



Policy Development, Management and Governance Policy

1. Purpose

Under section 34(2)(i) of the *Health Services Act 2016* (WA), the WA Country Health Service (WACHS) is responsible for developing and implementing corporate and clinical governance arrangements, which includes policies, processes and systems for maintaining and improving patient safety, quality and care and corporate governance.

An effective policy development and management system is essential for good governance. The policy system serves to translate and operationalise the complex system of legislation, standards and whole-of-government policy into a coherent suite of meaningful instructions to WACHS staff.

Regardless of size or industry, every organisation needs to establish a clear set of policies to help guide operations. Policy documents communicate an organisation's culture, values and philosophy. These documents cover what employees can expect from the organisation, what the organisation expects from staff and what consumers and the community can expect from the organisation.

In the WACHS context, these documents translate and interpret legislation and other statutory requirements into clear direction for staff about their obligations, how to comply with these obligations, raise awareness of obligations and direct staff to relevant training and educational resources.

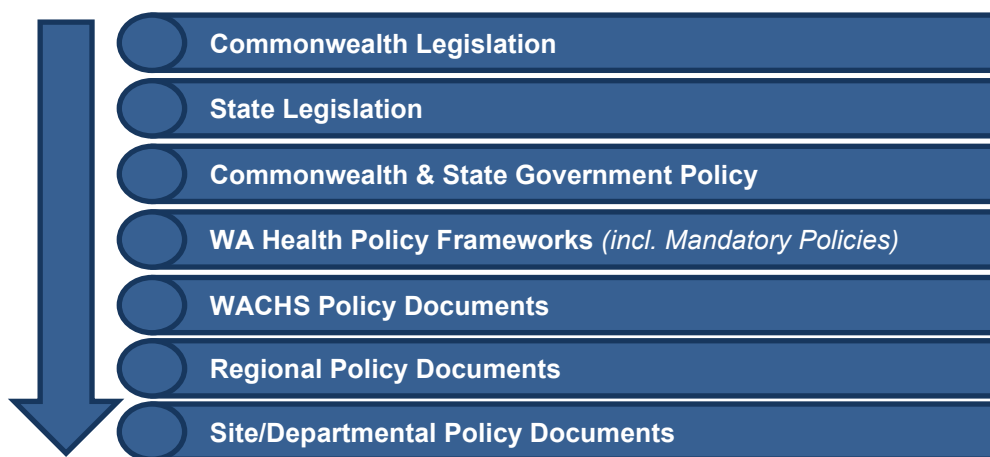
The aim of this policy is to ensure the quality and accuracy of policy information available to staff at all levels of the organisation, to provide increased consistency of information, and to reduce duplication and standardise knowledge of policy development requirements.

This policy supports compliance with WA Health Policy Frameworks (including Mandatory Policies), accreditation standards (including National Safety and Quality Health Service (NSQHS) standards, Mental Health standards and Aged Care standards), International and Australian Standards and any other applicable best-practice standards through having a WACHS-wide management system in place for the development, implementation and regular review of policy documents.

