



Origination:	04/2016
Last Approved:	07/2018
Last Revised:	07/2018
Next Review:	07/2019
Owner:	Allison Smith: Project Manager, PMP
Policy Area:	Strategic Planning
References:	NCQA – Q2 – Element A

Policy Review Guidelines

POLICY

Detroit Wayne Mental Health Authority (DWMHA) shall adopt policies and procedures for the operation as an independent entity.

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 for the Board.

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.

Only approved policies in PolicyStat are considered active, official policies.

PURPOSE

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

APPLICATION

1. DWMHA Board, all DWMHA Staff, including Contractual Staff are required to implement and adhere to this policy. Additionally, MCPNs, Sub-Contractors, and Direct Contract Providers are expected to develop their policies in alignment with DWMHA directives.
2. This policy serves the following populations: Adults, Children, I/DD, SMI, SED, SUD, and Autism
3. This policy impacts all lines of business and populations under the purview of DWMHA.

KEY WORDS

1. DWMHA: The standard acronym to be used in all policies is DWMHA and should be used instead of "The Authority" or writing "Detroit Wayne Mental Health Authority."

2. PolicyStat: A cloud-based Policy and Procedure Management Software used by DWMHA to centralize all policies, procedures, and exhibits in order to streamline the policy review process, provide automatic alerts when policies are due for review, ensure cross-departmental collaboration opportunities before policies are finalized, along with a comprehensive audit trail. <https://dwmha.policystat.com/home/>
3. Policy: The overarching idea, guide, regulatory requirement that encompasses how to make decisions that align with DWMHA's mission, philosophy, and program goals. Policies should rarely change. Policies will be approved and signed electronically; some may go the board.
4. Procedure: The actions and daily steps to support and operationalize a 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 it does not take the place of that policy. Procedures may change often, as indicated by any number of factors such as regulatory or contractual changes, staffing, equipment, space, and technology. Procedures will be considered an attachment/exhibit.
5. Stakeholder: Persons and organizations with some interest in improving the mental health of a population. They include person with a mental illness, developmental disability, serious emotional disturbance, and/or substance use disorder, family members, professionals and advocates, policy-makers, founder and other interested parties.
6. Stub Policy: A 'stub-policy' acts as the placeholder for a shared form that is used across several policies. When the attachment/form on the stub policy is revised, all policies with a hyperlink to the 'stub-policy' will see the latest revision without having to separately update the form on each policy.

STANDARDS

1. DWMHA Directors are the policy lead; responsible for the policies in their department. All policies and procedures must be developed using the approved template and follow the development and approval process. There is a template for policies and another for standard operating procedures located within PolicyStat: <https://dwmha.policystat.com/home/>.
2. DWMHA-wide policies/procedures are developed to ensure consistency and standardization for significant organizational topics that are interdepartmental or mandated 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.
3. 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.
4. All DWMHA policies, procedures, and policy exhibits are housed on a policy management system. Refer to Exhibit: [Policy and Procedure Development](#).
5. Standardized use of the term " Detroit Wayne Mental Health Authority" or "the Authority" shall be referred to by the acronym DWMHA in all policies.
6. The policy lead is responsible for ensuring that contractual and/or clinical criteria are addressed in policy language and that policy development is succinct and appropriate to DWMHA and its delegated entity business needs.
7. The PolicyStat Administrator (PA), or other designee, monitors and tracks policies authority-wide to ensure DWMHA time-lines for policy review and updates are met. The PA chairs the Stakeholder Feedback committee queue. The PA reviews new policies and any existing policy that has significant changes before obtaining Stakeholder input. Applicable DWMHA policies are published for Stakeholder

input.

8. Key Words will be defined in a separate document found posted on the DWMHA website under the Library tab <http://www.dwmha.com/library/policies-and-procedures/>
9. DWMHA approved policies and procedures that apply to MCPNs, Persons Served and Stakeholders are considered External policies and posted on the DWMHA website: <http://www.dwmha.com/library/policies-and-procedures/>
10. All DWMHA policies are required to be reviewed annually. This includes all associated Procedures, and Exhibits, including Stub Policies. 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.
11. All applicable policies are to be developed with Stakeholder input garnered through public comment and feedback received.
12. Upon policy approval, the lead or their designee is responsible for presenting and training the network on its content as needed.
13. All policies are developed to ensure the best possible outcomes for the members it serves.

