

PURPOSE:

To create uniformity and consistency throughout the organization, CAT will follow a system for the development, revision, implementation, and approval of codes, programs, plans, policies, procedures, and standard operating procedures (SOP) (collectively “processes”).

DEFINITIONS:

1. ***Code of Business Conduct and Ethics (the “Code”):*** The Code of Business Conduct and Ethics sets forth the guiding principles by which we operate our company and interact with each other, our contractors, customers, and our stockholders.
2. ***Program or Plan:*** A Program and/or a Plan is a written document that clearly explains an agency objective, with details on what work is to be done, by whom, when, and what means or resources will be used. They state the overall objective and often point to policies and/or SOPs for specific details on accomplishing the objective. Programs and/or Plans explain the overall system for accomplishing the stated objective internally to CAT employees and externally to governing agencies. Programs and/or Plans are usually tied to a regulatory requirement that CAT is obligated to follow.
3. ***Policy:*** A policy is a written document that states the guiding principles by which the agency will operate. A policy tells employees about CAT’s requirements regarding a specific topic (attendance, employee grooming, vacation, etc.). Policies may or may not be tied to a legal requirement, however, they state the agency’s philosophy regarding a given topic. Policies are agency rules that typically stay internally within CAT.
4. ***Procedure or Standard Operating Procedures (SOP):*** A Procedure and/or SOP describes the process of getting the work done or achieving a goal. A Procedure and/or SOPs are instructions to employees describing exactly how to implement Programs, Plans, and/or Policies by detailing precise steps that need to be followed.

SPECIFICS:

1. All CAT departments must have written processes that address issues related to compliance with laws and regulations in their areas. These processes must be current and accessible to affected employees.
2. Employees at all levels are responsible for identifying activities within their areas that should be documented through written processes.
3. All processes must be in the format of the appropriate template identified in attachments A through D.

4. The Board of Directors is responsible for approving Codes, Programs, Plans, and Policies related to the overall operation and regulatory compliance of CAT.
5. The Executive Director/CEO must approve any Process prior to submission to the BOD.
6. The Executive Director/CEO is responsible for approving Procedures and SOPs that structure the functions of the agency and enforce the codes, programs, plans, and policies enacted by the Board of Directors.

PROCEDURE:

1. *Development of Processes*
 - a. Any areas of compliance risk within a department must be addressed through official agency processes as identified within this Policy.
 - b. The department must identify whether a current process addresses the compliance risk and has been approved by the appropriate level of authority. If no approved process is in place, the department must develop a new process to address the compliance risk with the approval of the appropriate level of authority.
 - c. The process document will use Times New Roman size 12 font with single-line spacing and must follow the approved templates attached to this Policy. The author of the document may receive an electronic copy of the process template by contacting the Compliance Department.
 - d. When developing a new process, sentences should be short, focused and simple. The objectives the process seeks to achieve must be clearly stated. The steps required to meet the goals of the objective must be defined.
 - e. The header or title page of the process template must identify the process title, process type, and the appropriate approver. The footer or title page of the process must include the process number, revision number, the effective date of the process, the original approval date of the process, and identify whether the current process replaces another process. The process number should be developed as follows:
 - i. First, apply the approved alpha prefix in all capital letters for the originating department (see Attachment E).
 - ii. The department prefix must be followed by a period and the fiscal year that the process is created. The fiscal year must be followed by a period and a two-digit number corresponding to the sequential order of the processes created by the department during the applicable fiscal year. An example process number is: COMP.2021.01

- f. If applicable, the “PURPOSE” portion of the process provides a general statement describing the intent of the process.
- g. If applicable, the “DEFINITIONS” portion of the process defines unique terms that are used within the process.
- h. If applicable, the “SPECIFICS” portion of the process provides a detailed description of why the process exists. Topics that may be addressed include: legal or regulatory reasons for the process, overall benefits of the process, and/or a description of a conflict or problem the process will resolve.
- i. If applicable, the “PROCEDURE” portion of the process states the principal tasks required for performance of the process. This is usually provided in a step-by-step format.
- j. If applicable, the “REFERENCES” portion of the process lists any State, Federal or other applicable CAT guidelines that relate to the current process.
- k. If applicable, the “APPLIES TO” portion of the process is a description of the affected employees, departments and functions.
- l. If applicable, the “ATTACHMENTS” portion of the process lists any attachments to the process.