2. Policy Statement

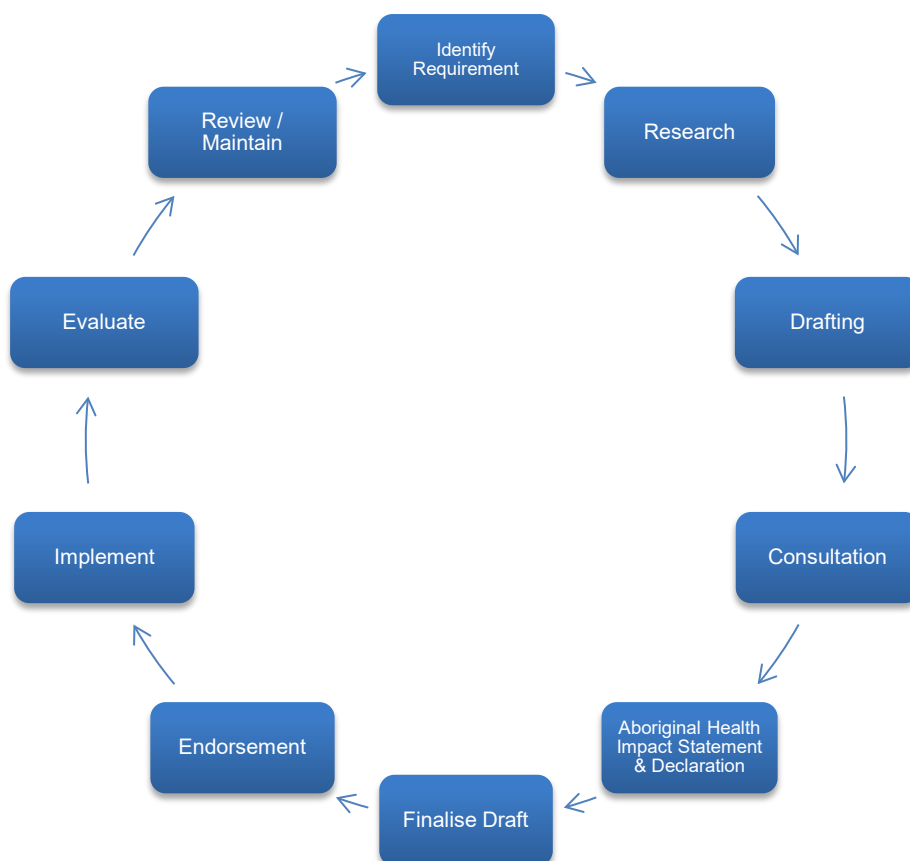
The WACHS Policy Development, Management and Governance Policy sets out the standards for the development and management of all WACHS policy documents.

All policy documents are to be consistent with those implemented at a higher level in the WA Health policy hierarchy (as per below diagram) as well as to non-mandatory strategic documents.



2.1 Policy Development

WACHS employs a risk-based approach to policy document development, in line with the Australian Policy Cycle (see references). The below is the WACHS policy cycle outlining the key steps for strong policy document development, with further information on each step available in Appendix A: Policy Cycle Steps (Detailed).



Identify Requirement: confirming with management and the appropriate Executive Sponsor there is a requirement for a new policy document to be developed.

Research: comprehensive policy research, review and analysis to ensure accurate and effective policy documents are developed. Consideration should be given to legislation, mandatory policies, other Health Service Provider (HSP) policies, government plans and

strategies and best practice. This will set the direction of the policy document and remove any ambiguity regarding scope.

Drafting: draft policy document using the WACHS approved policy templates available on the [WACHS Policies HealthPoint page](#).

Consultation: consultation is essential to ensure that information included within the policy document is current, legitimate and consistent. Policy documents must be pragmatic, practical and reflect business need, resulting in the need to consult as widely as possible in line with the policy document context and scope, whilst acknowledging time and resourcing limitations.

Aboriginal Health Impact Statement and Declaration: is a mandatory requirement for all policy documents as outlined in [Mandatory Policy \(MP\) 0160/21 Aboriginal Health Impact Statement and Declaration Policy](#). This declaration demonstrates that the interests of, potential impacts on, and opportunities for Aboriginal people are considered and appropriately embedded within the policy development process. Where there is a declared impact, the policy document must be provided to WACHS Aboriginal Strategy for review and feedback prior to finalisation.

Finalise Draft: finalise the draft policy document and cross reference against the Policy Checklist. Once the policy developer is satisfied with the document, the WACHS Policy Submission Form is to be completed. Once a final draft is submitted, the WACHS Policy Unit will review and undertake basic quality assurance (QA) over the document to ensure basic formatting requirements are met. For clinical policy documents, a Safety and Quality check will also be undertaken.

Endorsement: once WACHS Policy QA has been completed, documents will be provided to the appropriate Executive Sponsor(s) for review and endorsement.

