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Owner:	Allison Smith: Project Manager, PMP
Policy Area:	Quality Improvement
References:	DWMHA Bylaws

Policy Review Guidelines

POLICY

Detroit Wayne Mental Health Authority (DWMHA) provides a formal process for developing, revising and reviewing policies. All policies are reviewed annually, and updated as needed to meet contractual and regulatory requirements.

The DWMHA shall adopt operational policies and procedures for the operation of the DWMHA as an independent entity. Those policies and procedures shall include: financial and budgetary policies; banking, investment and cash management policies; provider and billing policies; human resource policies; procurement policies; conflict of interest policies; compliance policies; HIPAA policies; and such other operational policies and procedures as necessary and appropriate for the proper operation of the DWMHA. The Board delegates to the President/Executive Director, or her/his designee, the authority and responsibility to approve and implement operational DWMHA policies; provided, however, (i) the following policies shall require Board approval upon implementation or upon any substantial change: financial and budgetary policies, banking and investment policies, conflict of interest policies, and procurement policies and (ii) prior to the adoption of new policies not requiring Board approval, they shall be made available for Board members' review, comment and, if desired, formal consideration by the Board. Strategic policies and plans are reserved to the Board.

All DWMHA directors are the policy lead, responsible for the policies in their department. All policies and procedures must be developed using the approved template format. There is a separate template for both a policy and standard operating procedure.

PURPOSE

This document provides guidelines for initiating, preparing and updating policies and procedures at the DWMHA; to outline the mechanism for approval, authorization and distribution; and to ensure that policies are developed in collaboration with associated departments.

APPLICATION

1. The DWMHA Board, all DWMHA Staff, including Contractual Staff are required to implement and adhere to this policy. Additionally, MCPNs and Direct Contract Providers are expected to develop their policies in alignment with DWMHA directives.

2. This policy ensures members and providers are served and held responsible where appropriate as well as DWMHA and it's staff serve and are served.
3. This policy impacts all lines of business and populations under the purview of the DWMHA.

KEY WORDS

PolicyStat

STANDARDS

1. DWMHA-wide policies/procedures are developed for significant organizational issues that are interdepartmental or mandated to be DWMHA-wide by accreditation agencies or state/federal legislation such as ,but not limited to, National Committee for Quality Assurance (NCQA), and External Quality Review (EQR) standards.
2. The policy lead is responsible for assuring both contract and clinical criteria are addressed in policy language and policy development is efficient and appropriate to Authority and its delegated entity business needs.
3. The Performance Measurement Administrator (PMA) monitors and tracks policies agency wide and assures DWMHA timelines for policy review and updates are met. A policy review committee reviews and approves new policies and any existing policy that required significant changes. Applicable DWMHA policies are published for Stakeholder input.
4. Standardized use of the term" Detroit Wayne Mental Health Authority" or "the Authority" shall be referred to by the acronym DWMHA in all policies.
5. Key Words will be defined in a separate Definitions document found posted on the DWMHA website www.dwmha.com/Documents.aspx.
6. All DWMHA policies, procedures, and policy exhibits are housed on a policy management system. Refer to Exhibit: Policy Review Standard Operating Procedure (SOP).
7. DWMHA approved polices and procedures that apply to MCPNs, Persons Served and Stakeholders are considered External policies and posted on the DWMHA website: www.dwmha.com/Documents.aspx
8. All DWMHA policies are required to be reviewed annually. This includes all associated Procedures and Exhibits. Updates will be made, as needed, to meet contractual and regulatory requirements
 - a. Policies are considered the overarching idea, guide, regulatory requirement that encompasses how to make decisions that align with DWMHA's mission, philosophy, and program goals, and the rules by which DWMHA abides. Policies should rarely change.
 - b. Procedures define the actions and daily steps to support and operationalize the policy. A procedure is the sequence of steps for completing a given activity. It may outline the manner in which a particular policy is to be implemented, but cannot take the place of that policy. Procedures may change often, as dictated by any number of factors such as: staffing, equipment, space, and technology, in addition to regulatory and contractual changes. Procedures will be considered a policy attachment.
9. To support DWMHA policies, applicable policies are to be developed with Stakeholder input through the publicly held Policy Review Committee, chaired by the PMA, a member of Detroit Wayne Mental Health Quality Staff

10. The policy lead or their designee owner is responsible for presenting their policy at the Policy Review Committee to obtain Stakeholder feedback as well as ensuring training occurs on the policy as needed once the policy is approved.
11. All policies are developed to ensure the best possible outcomes for the members it serves.
12. DWMHA policies are developed to ensure that its business practices, those provided directly and/or delegated to MCPN entities, are in compliance with all current contracts, applicable state and federal laws and regulations.

QUALITY ASSURANCE/IMPROVEMENT

The DWMHA shall review and monitor contractor adherence to this policy as one element in its network management program, and as one element of the QAPIP Goals and Objectives.

The quality improvement programs of MCPNs, their subcontractors and direct contractors must include measures for both the monitoring of and the continuous improvement of the programs or processes described in this policy.

COMPLIANCE WITH ALL APPLICABLE LAWS

DWMHA staff, MCPNs, contractors and subcontractors are bound by all applicable local, state and federal laws, rules, regulations and policies, all federal waiver requirements, state and county contractual requirements, policies, and administrative directives, as amended.

LEGAL AUTHORITY

DWMHA Bylaws, Article VI - Budget, Financial Controls and Policies

RELATED POLICIES

RELATED DEPARTMENTS

All DWMHA Departments

CLINICAL POLICY

No



INTERNAL/EXTERNAL POLICY

External

EXHIBIT(S)

1. Procedure on SOP 2016
2. Procedure Template

Attachments:

-  [Procedure on SOP_2016 template.docx](#)
-  [Procedure on SOP_2016_3092016.docx](#)

Approval Signatures

Approver	Date
Jeff Delay: Chief Operating Officer	04/2016
Allison Smith: Project Manager, PMP	03/2016
Corine Mann: Chief Strategic Officer/Quality Improvement [AS]	03/2016
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Allison Smith: Project Manager, PMP	03/2016
Corine Mann: Chief Strategic Officer/Quality Improvement	03/2016
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