NSW Health Policy Directives and Other Policy Documents

**Summary**  This Policy Directive requires NSW Health Organisations to develop and manage Policy Documents in accordance with the principles set out below and with the standards contained in the attached Policy Documents – Standard.

**Document type**  Policy Directive

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**Author branch**  Corporate Governance & Risk Management Unit

**Branch contact**  02 9391 9122

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**Policy manual**  Not applicable

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**Previous reference**  N/A

**Status**  Active

**Functional group**  Corporate Administration - Governance


**Distributed to**  Public Health System, Divisions of General Practice, Environmental Health Officers of Local Councils, Government Medical Officers, Health Associations Unions, NSW Ambulance Service, Ministry of Health, Private Hospitals and Day Procedure Centres, Tertiary Education Institutes

**Audience**  All NSW Health Organisations (including Affiliated Health Organisations) and NSW Ministry of Health

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**Secretary, NSW Health**

This Policy Directive may be varied, withdrawn or replaced at any time. Compliance with this directive is mandatory for NSW Health and is a condition of subsidy for public health organisations.
POLICY STATEMENT
NSW HEALTH POLICY DIRECTIVES
AND OTHER POLICY DOCUMENTS

PURPOSE
This Policy Directive requires NSW Health Organisations (including Affiliated Health Organisations) to develop and manage Policy Documents in accordance with the principles set out below and with the standards contained in the attached Policy Documents – Standard.

Policy Documents include Policy Directives, Guidelines, Information Bulletins and Policy and Procedure Manuals published by the NSW Ministry of Health.

MANDATORY REQUIREMENTS
NSW Health Organisations (including Affiliated Health Organisations) and Branches in the NSW Ministry of Health:

- Are required to comply with all Policy Directives
- Should adhere to Guidelines as these represent best practice. Sound reasoning must exist for departing from recommended standards within a Guideline.
- Should note that important information is contained in Information Bulletins which may relate to changes to statutory, award or other legal provisions, or broader Government policy directions.
- Should adhere to Policy & Procedure Manuals as these provide a compilation of resources and advice on a specific subject and are designed to provide practical support for NSW Health Organisations in exercising their functions.
- When developing and managing Policy Documents, must comply with the standards contained in the attached Policy Documents – Standard including applying the relevant considerations and obtaining the relevant approvals.
- Must ensure that once issued, NSW Health Policy Documents are not amended, added to or otherwise altered or rebadge.

IMPLEMENTATION
Notification and Distribution
It is the responsibility of NSW Health Organisations (including Affiliated Health Organisations) and Branches in the NSW Ministry of Health to:

- Ensure that Policy Documents are distributed to relevant facilities, units and services controlled by the organisation. Any external person or organisation that is required to comply, under an agreement or other contractual arrangement, must be notified of any new or amended requirements.
- Ensure that a current email address is registered with Strategic Relations and Communications Branch in the NSW Ministry of Health.
Monitor and Review

It is the responsibility of the authoring NSW Health Organisations (including Affiliated Health Organisations) and Branches in the NSW Ministry of Health to:

- Monitor the implementation of Policy Documents authored by them and provide advice and assistance regarding their implementation, as part of a robust corporate governance, performance and audit framework.
- Review Policy Directives and Guidelines within the five (5) year default review date. An earlier review should be undertaken where there are changes in laws, policy, or practice.
- Take timely action to rescind obsolete Policy Documents through a formal approval to the Secretary or relevant Deputy Secretary.
- Take timely action to transfer Policy Documents when required, by submitting a completed transfer form to Strategic Relations and Communications Branch.

REVISION HISTORY

<table>
<thead>
<tr>
<th>Version</th>
<th>Approved by</th>
<th>Amendment notes</th>
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<tbody>
<tr>
<td>November 2016 (PD2016_049)</td>
<td>Deputy Secretary, Governance Workforce and Corporate</td>
<td>The Policy Directive has been amended to update reference to Policy Directive Mandatory Training - Criteria for approval as a NSW Health Requirement. Revisions also include minor corrections which do not affect the material substance of the content, and are typographical and grammatical in nature.</td>
</tr>
<tr>
<td>May 2016 (PD2016_014)</td>
<td>Deputy Secretary, Governance Workforce and Corporate</td>
<td>Revisions have been made to allow minor corrections to existing policy documents that do not affect the material substance of the content and are typographical or grammatical in nature, to be approved by the Executive Director of the Author Branch or Chief Executive of a Health Service. The Policy Directive has also been updated to correct outdated information relating to changes of position titles.</td>
</tr>
<tr>
<td>November 2014 (PD2014_043)</td>
<td>Deputy Secretary, Governance Workforce and Corporate</td>
<td>The mandatory requirements outlined in this PD have been developed from PD2009_029. The operational requirements outlined in PD2009_029 are addressed in the Policy Documents - Standard. The document replaces the Department with Ministry and includes Pillars as entities with responsibilities.</td>
</tr>
</tbody>
</table>
| May 2009 (PD2009_029)      | Deputy Director General, Governance, Workforce and Corporate | Introduces:  
  • Approval of at least a Deputy Director-General required for the issue of guidelines in addition to Policy Directives.  
  • Electronic distribution of policy documents by email to NSW Health agencies.  
  • Standard document templates for all policy documents. |
| February 2005 (PD2005_481) | DDG Health System Support                         | Introduced the Department's system for issuing Policy Directives, Guidelines and Information Bulletins.                                       |