Implement: once final endorsement is received, the WACHS Policy Unit will progress the formal publication and release of the policy document. Policy developers will be advised when this occurs so that they can subsequently implement, communicate with key stakeholders, provide any required training and education and undertake any change management required.

Evaluate: assess the policy after implementation and at intervals outlined within the policy document. This will ensure the policy document is understood, implemented and meeting the business need.

Review / Maintain: to ensure policy documents are current, legitimate and consistent throughout the life of the document (refer to section 2.3 Policy Document Reviews).

2.2 Risk Management Approach

Policy documents are important for ensuring that services and duties are carried out in a consistent manner to maintain safety in the workplace. Policy documents do not create or eliminate risks, rather serve as controls for the management of existing risks or mitigating future risks. When assessing the risk rating of a policy document, the risk rating is to be determined by assessing the consequence of the risk occurring with the effectiveness of the policy as a control. This does not need a detailed risk assessment and should be based on current understanding of the issue the policy is addressing.

The consequence assessment should occur by:

- Assessing the consequence of not having a policy in place against the WA Health Integrated Risk Tables. Common consequence categories include health impact on staff, health impact on patients or others, reputation, image and non-compliance.
- The consequence assessment is undertaken by considering the inherent risk (risk with failure of the policy as control). However, other critical controls should be considered.

Likelihood should be based on consideration of:

- The number of times the issue that the policy is addressing occurs in the organisation (actualised risks)
- The number of known breaches of the policy
- Whether the policy is current.

Further information related to rating risks and risk tables can be found in the [WACHS Risk Management Policy](#).

2.3 Policy Document Reviews

The purpose of a policy review is to take an in-depth look at existing policy documents to:

- determine whether a policy is still needed, if it should be consolidated with another policy, or rescinded
- determine whether the purpose of the policy document is still relevant
- determine whether the policy document requirements are relevant and achievable
- determine whether changes are required to improve the effectiveness or clarity of the policy document
- ensure that appropriate monitoring and ongoing maintenance of the policy document is occurring
- ensure that the context and reference material is still current and valid.

Reviews should be undertaken using a risk management approach. As such, WACHS Policy documents will have three forms of review:

- Desktop Quality Review / Check (annual)
- Formal Review (five yearly)
- Proactive Review (as required).

Desktop Quality Review / Check: A desktop quality review or check is an annual check of a policy document to ensure that the document:

- is still valid, current and relevant
- hyperlinks are operational and appropriate
- is on the most recent policy template
- summary information is accurate and valid.

When a desktop quality check is due, the WACHS Policy Unit will send out a copy of an editable version of the current document, WACHS Policy Submission Form and instructions to support completion by the policy developer. These reviews may result in no change, or could prompt an update to the document, depending on the outcome of the review.

Formal Review: All WACHS policy documents will be given a formal review date of five years after publication unless a shorter review period is warranted. A reminder will be sent

to the policy developer and Executive Sponsor three months from the review date for action. A formal review is to be undertaken to ensure:

- policy document content is updated to reflect legislation, standards, best practice and equipment and operational requirements
- ensure the document is contemporary, accurate, valid and required
- aligns to documents within the policy hierarchy including legislation and mandatory policy
- references, appendices and hyperlinks are accurate and functional
- policy template is the most current version and formatted appropriately in accordance with the WACHS Style Guide
- document summary and control information are updated and verified.

A formal review will require an update to the document, unlike a desktop review. WACHS Policy Unit is to maintain a 'Due for Review' report for the WACHS Executive Sponsors (available via HealthPoint to all staff) which will identify policies over 5 years old, with no formal review completed.

Proactive Review: There will be circumstances that warrant an earlier review, which may be instigated by the business area or WACHS Policy Unit.

