

Developing a Policy and Procedure Manual

DEVELOPING A POLICY AND PROCEDURE MANUAL FOR HEALTH PROVIDERS/PROGRAMS

Introduction

Most every professional is aware of the need for policies and procedures. However, there are many professionals that are unable to differentiate between a policy, a procedure, and a Standing Order. Also, many professionals are not certain of which items should be included in a policy and procedure manual. This brief section will present guidelines for policies and procedures and will also present a sample Table of Contents (or guidelines) on what items should be contained in a policy and procedure manual.

Policies and procedures support the goals and objectives of the organization by providing the means for accomplishing the goals and objectives of an organization. Policies and procedures clarify and standardize the discipline or program's guiding rules. Policies will answer the **why** and **what** concerning the discipline or program and its role in the organization. Generally, policies pertain more to administrative matters.

Procedures tell **how** the policies will be carried out. Generally, in the health field, procedures pertain more to clinical matters.

Standing Orders are specific treatment (usually a medication but it can be another type of therapy) to be used under specific instances. Every procedure must have a policy but not all policies have a procedure.

Every Health program or discipline faces the task of developing a policy and procedure manual (PPM). The primary purpose for developing a PPM is to enhance communication:

- with other health providers and staff,
- with other accrediting agencies and organizations,
- and, with clients and the community.

In some cases the components of a PPM may be required by state law, accreditation standards (JCAHO or AAAHC, CARF, etc.), professional practice acts, Standards of Practice from professional associations, from institutional policies, quality of care issues, program evaluation considerations and to ensure continuity of care.

POLICIES

Policies flow from planning and are a very useful connection between goals and action. With the development of clear plans, policies can be set to give useful guidelines for making decisions and implementing plans.

Policies explain how the goals of the organization will be achieved and serve as guides that define the general course and scope of activities permissible for goal accomplishment. They serve as a basis for future decisions and actions, help coordinate plans, control performance and increase consistency of action by increasing the probability that different managers will make similar decisions when independently facing similar situations. Policies also serve as a means by which authority can be delegated.

Policies can be implied or expressed. Implied policies are not directly voiced or written but is established by patterns of decisions. They may have either favorable effects or unfavorable effects and represent an interpretation of observed behavior. Express policies may be written or oral. Oral policies are more flexible than written ones and can be easily adjusted to changing circumstances. However, they are less desirable than written ones because all staff may not know them.

Policies can emerge in several ways – originated (internal), appealed, or imposed (external). The originated policies are usually developed by top management to guide subordinates in their function.

PROCEDURES

A procedure is a system that describes in detail, the process or steps taken in order to accomplish a job. Procedures supply a more specific guide to action than policy does. They emphasize detail while policies concentrate on more general principals. Procedures help achieve a high degree of regularity by

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enumerating the chronological sequence or steps taken. Procedures are interdepartmental or intradepartmental and consequently do not affect the entire organization to the extent that policy statements do.

Improvement in operating procedures increases productivity. Waste in performing work can be decreased by applying work simplification that strives to make each part of a procedure productive. First one decides what work needs simplification by identifying problem areas. Next the work selected is analyzed carefully and in detail. Charts that depict the components of the work and the workflow are useful for motion or procedural analysis.

Writing procedures demands a consistent format that considers the definition; purpose; materials needed, and how to locate, requisition, and dispose of them; steps in the procedure; expected results; precautions; legal implications; and responsibilities. Each step in the procedure leading to the accomplishment of a goal should be necessary and in proper relationship to other steps. Balance between flexibility and stability should be maintained. Each procedure should be easily replaced with a revised one.

Procedures:

- Describe what, who, where, when, and why
- Define terms
- Explain how to use the procedure
- Has a header:
- Subject
- Purpose
- Scope/Staff Governed
- Effective date
- Date Reviewed/Revised
- Approved by
- Distribution
- Parts, Forms Needed
- Cautions, Notes
- Summary
- Describe the Process
- Arrange the steps in order
- Assign the actions
- Describe each step
- Establish requirements – equipment, materials and other prerequisites
- Identify decisions and verifications
- Note special conditions and cautions

Definition of Terms

A clear definition of terms should be included in any policy and procedure manual.

