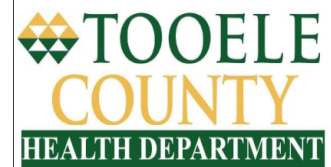


# INTERNAL POLICY & PROCEDURE REVIEW, UPDATE, AND TRAINING

## TOOELE COUNTY HEALTH DEPARTMENT (UTAH)

FTES: 42/POPULATION SERVED: 58,000



### PLAN

#### Identify an opportunity and Plan for Improvement

##### 1. Getting Started

- \* Brainstorming
- \* Nominal Group Technique

Using the Public Health Accreditation Board Self Assessment and a quality improvement project, TCHD identified a need to review, update and train employees on departmental internal policies. A departmental quality improvement team developed a process to accomplish review, update and provide training of internal departmental policies.

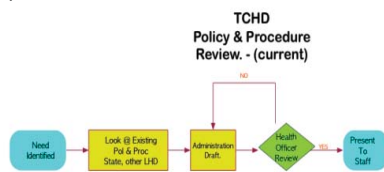
##### 2. Assemble the Team

Because departmental policies and procedures affect all divisions and employees of the health department, a Quality Improvement (QI), team that was crosscutting both by division and job duties was selected. The Team had executive management, Line Supervisor, and clerical. Invitations were given by the Deputy Director so staff knew the project was supported by executive management.

##### 3. Examine the Current Approach

- \* Flowchart

The QI team developed a flow chart of how internal policies are currently reviewed and updated.



##### Aim Statement

By December 2, 2010 the percentage of departmental policies reviewed, updated and presented to appropriate staff within the last 3 years will increase from 6.6% to 35% and a process implemented to assure 100% of all policies are reviewed, updated and presented to appropriate staff every 3 years.

##### 4. Identify Potential Solutions

To identify potential solutions the QI team developed a *fishbone diagram*.



QI Team solutions identified:

- Assign someone to track and report policies and procedures.
- Establish a time frame for review of current policies and procedures.
- Develop a standard operating procedure (SOP), for policy review.
- Adopt a departmental policy about regular review and training of staff on internal policies and procedures

##### 5. Develop an Improvement Theory

An "if then..." approach was used to describe the theories.

- If we assign a staff member the responsibility of tracking policies and procedures for regular review, they will not become outdated and ineffectual.
- If we develop a SOP for policy review and training, then staff will be trained on internal P&P on regular basis.
- If we develop a P&P checklist and train supervisors how to use, then policies will be reviewed and updated more timely and proficiently.

### DO

#### Test the Theory for Improvement

##### 6. Test the Theory

The QI team assigned a staff member to draft a SOP for P&P review, update, and training. The SOP was reviewed and amended by the team for a final draft.

The Executive Office Manager was identified and designated to track P&P review and assigned individual P&P to staff. A time frame for section reviews was assigned.

A spreadsheet was developed that tracked which P&P had been reviewed and presented to appropriate staff.

Status of P&P review and training dates were recorded and compared to data collected from spread sheet after actions were implemented.

### CHECK

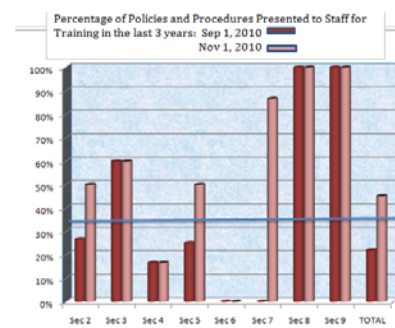
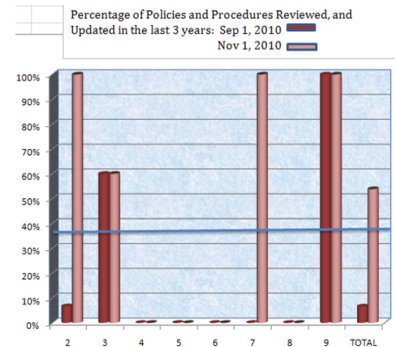
#### Use Data to Study Results of the Test

##### 7. Check the Results

Baseline data indicated that 6.6% of the departmental P&P had been reviewed or updated in the last 3 years and less than 20% had been presented to staff for training. Post intervention indicated that by November 30<sup>th</sup> 56% of P&P had been reviewed and updated and 45% presented to staff for training.

On the charts below the X-axis is P&P

Sections, each section covers a division in the health department. The Y-axis is percentage reviewed in chart 1 and percentage presented to staff in chart 2.



### ACT

#### Standardize the Improvement and Establish Future Plans

##### 8. Standardize the Improvement or Develop New Theory

A staff person was permanently assigned to track policy and procedure update review and training. This responsibility will be added to the employee's job description and goals. A policy and procedure tracking database was created to facilitate continued monitoring and improvement.

##### 9. Establish Future Plans

The Plans for continued improvement include:

- Pre and post test evaluation on employee retention on departmental P&P training.
- Track and record compliance with selective P&P.
- Identify staff ability to locate current P&P.
- Do a comparative analyses of TCHD, P&P with other local health departments in Utah.