Proactive reviews should be undertaken in the following circumstances:

- introduction or change in a higher-level policy document
- introduction or change in legal or regulatory requirements
- feedback from staff that have raised/escalated concerns of inaccuracy, outdated or inappropriate policy documents
- change in best practice or new evidence
- change in operational processes or practice
- safety issue and/or clinical incident or adverse event
- change in risk assessment rating
- where an error, discrepancy, or ambiguity is identified within the policy document
- new or changed services or positions
- strategic or business planning initiatives and/or quality improvement initiatives
- product recall or change in equipment
- requirements to consolidate policy documents.

Extensions: Extensions are not to be undertaken for Formal Reviews due to the 5-yearly nature of the review timeframes.

2.4 Policy Document Rescindments

Policy rescindment may occur at any time. WACHS policy documents may require rescindment for several reasons including:

- changes in legislation, regulatory requirements, or amendments to practice
- the endorsement of a WA Health mandatory policy which is intended to cover the field
- the endorsement of a WACHS-wide document resulting in a regional or site document becoming redundant
- determination that the governance area is more properly managed by different mechanisms (other than formal policy)
- other appropriate reasons support by the Executive Sponsor.

A WACHS Policy Submission form (available from WACHS Policy Unit) is to be completed and submitted to the WACHS Policy Unit for escalation to the WACHS Executive Sponsor. Once this is endorsed, the WACHS Policy Unit will archive the policy document from the WACHS Policy Library, so this is no longer accessible. The policy developer will be responsible for communicating the rescindment to relevant stakeholders across the organisation.

3. Roles and Responsibilities

Executive Sponsor(s) are WACHS Executive members that 'own' the policy document. They are responsible for:

- accountability and responsibility of identified WA Health mandatory policy frameworks and requirements of those policies at a WACHS level as per the [WACHS Executive Policy Framework Accountability Structure](#).
- supporting a culture of policy compliance
- overall accountability for the provision of accurate, contemporary and high-quality policy documents
- ensuring requirements of WA Health mandatory policies are met
- policy documents required by the business and workforce are in place (relevant to their portfolio area)
- progressing development, review, management and maintaining contemporary knowledge about relevant policy documents.
- ensuring adequate allocation of resources for policy development, management and governance

Policy Developer(s) are 'authors' of policy documents who take responsibility for the policy research, drafting and consultation. Policy developers are responsible for:

- undertaking research and drafting of new policy documents or updating existing documents
- determine/recommend rescindment of policy documents that are no longer required or valid
- consultation with relevant stakeholders for development and/or review
- progression of draft documents through relevant governance committees and groups that require oversight
- identifying costs associated with adoption or implementation of the policy, especially where the policy document mandates the use of new equipment which must be purchased
- completing the WACHS Policy Submission Form
- liaison with WACHS Policy Unit regarding endorsement and quality assurance of the document
- undertaking communication and implementation strategies post publication, in partnership with the relevant business area.

WACHS Policy Unit is responsible for coordinating and governing policy documents and the WACHS Policy Library, and providing expert advice, guidance and support to WACHS staff. The unit is responsible for:

- liaison with policy developers and Executive Sponsors regarding the development, review and rescindment of WACHS policy documents
- undertaking quality assurance processes to ensure documents meet the WACHS Style Guide and formatting requirements, and to ensure the policy document does not duplicate or contradict other policy documents (including higher-level documents)

- coordinates endorsement by Executive Sponsors
- management of the WACHS Policy Library (via HealthPoint), including publication and archiving of documents
- maintenance of WACHS Policy Library as the single 'source of truth' for review dates, related documents, and other essential information
- regular reporting to the WACHS Executive and CE e-News
- supporting the drafting, research and consultation with staff in relation to policy documents
- partner with policy developers to support implementation and evaluation as required
- communication regarding policies including review reminders, policy horizon scans and other general communication
- records management processes for all policy documents as recognised state archives

All Staff are required to comply with policies, procedures and guidelines.

4. Monitoring and Evaluation

4.1 Monitoring

Monitoring of this policy will be undertaken by the WACHS Policy Unit to ensure the requirements outlined above are undertaken across the organisation. This will be undertaken as part of the policy 'business as usual' practices.

