Policies and procedures

National Safety and Quality in Healthcare Service Standards (v1 & 2)

The health service organisation uses a risk management approach to:

a. set out, review, and maintain the currency and effectiveness of, policies, procedures and protocols
b. monitor and take action to improve adherence to policies, procedures and protocols
c. review compliance with legislation, regulation and jurisdictional requirements
Policy
A statement or set of statements that sets out the organisation’s expectations of its staff. It contains material that must be understood by, complied with and implemented across Alfred Health. Policies generally have wide organisational coverage or application.
Guideline
A document that establishes best practice for Alfred Health. This may include more detailed instructions (procedures or protocols) required to implement a policy or guideline. Guidelines may have organisational coverage, or be limited to one Program, Division or Department e.g. Pathology, Workforce or Cardiology.
Guideline Content and Structure

Content

- depends on intent
- scope the guideline
- consider size and end users
Guideline Content and Structure

Structure

- Target audience
- Purpose (*intent, objective, aim.....*)
- Guideline, procedure, protocol
- Training/education requirements if relevant
- ....how this guideline will be evaluated
Guideline Content and Structure

Structure

✅ Key related documents
  - Policies and guidelines
  - Legislation, acts and standards

✅ References (reflect evidence base)

✅ Authors/contributors – key contact

✅ Date approved / Review date

✅ Version / Document control
Governance process

Policy Coordinator contacted for information on development/approval process, templates, previous word versions

Guideline developed or reviewed with relevant consultation. Notification to Formulary Manager for any drug policies or guidelines or clinical guidelines with drug content. Final version sent to clinical governance unit with completed approval checklist

DRUG POLICIES AND GUIDELINES/CLINICAL GUIDELINES CONTAINING DRUG CONTENT

Final draft and checklist to be submitted to Drug and Therapeutic Committee for authorisation

Policy or Guideline only about drugs authorised by Drug and Therapeutics Committee

Clinical Guideline containing drug content

CGU arranges for final draft of guideline and completed approval check list to go to Operations Leadership Committee for authorisation

Authorised Guideline placed on Prompt by Clinical Governance Unit

CLINICAL GUIDELINE

Guideline affects more than one program

Relevant Program Director/ Clinical Service Director approves final draft of guideline

Relevant Head of Department/Unit authorises final draft of guideline

Authorised Guideline placed on Prompt by Clinical Governance Unit

Guideline affects one unit or program only

Guideline affects one profession only

NON CLINICAL GUIDELINE

Relevant Executive Director authorises final draft of guideline. Non-clinical guidelines with broader organisational implications may be referred to Operations Leadership Committee at the discretion of the Executive Director.

Final guideline draft and completed approval check list sent to Clinical Governance Unit.
Governance of guidelines

- Reason for development
- Appropriateness of target audience
- Relevant stakeholders consulted
- Implementation strategy - dissemination/education/change management, monitoring for unforeseen risks
- Evaluation strategy - evaluated at time of review
- Approval / authorisation
Key messages

- New guidelines are a dynamic process
- Think broadly about who your stakeholders are
- Monitor for the potential to introduce a new or unexpected risk