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From:Patricia Rideout [Patricia.Rideout@easternhealth.ca]Sent:Tuesday, February 13, 2007 4:09 PMTo:Senior Management and Assistants Eastern Health Properties; Executive Team Eastern<br/>Health May 2005; HCCSJ All Managers; Management Support; Tracy TizzardDroverSubject:Policy Development Framework, Manual, and TemplateAttachments:Policy Development Framework.pdf; Policy Dev. Flow Chart - Pre-Development(FINAL).pdf;<br/>Policy Dev. Flow Chart - Development Phase(FINAL).pdf; Policy Dev. Flow Chart -

Implementation(FINAL).pdf; Where to Begin with Policy.pdf; Policy Development Working Template.dot

To: All Management and Management Support, Eastern Health

Please find attached files comprising the policy on Policy Development. The main document is the Policy Development Framework, which explains the Eastern Health policy structure and outlines the process for developing policies. It is accompanied by three flow charts illustrating the process of developing and implementing a policy. We are also providing you with a policy writing handbook, titled "Where to Begin with Policy."

Finally, also attached is a template of the policy development form. Please use this template when you are developing and writing any policies to ensure that you have covered all necessary areas in the development process.

Please distribute the attached files to all management and management support within your program or department. This policy will be part of the new Eastern Health Policy Manual. However, since the new binders are not yet ready for distribution, managers are asked to ensure that the policy is made accessible to all staff within their area until the binders are received.

If you have any questions about this policy or if you would like help in developing policies for your area, please contact Tracy Tizzard-Drover. If you are unable to open the attachment s, please contact me at 777-6838 or by e-mail.

Sincerely, Patricia Rideout CPS

Phone: (709) 777-6838 Fax: (709) 777-8257 E-mail: <u>Patricia.Rideout@easternhealth.ca</u>

9/5/2007



# **Policy Development Template**

The following template has been developed to **guide** Policy Developers through the intricate details and considerations of policy development. This guide will allow the developer(s) to address important issues in the development of a policy so that functional mandates can be conveyed and negative impacts mediated.

The layout of the template is designed with consideration of the policy approval process. That is, once the policy template is completed, the Issuing Authority ('approver') is able to assess the policy as it will appear on the Intranet and/or in the Manual (see page 2 & 3).

The 'For Office Use Only' section includes concepts/questions that may not appear on the actual policy but are nonetheless important in the development process. Review of these concepts/questions is essential in the establishment of a functional policy.

Definitions are provided below to assist the developer(s) in understanding the information required for policy development. If there are any questions/concerns please contact the Planning Specialist responsible for Policy Development/Integration @ 777-5969.

# **Definitions & Instructions**

### **Ethical Review**

A review of the ethical considerations of the proposed policy is necessary to ensure that the proposed policy reflects the Mission, Vision and Values of Eastern Health and is representative of wider cultural norms.

### Linkages

This refers to other documents/forms/websites with which this policy should be linked. For example the travel policy would be linked to the travel claim form.

### **Issuing Authority**

The senior administrative officer that is responsible for the approval and overall operation of a policy (newly developed or revised).

### Office of Administration Responsibility

The office responsible for executing the policy, assisting with the development or re-development activities and assisting with compliance monitoring.

### **Policy History**

It is important to include the history of the policy so as to identify any title and number changes as well as to outline the specific time the policy was in effect and the policies the new policy replaces.

#### **Policy Name**

If in the case of a revised policy, list current policy title and number in addition to any proposed title change.

### Purpose

The purpose statement expresses "why" the policy is being written. It may also contain or cross-reference 'background' materials or more explanatory details regarding legal, regulatory or other factors that led to the development of the policy. Some other reasons could be resolution of current conflict, recognizing the legitimate interest of all parties involved, overall benefits, etc. Another consideration is, 'Does it align with the lines of business of Eastern Health?'

### **Resource Allocation Review**

A review of how a policy could impact current resources is vital to understanding how a policy could impact overall service delivery. It is important that during policy development resource allocation any funding requirements are assessed and outlined.

#### **Review Date**

Regular review of policy(s) allows an organization to provide service delivery that is reflective of current best practices. A review date would typically be 12 months after commencement of new policy and every 3 years after; however, this may vary considering content.