Types of monitoring activities that may be adopted include reporting and checklists/spot checks.

4.2 Evaluation

Evaluation of this policy is to be carried out by the WACHS Policy Unit. The following means and tools can be employed to undertake this:

- Staff feedback / consultation
- Survey
- Compliance monitoring
- Benchmarking
- Reporting against organisational targets.

This policy will be made available as part of the WACHS Policy Library and on the WACHS Policies Landing Page to support policy development, management and governance.

5. Compliance

This policy is a mandatory requirement of the *Health Services Act 2016 (WA)*.

Staff compliance with WACHS policy documents is managed via the following mechanisms:

- Self-reported non-compliance
- Clinical incident monitoring
- Staff misconduct monitoring
- Third party complaints
- Accreditation

- Internal and external audit
- Management initiated reviews

WACHS has set a target of 100 percent of WACHS-wide policy documents to be endorsed and current at any point in time. This will be managed through the WACHS Policy Unit in conjunction with Executive Sponsors, with regular reporting to the WACHS Executive.

Failure to comply with this policy may constitute a breach of the WA Health Code of Conduct (Code). The Code is part of the [Integrity Policy Framework](#) issued pursuant to Section 26 of the [Health Services Act 2016 \(WA\)](#) and is binding on all WACHS staff which for this purpose includes trainees, students, volunteers, researchers, contractors for service (including all visiting health professionals and agency staff) and persons delivering training or education within WACHS.

WACHS staff are reminded that compliance with all policies and procedures is mandatory.

6. References

- [Australian Policy Cycle, Bridgman and Davis, 1998 | Download Scientific Diagram \(researchgate.net\)](#)
- [Child and Adolescent Health Service \(CAHS\) Policy Management Policy](#)
- [East Metropolitan Health Service \(EMHS\) Policy Governance Framework](#)
- [Health Support Service \(HSS\) Policy Governance Framework](#)
- [New South Wales \(NSW\) Department of Health Policy Development Guidelines \(superseded\)](#)
- [North Metropolitan Health Service \(NMHS\) Policy Document Governance Policy](#)
- [NMHS Policy Document Development Guideline](#)
- [South Metropolitan Health Service \(SMHS\) Policy Framework](#)
- [WACHS Graphic Design and Style Guides](#)

7. Definitions

| Term | Definition |
|--------------------------|--|
| Addendum | An addition or appendix to an existing policy document |
| Executive Sponsor | <p>The designated area or service director (Tier 3 or above) who is responsible for driving the development, review, revision, implementation and evaluation of policy documents within their functional area of responsibility. The executive sponsor is responsible for addressing any issues or risks relating to the policy document and for ensuring education about the policy document is provided when required.</p> <p>All executive sponsors are members of the WACHS Executive.</p> |
| Guideline | A document which supports a policy by describing a statement or statements which assist service providers and users of health services to make decisions about appropriate health care or service delivery for specific circumstances. A guideline may assist a professional to |

| | |
|-----------------------------------|--|
| | make judgements and undertake actions in accordance with their skills, expertise and scope of practice. |
| Legislation | Acts, regulations, rules and by-laws enacted by Parliament. Legislation affecting WACHS staff may be either State (WA) or Commonwealth (National) legislation. Examples include <i>Health Services Act 2016</i> (WA), <i>Mental Health Act 2014</i> (WA) and <i>Therapeutic Goods Act 1989</i> (Cth). |
| Manual | A document providing information or instructions. |
| Policy | A document that describes the organisation's purpose or standard for a given process or issue, the expected outcome, guiding principles, roles and responsibilities, definitions of terms within the document and references. Compliance with policies is mandatory. |
| Policy Developer | Staff who have the responsibility for drafting, amending or recommending the rescindment of a policy document. |
| Policy Documents | A collective term used to describe policies, procedures and guidelines used within WACHS that have been formally registered. |
| Procedure | A document that generally supports a policy by describing an instruction that clearly prescribes the actions of each step of a process to be taken and by whom. |
| Regional Based | Where a policy document (procedure or guideline) applies to a WACHS region. WACHS is comprised of seven regions; Great Southern, Goldfields, Kimberley, Midwest, Pilbara, South West and Wheatbelt. |
| Site Based | Where a policy document (procedure or guideline) applies to a WACHS site or service. |
| WA Health Mandatory Policy | A WA Health policy in which all staff within the WA health system must comply, unless otherwise stated. |
| WA Health Policy Framework | Frameworks for WA Health policy issued by the Director General and binding on all staff as outlined in the <i>Health Services Act 2016</i> . |
| WACHS-wide | Where a policy document applies to all regions and sites (unless specified otherwise) within WACHS. |