QUALITY ASSURANCE/IMPROVEMENT

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: Policy and Procedure Development](#)

Attachments:

No Attachments

Approval Signatures

Approver	Date
Corine Mann: Chief Strategic Officer/Quality Improvement	07/2018
Allison Smith: Project Manager, PMP	07/2018

Applicability

Detroit Wayne Mental Health Authority



Origination:	06/2017
Last Approved:	07/2018
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Next Review:	07/2019
Owner:	Allison Smith: Project Manager, PMP
Policy Area:	Strategic Planning
References:	NCQA – Q2 – Element A

Policy and Procedure Development

PROCEDURE PURPOSE

To provide guidelines for initiating, preparing, and updating policies and procedures at the Detroit Wayne Mental Health Authority (DWMHA); to outline the mechanism for approval, authorization and distribution; and to ensure that policies are developed in collaboration with associated departments.

EXPECTED OUTCOME

DWMHA personnel will understand the process for developing as well as revising all policies and procedures using the newly created DWMHA templates and work-flow.

PROCEDURE

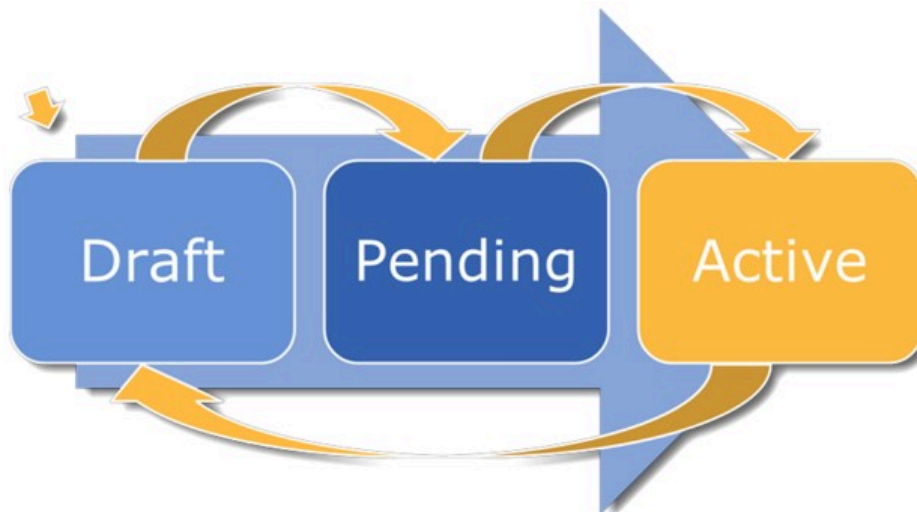
1. General Process Guidelines:
 - a. All DWMHA policies and procedures are housed on a policy management system.
 - b. DWMHA personnel without a user identification and password are considered "Guest Users," which are limited to viewing only approved and active policies, procedures, and exhibits.
 - c. Guest logins do not require a PolicyStat account (username/password), and may view policies through a "Guest Access Link" (when provided).
 - d. Staff will receive an email notification for policies that require attestation and adherence.
 - e. Staff identified as policy authors, editors, or policy area owners are assigned a user identification number, password, and permission levels by the PolicyStat Administrator. Authorized Users will utilize their network login credentials (user IDs are tied to the network automatically).
 - f. All DWMHA staff can easily access all active policies via the PolicyStat website: <https://dwmha.policystat.com/home/>
 - g. Staff can use the search feature to access active policies by:
 1. Text
 2. Title
 3. Policy Area
 4. Author
 5. References

- h. All new/revised polices and procedures shall be:
 - 1. Only created using the PolicyStat process and templates beginning February 2016.
 - 2. Reviewed by the appropriate committee, obtaining committee input as needed.
 - 3. Submitted to individuals and/or departments for additional comments and revisions as needed. The chairperson shall review and compile comments and reviews revisions.
 - 4. Submitted to the Stakeholder Review committee for final comment, revisions, and approval.
 - 5. Submitted to the Chief Clinical Officer (CCO) for final approval.
 - i. Historical documentation of the approval process for new, revised, and retired policies shall be maintained in PolicyStat.
 - ii. In addition, a historical file for legal and reference purposes is maintained on the Shared Common Drive **S:\Policies** for polices approved prior to January 2016.
- i. All External policies are published to the DWMHA website **www.dwmha.com** for public and stakeholder access. The PolicyStat Administrator will coordinate with the Webmaster in IT to publish External policies.
- j. The standard List Style defaults to the style below for consistency in PolicyStat:

- 1. First Level
 - a. Second Level
 - 1. Third Level
 - i. Fourth Level

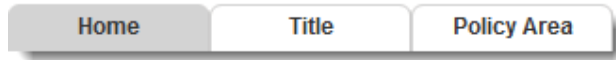
2. Policy Development in PolicyStat

- a. The basic life-cycle of a document: At its simplest, the life-cycle of a document in PolicyStat progresses through three stages.