Creed - A belief or faith that lacks precision but serves as a foundation upon which policies are developed.

Law - A statement of an order that is invariable under given conditions. Laws are rigid statements providing a framework for policy promotion.

Policy - An understanding by members of a group that makes the actions of each member more predictable to other members. A policy clearly defines the range within which individual decisions can be made and encourages clear and forceful decisions. Policy can also be described a standard of practice or prudent practice; a line or course of action. Policies pertain more to administrative matters.

Practice - The usual mode of handling a given problem. A practice stresses expediency and things, as they are, a policy stresses direction and things as they should be.

Practice Guidelines - Descriptive tools or standardized specification for care of the typical patient in the typical situation, developed through a formal process that incorporates the best scientific evidence of effectiveness with expert opinion. Synonyms or near synonyms include criteria, parameters, protocol, algorithm, review criteria, preferred practice pattern, and guideline.

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Practice Parameters – Strategies for patient management, developed to assist practitioners in clinical decision making. Practice parameters include standards, guidelines, and other management strategies.

Principle - A universal statement that remains true even when conflicting statements may be claimed to be valid. A principle is valid and cannot be good or bad; a policy may be good or bad; but it is valid only in the sense that someone has decided that it is to be used as a guide.

Procedure – A system that describes, in detail the steps to be taken in order to accomplish a job. Procedures emphasize details; policies concentrate on basic general principles. In the health field, procedures pertain more to clinical matters.

Process - A goal-directed, interrelated series of actions, events, mechanisms, or steps.

Protocol -- The customs and regulations dealing with the management of certain specific situations.

Rule - A statement of precisely what is to be done (or not done) in the same way every time with no permitted deviation. Rules allow no range for decision-making; policy encourages decision-making by offering guides.

Standards - A statement of expectation that defines the structures and processes that must be substantially in place in an organization to enhance the quality of care.

Standing Order -- Specific treatment (usually a medication but can be another type of therapy) to be used under specific instances.

From these definitions it can be seen that policies and procedures are general, generic guidelines for practice, while protocols and standing orders are specific guidelines for specific instances.

Advantages and Disadvantages of Written Policies

Although the overall purpose of written PPM is communication, several advantages and disadvantages of this communication can be identified, and indicated below:

Advantages of Written Policies and Procedures:

1. They define the scope of practice for an individual, discipline or program of Health Providers.
2. They provide guidelines for new Health Providers or students.
3. They help set the standards of care for the community in which the Health facility practices.
4. They provide documentation of the role and responsibilities of Health Providers and the organization.
5. They help the Health Provider, program or organization interface between physicians, nurses, other staff, clients and the community.

Disadvantages of Written Policies and Procedures:

1. It is time-consuming to write them.
2. They must be updated as needed to reflect any changes.
3. They document what you *must do* in a given circumstance, OR
2. If you ever decide to deviate from the written policy, you must provide adequate justification and documentation in writing.
3. A PPM that is not revised regularly as your program skills and abilities increase may limit the practice of your particular health discipline and can also limit your department.

Anatomy of a PPM

The following information suggests components to be contained in a PPM. All sections may not be necessary in your manual. Policy and Procedure Manual's vary according to the Health Provider's skills and practice setting.

Title Page and Date

A title page is not essential but adds to the professional appearance of the document. Include the date each time the PPM is updated.

Introduction

The introduction contains a paragraph or two on why you are doing what you are doing. It answers such questions as: *Does the community need this Health Provider, program, and discipline? Why are you writing this document?*

Who was involved in preparing this material? Discuss any unusual or culturally relevant community needs; purposes of writing this document and who was involved.