8. Document summary

| | |
|---|--|
| Coverage | WACHS-wide |
| Audience | All Staff |
| Records Management | Non-Clinical: Records Management Policy Clinical: Health Record Management Policy |
| Related Legislation | Health Services Act 2016 (WA) |
| Related Mandatory Policies / Frameworks | MP0160/21 Aboriginal Health Impact Statement and Declaration Policy ; MP0124/19 Code of Conduct Policy ; WA Health Integrity Policy Framework ; WA Health Risk, Compliance and Audit Framework |
| Related WACHS Policy Documents | WACHS Policy Stakeholder Consultation Guideline ; WACHS Risk Management Policy |
| Other Related Documents | Nil |
| Related Forms | WACHS Policy Submission Form |
| Related Training Packages | Nil |
| Aboriginal Health Impact Statement Declaration (ISD) | The completion of an Aboriginal Health Impact Statement and Declaration (ISD) is required. For further information, refer to the ISD Guidelines . Does this policy document have impact on the cultural or clinical needs of Aboriginal people? NO ISD Record ID: 1800 |
| National Safety and Quality Health Service (NSQHS) Standards | 1.07 |

9. Document Control

| Version | Effective Date | Author | Summary of changes (developer to complete) |
|--------------------|--------------------|----------------------------|--|
| 8.00 | 3 November 2022 | Manager Policy Development | |
| <Policy Unit only> | <Policy Unit only> | <Policy Unit only> | |

10. Approvals

| | |
|--|---|
| Policy Owner | Chief Executive |
| Co-approver | Director of the Office of the Chief Executive |
| Contact | Manager Policy Development |
| Business Area | Office of the Chief Executive |
| EDRMS # | ED-CO-21-429891 |
| <p><i>Copyright to this material is vested in the State of Western Australia unless otherwise indicated. Apart from any fair dealing for the purposes of private study, research, criticism or review, as permitted under the provisions of the Copyright Act 1968, no part may be reproduced or re-used for any purposes whatsoever without written permission of the State of Western Australia.</i></p> | |

This document can be made available in alternative formats on request.

Appendix A: Policy Cycle Steps (Detailed)

Identify Requirements

The first stage of policy development is determining whether there is a requirement for a new policy document. The WACHS Executive member whose portfolio the policy subject matter falls within will, generally, determine the need for a policy and will assign drafting responsibility to a policy developer (author) or subject matter expert working within that portfolio.

Where a member of staff identifies the need for a policy, and wishes to commence drafting, it is recommended they have a conversation with their Tier 4 Manager to seek support for the development.

Drivers for a new policy document include:

- New or amended Commonwealth or State legislation
- New or amended WA Health Policy Frameworks
- Recommendations following reviews of external audit and regulatory agencies (e.g. Office of the Auditor General, Corruption and Crime Commission, Public Sector Commission, Parliamentary review)
- Recommendations from the Coroner's Court of Western Australia
- Self-assessment (e.g., internal audit recommendations, performance monitoring processes, staff survey)
- Internal identification (e.g., risk review, clinical incident)
- Benchmarking initiatives (e.g., policy horizon scan, gap analysis)
- Accreditation requirements (e.g., National Safety and Quality in Healthcare Services Standards, Australian Aged Care Accreditation Standards, National Standards for Mental Health Services)
- Quality improvement activities
- Changes to organisational structure
- Changes to recognised best practice

Things to consider:

- The type of policy document to be employed (see section 7 Definitions)
- Whether there is any existing WA Health Mandatory Policy
- Whether there is any existing WA government policy.

