Purpose

The purpose of this policy is to establish a collegial and inclusive process for developing, reviewing, and approving policies and procedures that affect the academic quality, standards, and outcomes of the clinical psychology graduate program.

Scope

This policy applies to all policies and procedures that relate to the curriculum, admission, assessment, graduation, accreditation, and ethical conduct of the clinical psychology graduate program. This policy does not apply to administrative or operational matters that fall under the authority of the department, college, or university.

Principles

The following principles guide the collegial decision-making process:

- **Participation:** All members of the clinical psychology graduate program community, including faculty, staff, and students, have the right and responsibility to participate in the development and approval of policies and procedures that affect them.

- **Plurality:** The collegial decision-making process respects and values the diversity of perspectives, opinions, and experiences of the program members, and seeks to achieve a balance of interests and needs.

- **Deliberation:** The collegial decision-making process fosters constructive dialogue, critical thinking, and evidence-based reasoning among the program members, and strives to reach a consensus or a reasonable compromise on the issues at hand.

- **Accountability:** The collegial decision-making process is transparent, fair, and consistent, and follows the established rules and procedures of the program, faculty, and university. The program members are accountable for the quality and impact of the policies and procedures they develop and approve, and for assuring that they are consistent with the professional ethics and standards of the profession.

Process

The collegial decision-making process consists of the following steps:

- **Initiation:** Any member of the program community can propose a new policy or procedure, or a revision of an existing one, by submitting a written proposal to the co-
Director of Clinical Training (co-DCT) responsible for chairing the Clinical Executive Committee (CEC). The proposal should include the rationale, objectives, scope, and implications of the policy or procedure, as well as any relevant evidence or data to support it.

**Consultation**: The co-DCT will review the proposal and determine whether it falls within the scope of this policy. If so, the co-DCT will circulate the proposal to the CEC and place it on the agenda for the next meeting of either the CEC or Clinical Expansion committee for discussion and potential revision. The CEC may choose to solicit feedback from other stakeholders, such as students, department faculty, College and University officials, or community partners, as appropriate.

The committee will deliberate on the proposal and the feedback received, modify the policy or procedure as appropriate, and formulate a recommendation to approve or reject the policy or procedure. The committee will document the rationale, evidence, and arguments for the recommendation, and submit NOTICE of MOTION for the next CEC meeting.

**Approval and voting procedures**: Consideration of the NOTICE of MOTION requires a majority of members from the CEC to be present when the MOTION is considered. The CEC will review the proposal, the recommendation, and any objections, and make a decision to approve the policy or procedure by a two-thirds majority vote of those members present and voting. Abstentions shall be considered as “no” votes for the purposes of calculating the two-thirds majority.

**Implementation**: The co-DCT will oversee the implementation of the approved policy or procedure and ensure that the program community and other stakeholders are informed and trained on the new or revised policy or procedure. The co-DCT will also monitor and evaluate the effectiveness and impact of the policy or procedure and report the results to the CEC and the program community on a regular basis.