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1. INTRODUCTION

1.1 About this Standard

This Standard outlines the NSW Health requirements for developing, approving, publishing, distributing, monitoring, reviewing, rescinding and transferring responsibility for Policy Documents.

1.2 What is a Policy Document?

In NSW Health, a Policy Document includes any Policy Directive, Guideline, or Information Bulletin issued through the NSW Ministry of Health Policy Distribution System (PDS) and any Policy & Procedure Manual otherwise issued by the NSW Ministry of Health. Policy Documents set out important obligations and requirements to be followed by all NSW Health Organisations.

A Policy Document does not include local protocols and procedures prepared by an individual Public Health Organisation, health service or facility to provide specific and more detailed instructions that must be followed within a specific Local Health District, health service or facility.

1.3 Accessing NSW Health Policy Documents


1.4 Definitions

Affiliated Health Organisation: a not-for-profit religious, charitable or other non-government organisation which provides health services and is recognised as part of the public health system under the Health Services Act 1997, for example St Vincent’s Hospital Sydney Limited.

Guideline: A Policy Document that establishes best practice in relation to clinical and non-clinical activities and functions. A Guideline is to be issued through the Policy Distribution System where it is aimed at general adoption across NSW Health Organisations. See Chapter 2.2.

Information Bulletin: A Policy Document that contains information on new or amended requirements imposed by external sources of authority. See Chapter 2.3.

NSW Health Organisation: A Public Health Organisation, NSW Ambulance, HealthShare NSW, eHealth NSW, Health Infrastructure, NSW Health Pathology or any other administrative unit of the Health Administration Corporation.

NSW Ministry of Health: The Ministry supports the executive and statutory roles of the NSW Minister for Health, and Minister for Medical Research, as well as the Minister for

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1 Local protocols and procedures may support the implementation of a NSW Health Policy Document, or may impose additional requirements locally, but cannot be inconsistent with a NSW Health Policy Document. Local protocols and procedures must be clearly branded with the organisation that developed them (for example, a Local Health District logo). They should not be branded with the “generic” NSW Health logo.
Mental Health and Assistant Minister for Health. It monitors the performance of organisations in the NSW public health system, known collectively as NSW Health.

**Policy Directive:** A Policy Document that **must** be complied with and implemented as a part of ongoing operations. See Chapter 2.1.

**Policy Distribution System (PDS):** The official electronic publication of Policy Documents by the NSW Ministry of Health. It provides a central repository for all Policy Documents and is administered by the Strategic Relations and Communications Branch at the NSW Ministry of Health.

**Policy Document:** an umbrella term to describe any Policy Directive, Guideline, or Information Bulletin issued through the NSW Ministry of Health Policy Distribution System and any Policy & Procedure Manual otherwise issued by the NSW Ministry of Health. See Chapter 1.2.

**Policy & Procedure Manual:** A Policy Document containing a compilation of resources and advice on a specific subject, utilised where there is a significant body of information on a critical function or set of functions. See Chapter 2.4.

**Public Health Organisation:** Local health districts, statutory health corporations and affiliated health organisations (with respect to their recognised services) are referred to collectively as Public Health Organisations under the *Health Services Act 1997*.

**SRC Branch:** Strategic Relations and Communications Branch in the NSW Ministry of Health.

### 2. TYPES OF POLICY DOCUMENTS AND THEIR STATUS

#### 2.1 Policy Directives

A Policy Directive is a Policy Document that **must** be complied with and implemented as a part of ongoing operations.

It is a condition of funding that NSW Health Organisations comply with Policy Directives. Affiliated Health Organisations are required to comply with Policy Directives to the extent that they are able to under the law (see Accounts & Audit Determination for Public Health Organisations: [http://www.health.nsw.gov.au/policies/manuals/Pages/accounts-audit-determination.aspx](http://www.health.nsw.gov.au/policies/manuals/Pages/accounts-audit-determination.aspx)).

Policy Directives must only be published through the Policy Distribution System (PDS), using the prescribed format, see Chapter 7.2.1.