### Scope

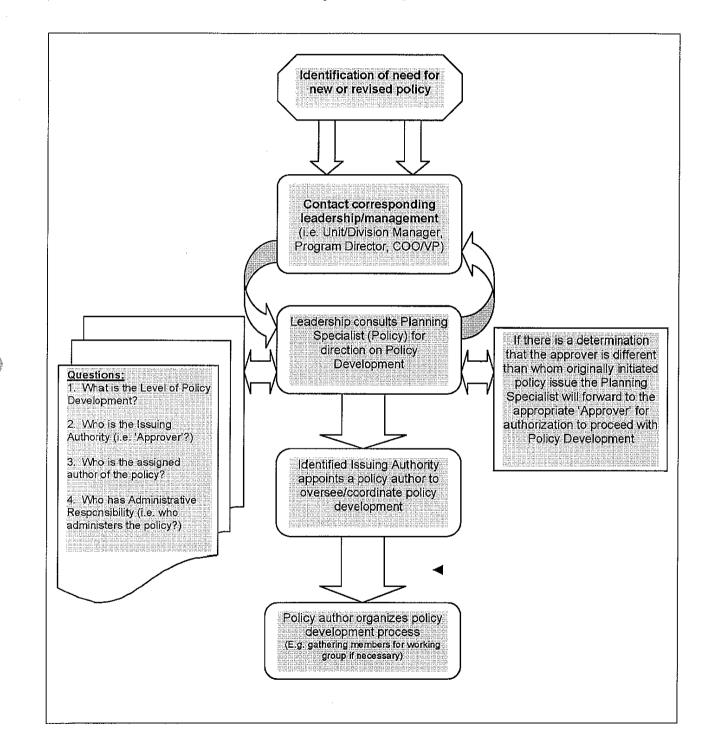
The scope of the policy can set important parameters such as to what (e.g. paper and electronic records) and/or whom (e.g. staff, students, patients, visitors, etc.) the policy will apply

#### Supporting Documents – References, & Related Information

It is possible that there are other policies or organizational documents that complement, supplement or help explain any provisions contained within the current policy. Reference to other policies, best practice research, organizational documents and/or citations to statutory or regulatory items can improve the usefulness of the policy. A list should be attached to this template when submitting. ,

# Eastern Health Policy Development

# **Pre-Policy Development Phase**



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Policy Name:

# Governance

POLICY DEVELOPMENT		
FRAMEWORK		

# GOV - 050

Issuing Authority (sign & date)	George Tilley (CEO & President) Signed by George Tilley, February 8, 2007
Office of Administrative Responsibility	Corporate Strategy and Research
Author	Tracy Tizzard-Drover
	(Planning Specialist)
Level	One (I)
Original Approval Date	December 20, 2006
Effective Date	December 23, 2006
Review Date	December 20, 2007
Revision Date(s)	

### Overview

Policies need to be clear, concise statements of expected behaviours, practice and standards. As policy reflects the values of Eastern Health, it is important that new and existing policy be developed or revised using an effective and consistent approach. This supports the organizations' commitment to being an exemplary organization, one that seeks to adopt best practices in dealing with administrative and clinical matters.

# POLICY

Policy development must be a planned activity allowing for appropriate due diligence and thus be sufficiently researched, legislation compliant and not overlap or contradict other policy(s). It must be consistent in intent, philosophy and format.

Policy development must have a clearly defined author and Issuing Authority ("Approver"). Authorship is organized using the Policy Development Template and may be done individually or in a working group. Under this framework committee development is not necessary. Working



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groups can assemble and disband once policy development has concluded. Policy development or revision can occur on 1 of 4 levels; Level I represents Global policy, Level II is Network/System policy, Level III is Program/Department/Discipline specific policy and Level IV is Unit/Division specific policy (See Policy Development Definitions).

Level I & II policies are submitted to the Eastern Health Policy Advisory Committee (EHPAC) for additional review (if necessary) and then sent to the corresponding Executive member for approval. Level III & IV policy development is guided and approved by the corresponding Director.

Policy is reviewed regularly and revised where major change(s) take place in the mission, philosophy, structure, relevant legislation, standards, programs and services. For revised policy, the hardcopy original must be retained for seven (7) years.

Policies are accessible on the organization's Intranet and in Regional (Eastern Health) Policy/Directives Manual. Directors and managers are responsible for appropriate communication of policy and monitoring compliance.

The Issuing Authority determines the Effective Date of policy and sends to Planning Specialist who issues an appropriate numbering sequence.

# Scope

Apply to all members of Eastern Health.

