

# Los Angeles County Department of Health Services

Policy Title:	Development and Maintenance of Departmental Policies					
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### 1. Purpose of Policy

This document describes the process for the creation, review, approval, and promulgation of Los Angeles County Department of Health Services (DHS) policies. In order to make DHS-wide policies easily accessible to all DHS workforce members, these documents will be made available online (DHS Sharepoint Intranet), organized by category and policy number.

# 2. Definitions

- **A.** Office of Regulatory Compliance: The section within Human Resources responsible for the stewardship of the policy development process and the official policy template, guiding policies through the development process and maintaining a central repository of department polices.
- **B.** Policy: A set of principles designed to guide actions. A policy document may or may not be connected to a procedure. A procedure should be the minimum actions that apply across the department to fulfill the policy's principles. The policy should not include details such as the responsible office's protocol, nor actions that are optional or only desirable. This latter category of information may be provided in an Appendix section of the policy document.
- **C.** Policy Detail: The table included at the top of the Policy Template.
- **D.** Policy Impact Statement Template: A brief, confidential memo from a Responsible Executive to the Office of Regulatory Compliance, using the attached template, to propose a new policy or major revision to an existing policy.
- **E.** Policy Library: The online collection of documents available to all DHS staff, containing policies clarifying a variety of topics. All DHS-wide policies will be included in the Library.
- **F.** Policy Template: Use of the attached template is required for all DHS-wide Policies created and revised after August 15, 2014.

The mission of the Los Angeles County Department of Health Services is to ensure access to high-quality, patient-centered, costeffective health care to Los Angeles County residents through direct services at DHS facilities and through collaboration with community and university partners.

- **G.** Procedure: A series of steps to be followed, or particular actions to implement and/or perform a function and comply with a policy.
- **H.** Responsible Executive: Section/Unit head that sponsors, implements, and gains compliance for a DHS-wide policy. Typically, this will be the primary administrator of a policy or delegate with responsibility to provide guidance and update the policy, when necessary.
- I. Section/Unit: A section within DHS (ex. Audit and Compliance, Finance, Pharmacy Affairs, Office of Nursing Affairs).

## 3. Policy

### A. Purpose of Policies:

When conceptualizing and writing a Policy, the following should be considered. The Policy must:

- Support DHS's mission
- Promote efficient operations
- Ensure compliance with laws or regulations
- Reduce institutional risk
- Be clear and easy to understand

### B. Reasons for Improving the DHS-wide Policy System

DHS's online Policy Library will contain the DHS-wide policies meant to improve day-to-day operations and experiences of employees. It will allow for easy access to important guidelines and instructions for a variety of requirements and DHS priorities. By actively organizing these documents, DHS will ensure these policies are up-to-date and relevant.

### 4. Procedures

This section explains the steps to follow when writing, revising and/or instituting a DHS Policy.

# A. Template

Policies created or revised after August 15, 2014, and meant for *all* DHS workforce members, must use the DHS Policy Template (attached). All DHS-wide Policies must include the required information found in the table at the top of the template.

### **B.** Proposing a Policy

DHS-wide policies should be proposed when there is an observed or identified need to provide detail on a new or existing rule or regulation that is important to DHS's mission, operations and employee interests.

Any individual or unit may identify the need for a policy, but at least one Responsible Executive must sponsor its development and submit a policy impact statement to the Office of Regulatory Compliance. The impact statement will include the justification for the proposed policy and a list of stakeholders who will be consulted during the drafting and implementation of the policy.

The Office of Regulatory Compliance will consult with the Responsible Executive and then forward the impact statement to the appropriate DHS leadership authority for approval. This may include the DHS Deputy Director for Strategic Planning, Human Resources Director, Director of Nursing Affairs, Chief Medical Officer, Chief Financial Officer, Director of Quality Improvement & Patient Safety, etc. The Office of Regulatory Compliance is responsible for assuring the appropriate DHS leadership has approved the need for a new DHS-wide policy and anticipated stakeholders prior to moving forward.

### C. Developing a Policy

The approved impact statement will be used to guide the drafting of the policy by the Responsible Executive, with assistance from the Office of Regulatory Compliance and stakeholder feedback. The Responsible Executive is expected to work with his/her facility-based counterparts on policy development (for instance, the facility QI Directors on a DHS Quality policy) to ensure facility consultation and feedback regarding any potential conflicts, operational challenges and related policy needs. The Responsible Executive must also include the Human Resources Employee Relations Division as a stakeholder if the policy has the potential to impact employee working conditions.

The Responsible Executive should take the following into consideration when developing a new policy. Policies should:

- Use clear, concise, simple language. (Avoid jargon and unnecessary verbiage.)
- Be developed with the user in mind. Well-developed and thought-out policies provide benefits to the end user. Complex procedures will benefit from the input of users before the policy is finalized.
- Not be too technical, and should be understandable to a new employee.
- Use a flexible outline so that revisions are simple.
- Spell out acronyms upon first usage.
- Avoid information that may become quickly outdated.

### D. Reviewing and Approving a Policy

Upon notification from the Responsible Executive of final draft, the Office of Regulatory Compliance will distribute the draft policy to the appropriate DHS leadership authority for approval. The Office of Regulatory Compliance and Responsible Executive will make changes as directed by DHS Leadership.

Once all approvals are obtained, the Office of Regulatory Compliance will note the date of approval in the Policy Detail and electronically distribute the Policy to the Department through a formal announcement.

The Responsible Executive will be responsible for communicating the policy implementation to the facility stakeholders. Upon this notification, DHS facilities are expected to modify any facility-level policies to be consistent with DHS policy.

#### E. Updating or Withdrawing a Policy

Existing policies must be reviewed at least once every three years by the Responsible Executive or his/her delegate to ensure currency.

#### i. Routine Changes

The responsible office may request the Office of Regulatory Compliance to make routine changes (such as contact names, position titles, phone numbers and email/web addresses) to an existing policy at any time. The Office of Regulatory Compliance will note the date of such changes with a "U" in the Policy Detail to indicate an Update only.

#### ii. Revising a Policy

A Responsible Executive or delegate may initiate a revision to the substance or principles of an existing policy by submitting an impact statement to the Office of Regulatory Compliance. Following the policy review process and DHS leadership approval, the Office of Regulatory Compliance will note the date of revision with an "R" in the Policy Detail and distribute the revised Policy to the Department through a formal announcement.

#### iii. Withdrawing a Policy

A Responsible Executive may seek approval through the Office of Regulatory Compliance to withdraw an existing DHS-wide policy or to consolidate policies. The Office of Regulatory Compliance will withdraw outdated policies from the Policy Library, as needed.

#### F. Establishing an Interim Policy

Should an interim DHS-wide policy be required due to exigent circumstances, the Responsible Executive may seek an immediate promulgation of the interim policy from the Deputy Director for Strategic Planning or the Human Resources Director.

Interim policies may be effective for up to six months. Any extension must be approved by the Office of Regulatory Compliance and will be dependent on the Responsible Executive having initiated the process for policy review outlined above.

#### G. Communication and Training

The Office of Regulatory Compliance will issue an electronic announcement of any new or substantially revised policy, and update the on-line Policy Library. For policies that significantly alter normal operating procedures, the Responsible Executive should consider creating a training plan for the stakeholders and employees most impacted.

#### 5. Attachments

DHS Policy and Procedure Template DHS Policy Impact Statement Template