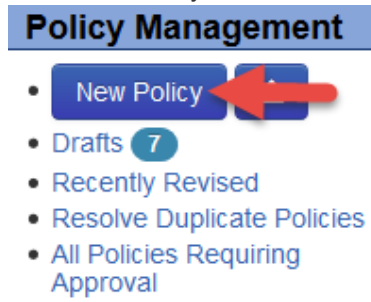


- b. An Author/Owner creates a new Draft in PolicyStat through the PolicyStat Editor.
- c. Policies originate at the department level by the Policy Owner based on need.
- d. When the draft is ready for review, the Author/Owner pends it for approval to begin the Pending phase and the Approval Work-flow.

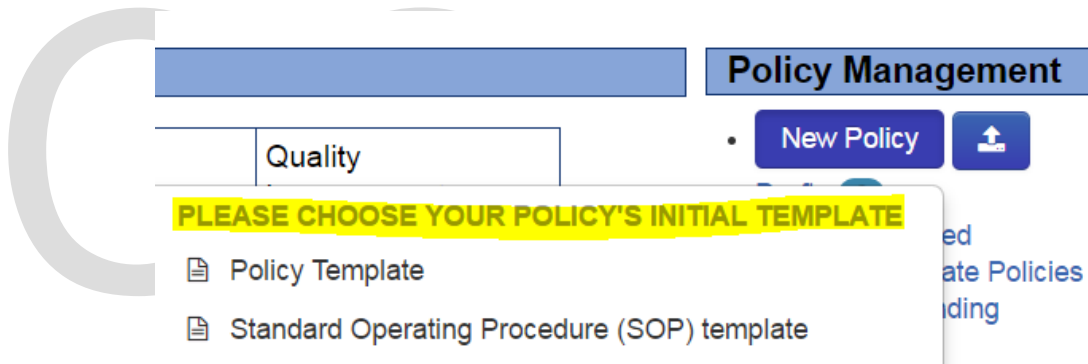
- e. When the pending document completes the Approval Work-flow, it becomes active and is searchable by any PolicyStat user. Prior to reaching "Active" status, policies are not visible or searchable for all staff.
- f. Creating a new policy/procedure with the PolicyStat Editor:
 1. Start from the Home tab on the PolicyStat site



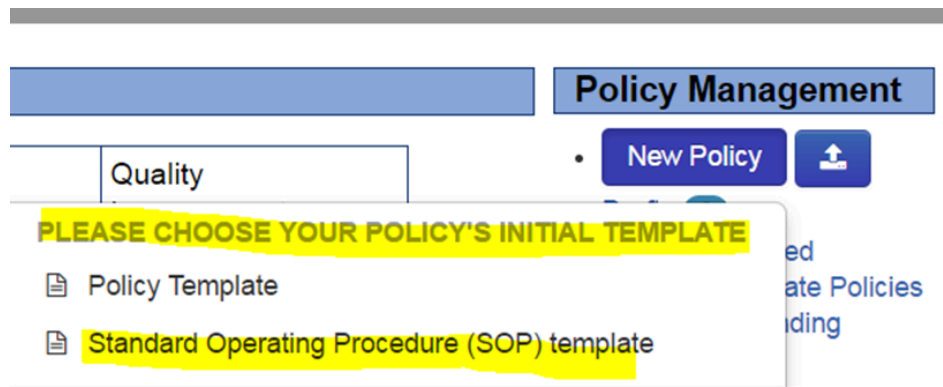
2. Click New Policy under the Policy Management section (far right column)



3. Choose the appropriate corresponding template, either the Policy Template or the Standard Operating Procedure (SOP) Template.

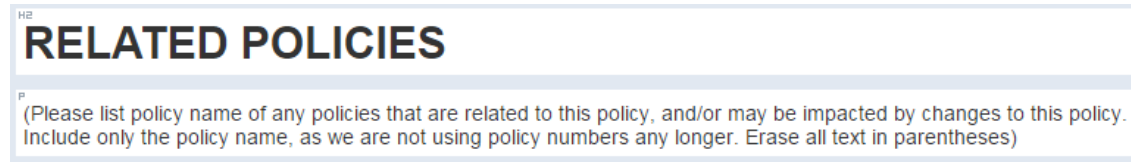


4. Creation and approval of an SOP requires the writer to select the Policy Properties tab, click on the Approval Work-flow drop-down option to choose the specific unit SOP work-flow. Procedures developed within a department only require the Department Director approval rather than going through the policy approval work-flow. Once a procedure is Active, it can be attached as an exhibit and hyper-linked to an overarching policy.

