

BURRELL COLLEGE OF OSTEOPATHIC MEDICINE

STANDARD OPERATING PROCEDURES

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| Creation, Modification and Maintenance of Standard Operating Procedures | | SOP #: GA.003.02 |
| Effective Date | 5/28/2019 | |
| Last Revision/Review | 6.23.2020 | |

1. Purpose

The development and maintenance procedures within the College shall include the review and recommendation of Department Heads and Committee Chairs. This standard operating procedure has been established under the authority of the President and Dean/Chief Academic Officer to fulfill this objective.

2. Related Policy/Authority

3. Faculty/Staff Responsibilities

The Responsible Official, Office of Compliance, Dean/CAO, President

4. Definitions/Abbreviations

Responsible Official: The department head/committee chair assigned the coordination to develop, modify, review, and eliminate procedures within an assigned area of responsibility.

5. Procedural Steps

1. A Standard Operating Procedure may be initiated by a Responsible Official with the authority and responsibility for the subject area addressed within the Standard Operating Procedure at any time.
2. Any College stakeholder may propose Standard Operating Procedures or modifications to a Responsible Official. The Responsible Official will supervise the development and composition of the Standard Operating Procedure, and may designate and authorize others to assist.
3. To develop a new Standard Operating Procedure, the Responsible Official, working with appropriate stakeholders, utilizes the SOP Template and submits the SOP to the Office of Compliance for review.
4. The Office of Compliance will determine whether the SOP has been vetted appropriately and is not in conflict with existing policies and/or procedures. If in conflict, the Responsible Official will be notified that a revision is needed. If not in conflict, the SOP will be assigned a number and sent to the web developer for posting.
5. The SOP will then be communicated to the College Community through an update provided by the Office of Compliance.
6. All Standard Operating Procedures will be reviewed and updated as necessary. All SOPs will be subject to periodic review by the Responsible Official.

6. Reports/Charts/Forms/Attachments/Cross References

Standard Operating Procedure Template

7. Maintenance

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Annually

8. Signature

Signature on File

6.23.20

Nina Nunez, Director of Compliance

Date

9. Distribution List

Internal/External

10. Revision History

| Revision Date | Subsection # | Summary of Changes | New/Cancellation/Replacement? (if applicable) | Approval Date |
|---------------|--------------|---|---|---------------|
| 8/18/19 | 2 | Update to responsible official titles | | 8/28/19 |
| 6.23.2020 | 5 | Update Responsible Official to be a department head/committee chair | | 6.23.2020 |