

# WCHO

## *Policy and Procedure*

### Policy and Procedures Process

**Department:** Compliance  
**Author:** Suzanne Kapica

**Local Policy Number (if used)**

**Revision Date**  
11/3/06

**Approval Date**  
11/21/06

**Implementation Date**

### Archive Information

**Date:**

**Reason:**

#### I. PURPOSE

The purpose of this policy is to define the affiliation criteria used for determining the creation, collaboration, approval, dissemination and tracking of Local policies and procedures.

#### II. POLICY

This policy applies to all WCHO staff, students, and volunteers involved in policy development or review.

#### III. APPLICATION

- A. All policies/procedures shall be reviewed and approved on a 3 year basis to ensure the policy/procedure reflects the current practice.
- B. Individuals or departments, audit results or the Senior Management Team (SMT) can determine that a policy should be created. If an individual determines that a policy should be created and there is any question or debate, SMT will ultimately make this determination.
- C. Policies being considered for review or development shall be reviewed within the affiliation to reduce duplication and increase efficiency. A high value has been placed on having as many Affiliation policies as possible to ensure consistent standards/practice. A significant position may be made for a policy to remain in an individual county within the affiliation.
- D. The role of the author shall be to ensure input from individuals, departments, or other necessary stakeholders are obtained prior to the approval of the policy/procedure.
- E. The PIHP shall keep a Policy Review Schedule. Changes to the dates for policy/procedure review shall be negotiated by the author with the SMT.
- F. All policies/procedures once approved shall not be revised or edited until the next scheduled review period for the policy/procedure unless it is required to be in compliance with any regulatory, legislative or compliance related changes, or significant changes in practice have been made.

- G. The author of the policy is responsible for obtaining all regulatory or compliance standards from the Compliance Officer.
- H. Any non-compliance related information, regulatory or legislative feedback obtained after the approval of a policy/procedure will be collected and incorporated into the policy at the next scheduled review period for the policy/procedure.
- I. The author of the policy shall be responsible for creating the policy/procedure in the affiliation approved template, **using Arial 11 Pitch Font, 1 inch margins** with page numbers (i.e. page 6 of 6) located on the bottom of the policy.
- J. When making changes to an existing policy, the author must ensure that all changes are **highlighted or bolded** so that reviewing bodies can see what specific changes have been made.
- K. The author of the policy/procedure shall be responsible for ensuring that all feedback obtained through the management team is incorporated into the policy/procedure.
- L. When applicable, to ensure implementation of policy/procedures, the author will create a flow chart to accompany a policy/procedure.
- M. The author is responsible for fully completing all steps within the policy/procedure development process and completing a board action form when presenting to the SMT and the Organizational Operations Subcommittee of the WCHO board.
- N. All approved policies/procedures with attached procedures shall be implemented as written. Any suggested adjustments to the procedures may be collected for inclusion at the next scheduled review period.

#### IV. DEFINITIONS

**Author:** The person responsible for obtaining input and writing the policy/procedure and routing the document through the defined steps of this procedure.

**Implementation Date:** This is the date by which the CMHPSM must be in full operational compliance with the policy & procedure.

**Policy:** A high-level overall plan embracing the general goals and acceptable procedures especially of a governmental body

**Prepaid Inpatient Health Plan (PIHP) Point Person:** The appointed person from the PIHP designated as the responsible person for ensuring that the policy/procedure is routed through the defined steps of this procedure.

**Procedure:** a series of steps followed in a regular definite order.

#### V. EXHIBITS

- A. WCHO Policy Template
- B. WCHO Author Policy Flow Checklist

C. Policy Flow Chart

**VI. REFERENCES**

<b>Reference:</b>	<b>Check if applies:</b>	<b>Standard Numbers:</b>
JCAHO- Behavioral Health Standards	X	LD 3.90
PIHP Policy Review Schedule	X	
Affiliation Policy Tracking Form	X	
Local Policy tracking template	X	
WCHO Policy tracking template	X	

**VII. PROCEDURES**

**WCHO Procedures**

<b><u>WHO</u></b>	<b><u>DOES WHAT</u></b>
Committee/Individual/Other	<ol style="list-style-type: none"> <li>1. Is notified, determines that a policy and or procedure must be created or revised for the affiliation.</li> <li>2. The Management team, Individual or other identifies the primary author of the policy/procedure.</li> </ol>
Author	<ol style="list-style-type: none"> <li>1. Notifies the PIHP point person that a new policy/procedure is being developed.</li> <li>2. Notifies the PIHP point person of the expected timeframe for completion.</li> <li>3. Obtains the WCHO Author Policy Flow sheet Checklist and uses as needed.</li> </ol>
PIHP Point Person	<ol style="list-style-type: none"> <li>1. Begins to track the progression of the policy once notified by the author.</li> </ol>
Author	<ol style="list-style-type: none"> <li>1. Obtains the proper policy template from the PIHP policy format specialist. (Policy specialist will send the latest word version of past policy in the latest template)</li> <li>2. Ensures that all compliance related standards are obtained and incorporated into the policy/procedure.</li> <li>3. Collects and incorporates all necessary information from stakeholders that may be impacted by the policy/procedure.</li> <li>4. Forward draft policy/procedure to the PIHP Management Team.</li> </ol>