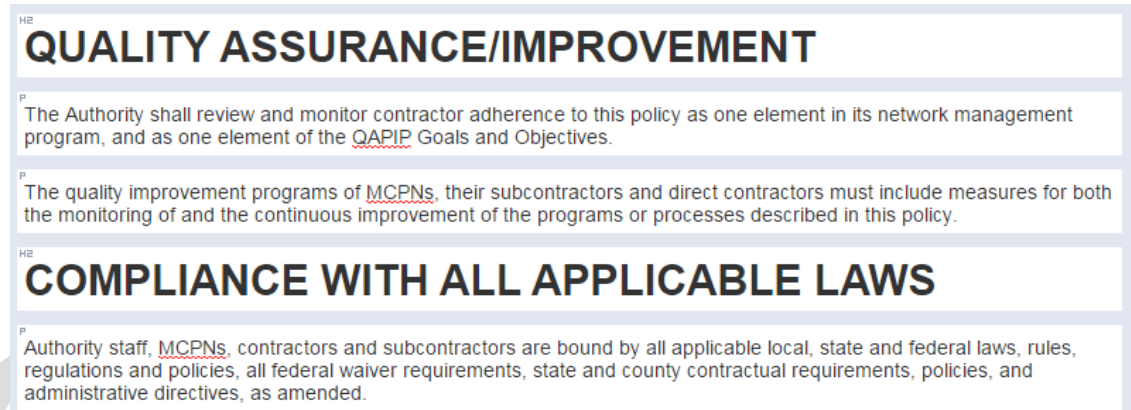


5. The templates contain prompts in several sections to help the author with content development,

to ensure the policy is directed to the proper audience, and initiates collaboration. The text should be erased as noted in the screen shot below:



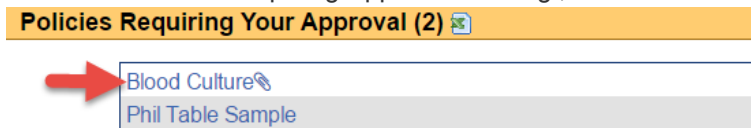
6. The policy template contains standard text in the Quality Assurance/Improvement section as well as the Compliance with All Applicable Laws section that can be updated to include additional information specific to a particular policy, but the base language should be maintained.



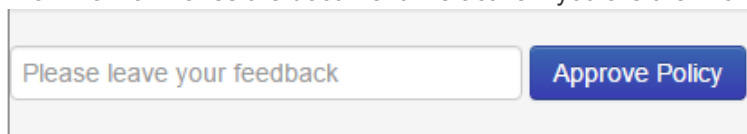
7. Ensure the new document contains the following to save as a draft:
 - i. A title (Policy Content Tab)
 - ii. An Owner (Policy Properties tab)
 - iii. A Policy Area (Policy Properties tab)
 - iv. An Approval Workflow (Policy Properties Tab)

3. Steps to Approve a Pending Policy/Document:

- a. From the PolicyStat Home tab:
- b. Under the Policies Requiring Approval heading, click the document you wish to approve (or reject)

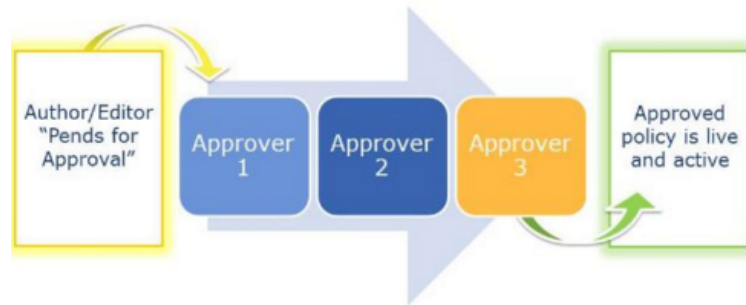


- c. **Review** the policy.
- d. Add feedback * in the Please leave your feedback field (optional). *Note: Any feedback will be visible to any user with editing/approving rights on the policy.
- e. Click Approve Policy (or Document). Note: This sends the document to the next Approver in the Work-flow or makes the document live/active if you are the final Approver in the Work-flow.