Research

Comprehensive policy research, review and analysis is to be conducted to ensure an accurate and effective policy document is developed. Policy developers must consider:

- Relevant Commonwealth and State legislation
- Australian Government agency policy (e.g. Therapeutic Goods Administration or Australian Health Practitioner Regulation Authority)
- Relevant Commonwealth strategic direction documents (e.g. plans)
- International and Australian Standards (ISO/ANZ)
- State Government policy (e.g. Premier's Circulars, Public Sector Commissioner's Circulars or Financial Administration Bookcase)
- Relevant State strategic direction documents (e.g. plans)
- WA Health Mandatory Policies
- Other WACHS policy documents

- Accreditation standards
- Evidence-based practice and/or Evidence-based Medicine (EBM)
- Current context specific research and practice

Policy developers to also consider and refer to policy documents:

- from other Health Service Providers (HSPs)
- from other jurisdictions or the private sector (where available)
- from other government agencies
- of non-government organisations, professional associations or unions.

Policy developers can access support for research through the WACHS Policy Unit.

Drafting

WACHS policy documents are to be drafted using the WACHS policy document templates, available on the [WACHS Policies HealthPoint page](#). The policy developer must consider the appropriate document type to use. Lower-level policy documents (e.g. guidelines, procedures etc.) need to relate to a policy (e.g. WA Health mandatory policy or WACHS-wide policy).

All policy documents are to comply with the following principles:

- Title to follow standard naming conventions, including stating if it is a policy, procedure or guideline (see Definitions)
- Consistent with relevant State Government and national policies and agreements including WA Health Policy Frameworks and compliant with applicable legislation
- Where relevant, reference adherence to appropriate standards such as the National Safety and Quality in Healthcare Services (NSQHS) standards, Aged Care and Mental Health Standards and/or Australian Standards.
- Informed by evidence-based research and consultation with key stakeholders
- Written clearly and succinctly and align to the [WACHS Style Guide](#)
- Language is to be consistent with the type of policy document used and appropriate to the intended audience of the policy. Words of mandate (must, is to / are to, etc.) are to be used where a policy requirement is mandatory.
- Definitions are to be clearly defined in the definitions section of the policy template
- Acronyms to align with [ACSQHC Recommendations for terminology, abbreviations and symbols used in medicines documentation and must be expanded on first use](#)
- Consistent with existing policy documents (except where those provisions are redundant and in need of separate review) and the [WACHS Authorisation Schedule](#)
- Consistent with WACHS and WA Health strategic plans, operational plans and clinical service frameworks.

Consultation

Refer to the [WACHS Policy Stakeholder Consultation Guideline](#). Stakeholder consultation is essential to ensure that information included in the policy is current, legitimate and consistent. Benefits of stakeholder consultation include:

- Avoidance of duplication
- Clarification of complex issues
- Identification of barriers to, or impracticalities of, implementation or compliance
- Provision of alternative points of view
- Identification of issues of which the policy developer might not be aware

- Promotion of good relations between policy developers, subject matter experts, operations and management.

Consultation is the most important aspect of the policy development process and often the most complex and time consuming as it involves many different people each with their own commitments and perspectives. As such, policy developers are required to consult as widely as possible, subject to time and resourcing limitations. Responses to consultation must be timely. If there are unacceptable delays in obtaining stakeholder feedback, the matter should be escalated to the Executive Sponsor for decision. This may include follow-up with stakeholders for feedback or progression without feedback. Responses for consultation are to be adequately documents (refer to the [WACHS Policy Stakeholder Consultation Guideline](#)) to ensure evidence of rationale for decisions and assist with providing future corporate knowledge.