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Mission and Vision Statement of Patient Education

Philosophy of Care

The philosophy of care section contains statement(s) of your beliefs and the guiding principles that determine the practice of _____ at your facility. It should be consistent with the philosophy of pertinent health professional organizations and/or the Tribal hospital and clinics where you practice.

Key content areas include the following:

1. Beliefs/principles relating to client care such as quality, safety, awareness of consumer rights and responsibilities;
2. A framework that integrates your profession or program into one larger picture. For example, where does your _____ Program fit into the community? the Clinic? the Hospital? the IHS Area Program? the national IHS Program?
3. A discussion of the professional commitments you are making regarding the "currentness" of your Program, responsibilities, competency, and accountability.

Purposes/Goals of Practice

Purposes of general goals of your program should be outlined in this section. What do you plan to do for your clients and their families? What differences can your care make? Although goals can be general, try to make some of them measurable outcomes so they can be evaluated later. Most of your purposes should be congruent with those other Health Programs but they should also reflect the unique purposes of your program based on your own unique skills, location and/or population.

Functions and Responsibilities of the Health Provider, Program or Discipline

This is one of the most critical sections of the PPM as it defines the scope of profession. Therefore, it is important to spend some time on this section and draw from examples from other well-written Policy and Procedure Manuals.

Definition of Terms

Briefly define important terms that you will use in the PPM.

Responsibilities of Clients

A section on the responsibilities of clients might be included in order to clarify your expectations of clients. This section can be used as a tool when discussing the operation of your health discipline with clients. It may list client responsibilities such as:

1. Participation in their own care by keeping appointments, listening to advice and asking questions;
2. Participation in the educational process by reading appropriate pamphlets, brochures, viewing of video's, etc.;
3. Agreeing, if necessary, to participate in evaluations;
4. Recognizing the limitations of educators and accepting physician/hospital care as needed.

WORKING OUTLINE FOR PREPARATION OF A POLICY AND PROCEDURE MANUAL

1. Title Page
2. Introduction
3. Definition of Terms
4. Mission, Vision, Philosophy of Care
5. Purpose/Goals of Practice
6. Functions and Responsibilities
7. General Functions
7. Responsibilities of Clients
9. Additional Sections (as desired) date each page
 - Procedures
 - Standing Orders:
 - Protocols

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10. Orientation Program
11. In-service Education, Continuing Education
12. Quality Assurance
13. Policies and Procedures Approved by the Governing Board, Medical Staff and Administration
14. Copies Of Current Disaster and Fire Manual
15. Infection Control
16. Safety Policies -
17. Preventive Maintenance/Electrical on any Program equipment
18. Organization Chart - Specific to the department with documented relationships to Medical Staff, if any, and Administration (direct or indirect). Dated. Narrative statement also recommended.
19. Organization chart - copy of current, dated, hospital-wide chart on file in the Policy and Procedure manual.
20. Hours of operation, weekends, after-hours, or on call-coverage method.
21. Job descriptions - for each employee, dated.
21. Record of licenses, registration numbers with dates of expiration, updated regularly and filed in Personnel according to clinic/hospital policy for ongoing verification of current licensure including any teaching or State licenses, certification, RN licensure, CPR, Red Cross, Etc.
22. Copies of respective sections of JCAHO - and other appropriate standards and regulations.

SUGGESTED ADDITIONAL CONTENTS FOR A PATIENT EDUCATION POLICY AND PROCEDURE MANUAL

Annual Patient Education Work Plan
Budget/Spending Plans for Patient Education
Clinic/Hospital Organizational Chart
Any Grant Proposals for Patient Education
Goals and Objectives Statement
Monthly Reports
Quarterly Reports
Year End Reports
Patient Right's and Responsibilities
Personnel
Quality Assurance
Position Description
Scope of Work for Patient Education
Any Strategic Planning for Patient Education
Workshops/Training/In-Service Education Documentation