I. PURPOSE

The purpose of this policy is to provide general standards for the development, review, revision, and repeal of DOC administrative rules and policies. Health Services policies, procedures, and protocols are maintained by Health Services and do not fall under the provisions of this policy.

II. DEFINITIONS

A. Administrative Rule: Any agency directive, standard, regulation, or statement of general applicability that implements, interprets or prescribes law or policy, or describes the procedure or practice requirements of any agency. The term includes the amendment or repeal of a prior rule, but does not include any exception described in ORS 183.310(9), including, for example, internal management directives, regulations, or statements that do not substantially affect the interests of the public, and remain within the Department and its officers and employees.

B. Directive: An “administrative rule” or “policy” as described in this policy. This term does not include operational procedures.

C. Directive Owner: The Assistant Director or Administrator who is responsible for directing the development, revision, and review of directives assigned to them.

D. Division Contact: Staff person assigned by a division Assistant Director or Administrator to be division point of contact for the agency rules coordinator. The division contact is responsible for tracking the development and review of directives.

E. Executive Team: The executive leadership of the department that provides direction and oversight to department operations.
F. Facilitator: The person assigned by the directive owner to oversee the development, revision, or review of a specific directive.

G. Operational Procedure: A written instruction to staff to implement a policy that is required or authorized to be developed at the functional unit level.

H. Policy: A written statement describing how the department will conduct business, and is not an administrative rule or operational procedure.

I. Rules Coordinator: The agency Rules Coordinator maintains DOC administrative rules and policies. The Rules Coordinator is responsible for ensuring proper classification of a directive, consistency of content with other directives, and that directives are reviewed in accordance with this policy.

J. Stakeholders: One or more DOC persons identified by the workgroup who may be impacted by directive development and can provide input.

K. Subject Matter Expert: A person identified by the directive owner who is knowledgeable on a subject area.

L. Workgroup: One or more persons responsible for developing, revising, or reviewing a directive.

III. POLICY

A. Directives

Directives must reflect the department’s mission, core values, and professional standards.

1. Rules: All administrative rules shall be processed in accordance with the Administrative Procedures Act (ORS Ch 183), the Attorney General’s model rules, and the rules on Rules Development (OAR 291-001).

2. Policies:
   
a. DOC policies establish core values and direct and guide staff to set the parameters and expectations of professional standards.
   
b. Policies must align with administrative rules, and may not be developed in lieu of an administrative rule, or to alter, expand, clarify, interpret, or replace an existing administrative rule.
   
c. A policy may require, permit, or prohibit functional units from developing operational procedures to implement any or all portions of a policy. A policy shall specify whether a policy permits the development of operational
procedures, and any limitations or restrictions on the development of operational procedures.

d. Format: A policy must include the following sections:

   (1) Purpose

   (2) Definitions (if necessary)

   (3) Policy: Includes a statement that introduces the policy and general standards and procedures that constitute the main body of the policy.

   (4) Implementation: Indicates whether an operational procedure is required, permitted, or prohibited. If the Implementation section indicates the policy shall be adopted “without further modification,” that means an operational procedure shall not be written to further explain the policy.

B. Directives Development Process

1. The development process is outlined in the Directive Development Flowchart, attachment A. Directives are created or revised as directed by the directive owner to:

   a. Align with changes in statute, administrative rule, or statewide (DAS) policy; or

   b. align to new business needs, practices, processes, or strategies (e.g., internal control, clear and concise clarification of standards).

2. Responsibilities of the directive owner:

   a. Direct the development, revision, and review of assigned directives.

   b. Assign a facilitator responsible for overseeing the development, revision, or review of the directive.

   c. Notify division contact of directive development for tracking purposes.

   d. Keep rules and policies current within the review standard (every five years).

   e. Determine whether directive should submitted for legal review. See DOJ Guidance Document, attachment B.

3. Responsibilities of division contact:
a. Track all ongoing directive developments for division to include the directive (name, number) and the assigned facilitator.

b. Track all ongoing directive reviews for division to include the directive (name, number) and the assigned facilitator.

c. Provide the Rules Coordinator with an update on all ongoing directive developments and reviews by the first of every odd month.