If consensus cannot be reached during the consultation process, the matter should be escalated to the Executive Sponsor for final decision.

Consultation can be considered the first step to implementation as it serves to give advanced notice to stakeholders that a policy change or new policy is coming. Further advice and guidance on consultation is available in the [WACHS Policy Stakeholder Consultation Guideline](#).

Aboriginal Health Impact Statement and Declaration

The Department of Health and HSPs work strategically to ensure they provide the best possible health care to meet the needs of Aboriginal people, families and communities in Western Australia. The Aboriginal Health Impact Statement and Declaration (ISD) is a practical way to plan and think about the impact of new (and revised) health policy documents on Aboriginal people, families and communities.

[Mandatory Policy \(MP\) 0160/21 Aboriginal Health Impact Statement and Declaration Policy](#) outlines requirements to declare and demonstrate that the interests of, potential impacts on, and opportunities for, Aboriginal people are considered and appropriately embedded within policy development processes. WACHS recognises this best practice approach and requires policy developers to complete an ISD for WACHS policy documents, where applicable. The completed ISD is to accompany the policy submission for endorsement.

For assistance with completing the ISD, contact WACHS Aboriginal Health Strategy via ACL.WACHS@health.wa.gov.au.

For further information, refer to the [MP0160/21 Aboriginal Health Impact Statement and Declaration Policy](#) including Support Information (e.g. User Guide for Aboriginal Health Impact Statement and Declaration).

Finalise Draft

Following the completion of consultation, policy developer is to finalise the draft policy document. Once the policy developer is satisfied with the document, the WACHS Policy Submission Form is to be completed providing detailed information regarding the policy document, including summary, key issues being addressed, coverage, risk rating,

consequential amendments to other policy documents, details of implementation and communication of policy document and consultation list.

Once final draft and submission form have been completed, these documents (and any additional materials) are to be forwarded to the WACHS Policy Unit at WACHS.Policies@health.wa.gov.au.

Endorsement

The WACHS Policy Unit will undertake a quality assurance (QA) over the document, to ensure basic compliance with legislation, higher order policy documents, and style/formatting requirements. Documents will be returned to policy developers for advice if there are any issues identified during QA.

Once documents have been cleared by WACHS Policy Unit, an updated submission form, policy document and other materials will be sent to the relevant Executive Sponsor for final endorsement.

Some documents will require co-endorsement due to the subject matter:

- Regional documents will require co-endorsement with the Regional Director and the Executive Director of the relevant subject matter (e.g. Mental Health)
- All clinical policy documents will require co-endorsement by the Executive Director Clinical Excellence

The Executive Sponsor is to review the draft document and submission form and provide either endorsement for implementation or feedback on why endorsement has not been given. This is to be returned to the WACHS Policy Unit. Unapproved documents will be sent back to the policy developer with feedback.

Implementation

The research and consultation stages of the policy document development process should draw out implementation issues associated with the policy document. In preparing the document for endorsement, the policy document developer should identify any potential barrier to the successful implementation of the final document.

Endorsed document implementation includes publication, communication and education. WACHS policy documents will be published by the WACHS Policy Unit to the policy library using information provided in the submission form.

Communication of new, amended and deleted policies is vital for informing staff of changes to practice and policy position. Implementation and communication are the responsibility of the policy developer, with the primary mechanisms being:

- Global email
- Targeted email
- WACHS CE e-News
- WACHS Policy Unit standing reports
- Local reporting as required.

Evaluation

The evaluation of a policy document must include performance measures which are:

- Worth measuring and measurable for diverse populations
- Understandable by those who need to act
- Relevant to policy and procedure
- Measurable over time
- Flexible to collect and report
- Match existing report functions.

Post implementation, all policy documents must be monitored and evaluated to ensure that the policy is understood, implemented and meeting the needs of the business. This is the responsibility of the policy developer, Executive Sponsor and the relevant business area.