2. Approval

- a. The Division Chief must review and approve the completed process prior to submission.
- b. Once approved, the Division Chief will submit the process document to the Compliance Department to coordinate the agency approval process. The responsible Division Chief will submit a brief statement of the issue(s) in question, a description of how the process proposes to address such issue(s), and a plan for implementation (including any training and communication required).
 - i. The submitted process must have the term “DRAFT” as a watermark on the document.
- c. The Chief Administrative Officer (CAO) will coordinate CEO and BOD approval of the process.
- d. The Division Chief will be notified of any BOD committee or meeting dates and should be prepared to have a presentation available that describes the issue(s) in question, describes how the process will address the issue(s), and the plan for implementing the process.

- e. If revisions to the proposed process are required, the responsible Division Chief will make those revisions. Once the revisions are completed, the Division Chief will re-submit the process in accordance with this Policy. If no revisions are required and the process is approved, the Compliance Department will provide a final version of the process to the responsible Division Chief.

3. Revisions or Replacement of Existing Processes

- a. If a department seeks to revise a process, the responsible department will make the required revisions to the process in question by following the steps required in this Policy and modify the process footer as follows:
 - i. Process Number – Follow step 1(e) above;
 - ii. Rev. No. – Insert the revision number;
 - iii. Effective Date – leave blank;
 - iv. Original Approval Date – Insert the original date of the process;
 - v. Replaces – Insert “N/A”.
- b. If a department seeks to replace a process, the responsible department will prepare the new process by following the steps required in this Policy and modify the footer as follows:
 - i. Policy Number – Follow step 1(e) above;
 - ii. Rev. No.: - Insert “N/A”.
 - iii. Effective Date – leave blank;
 - iv. Original Approval Date – leave blank;
 - v. Replaces – Insert the process number of the process to be replaced
- c. The proposed revised or replacement process must follow the approval steps identified in Section II of this Policy.
- d. The Compliance Department will move the original revised or replaced process to a section designated for replaced processes and, if applicable, coordinate with Human Resources to remove the superseded process from the employee manual.

4. Implementation of Policies and Procedures

- a. After approval of process, the Compliance Department is responsible for preparing the process in its final format. The Compliance Department will:
 - i. Put the approval date in the header of the process;
 - ii. Remove the “DRAFT” watermark from the process;
 - iii. Complete the Effective Date and Original Approval Date in the footer of the process;
 - iv. Convert the process into a pdf document.

- b. The Compliance Department will distribute approved processes to the applicable Division Chief and place the document on the agency's shared drive and, if appropriate, the agency's website.
 - c. The Division Chief will be responsible for distributing the processes to those employees and departments or functions under his/her control that are identified in the "APPLIES TO" portion of the process.
 - i. The Division Chief may distribute the process as a paper copy or an electronic copy in pdf format.
 - ii. The process must be distributed in the final approved format that is received by the Division Chief from the Compliance Department.
 - d. The Division Chief will follow through with the implementation plan as described in the approval process.
5. Exceptions
- a. Approval by the original approving authority must be obtained for any exceptions to a process.
 - b. Any exception granted must be in writing by the approving authority and must be provided to the Compliance Department.

REFERENCES:

None.

APPLIES TO:

All CAT employees and Departments.

ATTACHMENTS:

- A. Program/Plan Template
- B. Policy/Procedure Template
- C. Procedure Template
- D. Standard Operative Procedures (SOP) Template