfare, and well-being of human participants involved in research studies. They assess potential risks and benefits and make sure that the risks are minimized and reasonable in relation to the anticipated benefits.
2. Review of research proposals: The IRB is responsible for evaluating research protocols submitted by researchers to ensure that each project meets ethical standards and complies with relevant laws and regulations
3. Informed consent process: The IRB ensures that the informed consent process is appropriate and that participants are adequately informed about the purpose of the research, the procedures that will be involved in the research, the potential risks and benefits for participants, and their rights before they agree to participate.
4. Continual monitoring: The IRB may conduct ongoing monitoring of approved studies to ensure that researchers adhere to the approved protocols and that participant safety remains a priority throughout the research process.
5. Protocol modifications: If researchers want to make changes to their approved protocols, the IRB must review and approve the changes before the researchers implement them.
6. Reporting adverse events: The IRB requires researchers to report any adverse events or unanticipated problems involving risks to participants promptly. The IRB then assesses the situation and may recommend appropriate actions.
7. Continuing review: The IRB conducts regular reviews of ongoing research to ensure that it remains ethical and relevant. Studies must be reevaluated at least annually to continue their approval.





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8. Education and training: The IRB provides education and training to researchers, staff, and students involved in human research to promote an understanding of ethical principles, guidelines, and best practices.
  9. Record-keeping and documentation: The IRB maintains comprehensive records of all communications, protocols, approvals, and reviews related to each research study.
  10. Compliance with regulations: The IRB must comply with all applicable laws, regulations, and institutional policies concerning human research.
  11. Communication with researchers: The IRB communicates with researchers to provide guidance, clarification, and feedback during the review process.
  12. Decision-making: The IRB has the authority to approve, require modifications to, or disapprove research protocols based on ethical considerations and compliance with regulations.
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### **IRB Composition and Responsibilities**

The President appoints IRB members, following consultation with the President's Council. Consistent with federal regulations and requirements of the Office for Human Research Protections in the U.S. Department of Health and Human Services, the IRB must have a minimum of 5 members, including at least one scientist with a biomedical or behavioral research background, at least one non-scientist with training, background or occupation that provides a viewpoint outside of any biomedical or behavioral discipline, and at least one member who is from outside of the institution (non-affiliate). In addition to the five members appointed by the President, the V.P. of Research serves as an ex-officio (non-voting) member of the IRB. The President shall determine which IRB members serve as Chair and Vice Chair.

All IRB members must have the professional competence necessary to review specific research activities involving human subjects and have the knowledge and ability to evaluate the suitability of any proposed research in terms of institutional commitments and regulations, applicable laws



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and standards of profession conduct and practice. The IRB must have a diversity of members, including consideration of race, gender, cultural backgrounds, and sensitivity to such issues as community attitudes.

The IRB will establish and maintain written procedures consistent with applicable legal requirements, including procedures for the following issues:

- Determining which human subject research requires an IRB review, including criteria for risk classifications and for expedited or exempt review eligibility
- Conducting an initial and continued review of research, including verification of the extent to which approval criteria have been met
- Reporting its findings and actions to the investigator and the institution
- Determining which projects require review more often than annually
- Determining which projects need verification from sources other than the investigators that no material changes have occurred since the previous IRB review
- Ensuring prompt reporting to the IRB of proposed changes in research activity
- Ensuring that changes in approved research are not initiated with IRB review and approval, except when necessary to eliminate apparent and immediate hazards to the subjects
- Ensuring prompt reporting to the IRB, appropriate institutional officials, and any sponsor or granting agency about:
  - Any unanticipated problems involving risks to subjects or others;
  - Any serious or continuing noncompliance with the requirements or determinations of the IRB
  - Any suspension or termination of IRB approval

The IRB maintains the authority to approve, require modifications to secure approval (conditional approval), or disapprove research involving human subjects.

[See also CHSU Policy for Human Subjects Research] <https://chsu.edu/wp-content/uploads/CHSU-Policy-for-Human-Subjects-Research.pdf>



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## RESPONSIBILITIES

A. Office of the President

## HISTORY (R\*)

Approval Date:

8/3/2023

Revision Date(s):

Reviewed Date(s):

8/1/2023

**R:** President

**A:** President's Council

**C:** President's Council

**I:** CHSU Community