Author	<ol style="list-style-type: none"> <li>1. Attends PIHP Management Team to obtain feedback.</li> <li>2. Integrates feedback</li> <li>3. Sends to PIHP Policy Format Specialist</li> </ol>
PIHP Policy Format Specialist	<ol style="list-style-type: none"> <li>1. Ensures that the policy is in the proper template and ensures: <ul style="list-style-type: none"> <li>• All grammar and spelling errors are corrected</li> <li>• Page numbers are included</li> <li>• Changes are highlighted</li> <li>• Font type and size meet requirements</li> <li>• Margins are the same</li> <li>• All needed attachments are included</li> </ul> </li> <li>2. Places the policy in the appropriate board policy electronic folder.</li> </ol>
PIHP Management Assistant	<ol style="list-style-type: none"> <li>1. Obtains the policy from the appropriate electronic file and Includes the policy/procedure in the packet for the organizational operations subcommittee of the WCHO board.</li> </ol>
Author	<ol style="list-style-type: none"> <li>1. Presents the policy to the subcommittee of the WCHO board.</li> </ol>
Organizational Operations Subcommittee	<ol style="list-style-type: none"> <li>1. Approves, approves with changes or denies the policy/procedure.</li> </ol>
Author	<ol style="list-style-type: none"> <li>1. Makes any necessary changes to the policy/procedure based on approval with changes within 5 business days.</li> <li>2. If denied, takes any feedback from the subcommittee and makes any necessary changes and starts back at the beginning of the process again.</li> </ol>
PIHP Management Assistant	<ol style="list-style-type: none"> <li>1. Documents via minutes the action to approve or deny policy.</li> <li>2. Minutes included in the WCHO full board packet.</li> </ol>
WCHO Full Board	<ol style="list-style-type: none"> <li>1. WCHO full board approves or denies the regional subcommittee policy/procedure actions.</li> </ol>
WCHO Management Assistant	<ol style="list-style-type: none"> <li>1. Notifies the PIHP point person when organizational operations subcommittee actions have approved or denied the policy/procedure action.</li> </ol>

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|-------------------------------|--|
| PIHP Point Person             | <ol style="list-style-type: none"><li>1. Notifies the author of the full board decision.</li><li>2. Documents in the tracking system that the policy/procedure is approved or denied.</li><li>3. Sends policy to PIHP Policy Format Specialist</li></ol> |
| PIHP Policy Format Specialist | <ol style="list-style-type: none"><li>1. Formats the policy and saves policy to policy manual.</li><li>2. Sends the policy to PIHP Point person, WCHO website specialist and Provider Website specialist (if needed) within 5 business days.</li></ol>   |
| PIHP point person             | <ol style="list-style-type: none"><li>1. Sends the policy/procedure to all staff.</li></ol>  |

Exhibit A

Policy Action

Policy name: \_\_\_\_\_

Author Name & Email: \_\_\_\_\_

Background:

New                       Revised                       Rescind

Replaces:

Old only  
 Other (please list):

Compliance Date:	
Steps:	1. 2. 3.

Policy Manual Chapter:

<input type="checkbox"/>	Administrative (General)	<input type="checkbox"/>	Management of Information
<input type="checkbox"/>	Environment of Care	<input type="checkbox"/>	Performance Improvement
<input type="checkbox"/>	Finance/Contract Management	<input type="checkbox"/>	Provision of Care
<input type="checkbox"/>	Human Resources	<input type="checkbox"/>	Recipient Rights

Management Team:             Approve As Is                       Approve with Attached Changes

Sub Committee:                 Approve As Is                       Approve with Attached Changes

**Post Policy to:**

Provider Manual               

Affiliation Website             

**BOARD ONLY**

**Recommendation:**

Approve     Deny

<b>WCHO</b>		<i>Policy and Procedure</i>	
		<i>(Insert Policy Name)</i>	
Department: Author:		Local Policy Number (if used)	
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**I. PURPOSE**

**II. POLICY**

**III. APPLICATION**

**IV. DEFINITIONS**

**V. STANDARDS**

**VI. EXHIBITS**

**VII. REFERENCES**

Reference:	Check if applies:	Standard Numbers:
42 CFR Parts 400 et al. (Balanced Budget Act)		
45 CFR Parts 160 & 164 (HIPPA)		
42 CFR Part 2 (Substance Abuse)		
Michigan Mental Health Code Act 258 of 1974		
JCAHO- Behavioral Health Standards		
MDCH Medicaid Contract		
MDCH Substance Abuse Contract		
Michigan Medicaid Provider Manual		

**VIII. PROCEDURES**

<b>WHO</b>	<b>DOES WHAT</b>

## WCHO Author Policy Flow Checklist

Author must ensure all steps, in order, of this process are completed.

- Policy Author notifies the PIHP point person of need for new/change in policy
  - Notes expected completion date
  - Obtains official policy template from PIHP policy format specialist, action form and checklist if needed.
- Policy Drafting
  - Obtain all standards
  - Obtain stake holder input
- Completed draft to PIHP management team
  - Review and provide feedback
- Incorporate Mgt. Team Recommendations
- Send to PIHP Policy Format Specialist
  - Formats and corrects all spelling/grammar errors
  - Places policy in OOC electronic file.
  - PIHP Management Assistant puts policy in board packet and notifies author of date to attend board meeting
- Present Policy to the Organizational Operations Committee
- Incorporate board changes and send to PIHP Point Person
  - PIHP management assistant documents in minutes and forwards to WCHO management assistant for full board packet
  - Full board approves and WCHO management assistant notifies PIHP point person
  - PIHP point person sends to PIHP Policy Format Specialist
  - PIHP Policy Format Specialist formats policy and saves to policy manual and sends to PIHP point person, WCHO/regional website specialist and to provider website specialist
  - PIHP point person Sends policy to all staff

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**\*This is an optional form to assist you through the policy development process.  
Please do not submit this form with the policy at each step of the process\***