4. Responsibilities of the facilitator:


b. Establish a workgroup that includes a subject matter expert. The workgroup representatives may be from a particular division or multiple divisions, from different functional units, and geographical regions of the state.

c. Establish a communication plan (staff, inmates, public) for implementation of the directive.

d. Establish an implementation plan that includes a timeline. The implementation plan should include training and automation requirements.

e. Involve the Attorney General’s office in the development process after consultation and approval of the directive owner.

f. Obtain Executive Team approval once the directive has been completed as outlined in the directive development flowchart.

g. Maintain contact with the Rules Coordinator and provide updates as necessary.

h. For administrative rules only: Work with the Budget Office to prepare a fiscal impact statement by submitting the final rule draft and completed Directive Development form to the Fiscal Impacts email distribution list.

5. Responsibilities of the workgroup:

a. Review enabling statutes, rules, policies, or standards that impact the directive, including the revision or creation of another directive.

b. Review current DOC practices and processes.

c. Solicit input from internal DOC stakeholders.
d. Determine training requirements.

e. Determine automation requirements.

f. Draft the directive.

6. Responsibilities of the Rules Coordinator:

a. Review directives ensuring proper classification and consistency of content with other directives.

b. Prepare the directive for the Director’s or designee’s signature and file the necessary documents with the Secretary of State’s Office for administrative rules.

c. Send the notification to staff and interested parties of changes in directives.

d. Maintain directives in accordance with established retention schedules, and place directives on the DOC website.

C. Directives Review Process

1. Directives shall be reviewed every five years.

2. The Rules Coordinator will maintain a database of directives that includes the last review date. The Rules Coordinator will send quarterly reports to the directive owners on the status of directives.

3. The directive owners are responsible to ensure that directives meet the review standard of every five years. The directive owner will assign a facilitator to complete the review, and notify the division contact for tracking.

4. The review shall ensure the directive is current and aligns with DOC practices and general procedures; related forms are relevant; and statutory references are accurate.

   a. If revisions are required, the assigned facilitator will notify the directive owner, and will initiate the directive development process described in Section B above.

   b. Policy: If no revisions are required, the policy will remain unchanged. The facilitator will complete the directive review form and submit it to the division contact for tracking and signature by directive owner. The division contact will submit completed/signed directive review form to the Rules Coordinator who will update the policy for signature with a new effective date.
c. Rule: If no revisions are required, the facilitator will complete the directive review form and submit it to the division contact for tracking and signature by directive owner. The division contact will submit completed/signed directive review form to the Rules Coordinator to update the database with a new “last review” date.

5. In accordance with ORS 183.405, administrative rules adopted after January 1, 2006, must be reviewed no later than five years after the rule was adopted. The Rules Coordinator must coordinate the review and report findings to the Secretary of State’s Office.

D. Manuals (Hard Copy)

1. The Rules Coordinator will maintain a master set of the rules and policies manuals, as well as the internal distribution list for institutions.

2. Each institution will maintain a sufficient number of hardcopy rule and policy manuals that are made readily accessible to inmates and to ensure continuity of operations. Institutions should rely on the online copy of the directives whenever possible.

3. The Rules Coordinator will provide an electronic copy of the directive updates to each institution. In addition, the Rules Coordinator will provide hardcopies as described in this subsection:

   a. Minimum institutions will receive four hardcopy packets.
   b. Medium institutions will receive six hardcopy packets.
   c. Maximum institutions will receive six hardcopy packets.
   d. Institutions that maintain more hardcopy sets of manuals than hardcopies provided will use the electronic packet to print additional copies.

4. Hard copy manuals maintained in the institutions will be updated within one week following a directive update issued by the Rules Coordinator.

5. Each institution will be responsible for designating an employee to review all hard copy manuals to ensure they remain current. This review will commence upon receipt of the Rules Coordinator’s annual report showing rules and policies updated that year.

III. IMPLEMENTATION

This policy will be adopted immediately without further modification.