### Purpose

To ensure Eastern Health's policy is well referenced, serves its audience and is appropriately compliant with the mission, vision and values of Eastern Health. A regional Policy Development Framework will provide standardized guidance and direction to the development of policies that represent the most appropriate, efficient and effective delivery of services within Eastern Health.

Procedure (See Policy Development Flowcharts)

### **Pre-Policy Development Phase**

1. An idea for policy development is brought forward to



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management and once the decision is made to continue, the Planning Specialist responsible for Policy is contacted.

2. The Planning Specialist determines the level of policy development and the "Approver" of the proposed policy.

Originating Policy Level	Issuing Authority ("Approver")
Global	CEO/COO/VP
	or Executive Designate
Network/System	COO/VP
	or Executive Designate
Program/Department/Discipline	Director
Specific	
Division/Unit Specific	Director

3. Once the level of policy development and "Approver" are identified, the "Approver" assigns a policy author who coordinates policy development. If the "approver" is different than who initiated the policy development, the Planning Specialist contacts the appropriate "Approver" for authorization to proceed with policy development.

### Policy Development Phase

- 1. The Policy Development Template (See Policy Development Template) is completed by the policy author(s) and sent to the Planning Specialist (Level I & II policy) or Director (Level III & IV policy).
- The Planning Specialist (for Level I & II policy) or Director (for Level III & IV policy) reviews the Policy Development Template and provides feedback where necessary. The Planning Specialist or Director may send back to author for further revision/clarification.
- Once in final draft, the Planning Specialist submits the final draft of the Policy Development Template (for <u>Level I & II</u> policy) to the EHPAC and to other internal committees (if necessary) for further consultation. The EHPAC reviews policy and provides written feedback (if necessary) to the corresponding author and "Approver."



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For <u>Level III & IV</u> policy the final draft is submitted directly to the Director. The Director may consult the Planning Specialist.

4. The "Approver" receives the final draft of the Policy Development Template and a decision to approve/deny policy is made. If policy is denied, appropriate feedback to the author(s) is suggested. If policy is approved, the "Approver" determines an Effective Date and sends to the Planning Specialist for Policy Implementation.

### Policy Implementation Phase

- The responsibilities of the Planning Specialist include:
- Issuance of policy number (all levels of policy);
- Coordination of Web inclusion;
- Initiation of rescission process;
- Filing of current policies and archiving of former policies the hardcopy original of a revised policy <u>must</u> be sent to the Planning Specialist (all Levels);
- Facilitation of a review process (Level I & II policies only);
- Facilitation of a communication/education process (Level I & II policies only).

For <u>Level III & IV</u> policy development, the <u>policy author</u> will assume responsibility for coordination of the review and communication/education process.

# Supporting Documents (References, Industry Best Practice, Legislation, etc)

- Policy Development Template
- Policy Development Flowcharts:
  - Pre-Policy Development
  - Policy Development
  - Policy Implementation
- Where to Begin with Policy...

### **Key Words**

- Policy Development
- Policy Framework
- How to VVrite Policy



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Policy

# **Definitions & Acronyms**

Policy	Policy is a guiding or governing principle that mandates or constrains action(s). It is a specific directive that prescribes limits and pinpoints responsibilities within an organization and can be viewed as law, rule or expectation. It helps ensure compliance and/or reduces organizational risk. All staff are expected to follow policy to which action may be taken if not followed.
Policy Development Template	A template that assists the author in defining the policy while providing due diligence to all the aspects of policy development. It includes defining the purpose and scope of the policy issue, affirming stakeholders and defining their role in development, summarizing changes in wording for policy revisions, developing vetting protocol, suggesting evaluation measures and reviewing schedule and indicating how policy is to be operationalized.

# **Policy History**

Policy Name (if different)	AHCIB – Policies (Issuance of) HCCSJ – Policy Development & Distribution
	<b>PHCC</b> – Departmental Approval – Policy & Procedure, Policy and Procedure Distribution, Policy and Procedure Review & Revision
	SJNHB – Policy Development Process
Policy # (if different)	AHCIB – 1000 HCCSJ – III-30
	<b>PHCC</b> – I-60, I-70, I-80
	SJNHB – R-INT-10
Date(s) Revised	December 20, 2006

Key:

AHCIB - Avalon Health Care Institutions Board HCCSJ - Health Care Corporation of St. John's PHCC – Pennisula's Health Care Corporation

SJNHB - St. John's Nursing Home Board