4. Each Policy Approval Work-flow contains the steps that a policy must follow in order to be made active in

PolicyStat. Each DWMHA Policy Approval Work-flow has an individual assigned as its Approver (typically, the department director). The Approval Work-flow can be changed for any new or existing policy at any time by contacting the PolicyStat Administrator. Work-flows may vary slightly; a few common examples can be found below:



Clinical Practice Improvement Detroit Wayne Mental Health Authority

Edit Clone 8 Outdated Workflows Delete



Clinical Practice Improvement SOP Detroit Wayne Mental Health Authority

Edit Clone 0 Outdated Workflows Delete

Authority



- a. The policy draft is developed in PolicyStat and may be routed within the developing department for input.
- b. The department lead approves the policy draft within the system to move it forward to the Director Review Committee. This committee is comprised of all department directors.
 1. All department directors are expected to acknowledge they have reviewed the policy by noting their approval or suggested changes in the comment section.
 2. The departmental lead/originator is responsible for ensuring the comments are incorporated into the policy.
- c. Once approved by the Director Review Committee, the PolicyStat Administrator will work with IT to post the pending policy on the website for 21 calendar days and disseminate to the Quality Operations Directors to obtain stakeholder feedback. All feedback will be provided to the Policy Lead who determines any necessary wording changes based on the comments received during the public commenting period.

- d. PolicyStat Administrator moves the policy to the COO for final approval.
 - e. Upon COO approval, the policy becomes Active and is considered the official version of the policy. Based on need, policies are distributed for staff and network notification and attestation.
5. The Director Review Committee is designed to ensure collaboration and cohesiveness of policies, procedures and attachments across DWMHA.
- a. Each individual in the Director Review Committee shall read each policy for:
 - 1. Content
 - 2. Consistency among similar processes between departments (reduce duplication of “like” policies, procedures, exhibits)
 - 3. Contractual and Regulatory compliance
 - b. Use of PolicyStat will facilitate electronic best practices, collaboration, and commenting for version control. The expectation is that committee members include relevant comments or note their approval of the policy as written.
6. PolicyStat Administrator (PA)
- a. The PA is identified as the Site Administrator for PolicyStat.
 - b. The PA shall determine if exigent approval is required and forward to Chief Clinical Officer for approval.
 - c. Shall maintain a current list of all policies and track those policies needing annual review
 - d. Within 7 business days of the date of an approved policy, the PA will send an email to the webmaster in IT to post all new/revised policies to the website.
 - e. Policy Training/Roll-out:
 - 1. PolicyStat sends an automatic email message to the Policy Owner upon approval of their policy. This automated message serves as the official notification to the Policy Owner that they need to schedule training and roll-out of the policy to the network utilizing the appropriate committee meetings and venues.
 - 2. The owner of the policy may utilize the “Acknowledgments” feature in PolicyStat. Ensuring users have both read and acknowledged a policy’s content can be critical for both legal and procedural reasons. PolicyStat makes this process simple through the ability to assign acknowledgments by user or by user group. In addition, acknowledgments recur each time a policy is updated to ensure users are aware of the latest version of the policy. Area Owners or Site Administrators can then view and track completions by user or by policy.


PROCEDURE MONITORING & STEPS

Who monitors this procedure:	Allison Smith/PolicyStat Administrator
Department:	Strategic Planning
Frequency of monitoring:	Quarterly
Reporting provided to:	Quality Improvement
Comments:	
1. The PolicyStat Administrator will utilize the automated reporting system within PolicyStat to	

continuously monitor that all policies are being reviewed and updated by the appropriate Lead within the 365 days set as the required review cycle.

2. The PolicyStat Administrator will send notifications to the Policy Owner/Lead when necessary to resolve any issues with delays in timely policy development or renewals.

Attachments:

- 
- [Approval WorkFlow.png](#)
 - [Approvalprompt.png](#)
 - [ApprovalSteps.png](#)
 - [Life Cycle of Policy.jpg](#)
 - [NewPolicy.png](#)
 - [PoliciesRequireApproval.png](#)
 - [SampleWorkflow.png](#)
 - [SearchPolicyImage.png](#)
 - [SelectTemplate.png](#)
 - [SOPflow.png](#)
 - [StandardLanguage.png](#)
 - [Style List.jpg](#)
 - [TemplatePrompts.png](#)

Approval Signatures

Approver	Date
Allison Smith: Project Manager, PMP	07/2018

Applicability

Detroit Wayne Mental Health Authority