#### 2.2 Guidelines

A Guideline is a Policy Document that establishes best practice in relation to clinical and non-clinical activities and functions. Although compliance with Guidelines is not mandatory as a condition of funding, the intention is that Guidelines issued through the PDS are to be adopted across NSW Health Organisations.²

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² The Policy Distribution System (PDS) should not be used for Local Guidelines developed by a NSW Health Organisation to apply internally; or developed as a speciality resource for a “community of practice.” (note: Local Guidelines must not be inconsistent with NSW Health Policy Documents).
NSW Health Policies Directives and Other Policy Documents

NSW Health Organisations must ensure that sound reasons exist for departing from recommended standards or practices within a Guideline issued through the PDS.

Guidelines to be published through the PDS must use the prescribed format, see Chapter 7.2.2.

2.3 Information Bulletins

An Information Bulletin is a Policy Document containing information on new or amended requirements imposed by external sources of authority. For example an Information Bulletin might describe changes to statutory, award or other legal provisions, or contain broader Government policy requirements such as Premier’s Memoranda, Treasurer’s Directions or Federal Government initiatives.

Information Bulletins must only be published through the Policy Distribution System (PDS), using the prescribed format, see Chapter 7.2.3.

2.4 Policy and Procedure Manuals

A Policy & Procedure Manual is a compilation of resources and advice on a specific subject, and may include related Policy Directives, Guidelines and other information. A Manual is utilised where there is a significant body of information on a critical and complex function or set of functions brought together to provide practical support for NSW Health Organisations in exercising their functions.

Manuals are issued by the NSW Ministry of Health and published on the website at www.health.nsw.gov.au/policies/manuals

3 DEVELOPING POLICY DOCUMENTS – APPROVALS AND CONSIDERATIONS

3.1 Approvals required prior to development

A proposal to develop a Policy Directive, Guideline or Information Bulletin is to be formally sponsored by a senior executive of a NSW Health Organisation.

In certain circumstances special additional approvals are required prior to development. For example where the proposal:

- Is contentious: requires in-principle approval of the Secretary of NSW Health.
- Has a significant financial impact: requires in-principle approval of the Chief Financial Officer (CFO) & Deputy Secretary, Finance, NSW Ministry of Health.
- Has a significant legal, industrial, or other workforce impact: requires in-principle approval of the Deputy Secretary, Governance, Workforce and Corporate, NSW Ministry of Health.

A proposal to develop a Manual should be reviewed by the Director, Legal and Regulatory Services, NSW Ministry of Health prior to development to establish that the subject area is appropriate for a Manual.
3.2 Issues to consider prior to development

In proposing any new Policy Document the following should be considered:

(i) Is there a need for a state-wide approach or is the issue better addressed locally?

(ii) What type of Policy Document is suitable to address the issue – Policy Directive, Guideline, Information Bulletin or Manual?

(iii) What are the potential implications on patients or consumers of the NSW Health Service?

(iv) What are the potential implications on Local Health Districts?

(v) Is the proposal contentious? (If so, the in-principle approval of the Secretary of NSW Health is required prior to development)

(vi) What are the potential financial or other resource implications? (if significant, the in-principle approval of the CFO and Deputy Secretary, Finance, NSW Ministry of Health, is required prior to development)

(vii) What are the potential legal implications of the proposal? (If significant, the in-principle approval of the Deputy Secretary, Governance, Workforce and Corporate, NSW Ministry of Health, is required prior to development)

(viii) What are the potential industrial or other workforce implications of the proposal? (If significant, the in-principle approval of the Deputy Secretary, Governance, Workforce and Corporate, NSW Ministry of Health, is required prior to development)

(ix) What is the appropriate consultation process?

3.3 Issues to consider during development

(i) Is the issue best addressed by a new Policy Document or the amendment of an existing document?

(ii) Is there an opportunity to consolidate a number of Policy Documents?

(iii) What are the direct and indirect financial or other resource implications of the proposal including sources of funds and any Activity Based Funding implications?

(iv) Are the proposed requirements as cost effective as they can be while still achieving the intended purpose?

(v) Have the potential legal, industrial or other workforce implications of the proposal been addressed?

(vi) What are the potential implications on patients or consumers of the NSW Health Service?

(vii) Have the relevant stakeholders been consulted, including Local Health Districts?

(viii) If the introduction of the proposed requirement will create a significant financial or other resource impact or where there is a significant departure from current policy, have NSW Health Organisations been provided an opportunity for input?

(ix) What are the training requirements for managers and staff who will be required to implement the proposal and the cost of ensuring these requirements are met? If the Policy Directive imposes a mandatory training requirement does it comply with
PD2016_049 Mandatory Training - Criteria for approval as a NSW Health Requirement?

(x) Are the proposed requirements or standards achievable and practical?

(xi) What will be the resource implications of monitoring, measuring and reporting on the implementation of the Policy Document? Are they as cost effective, reasonable and practical as they can be? (Note: NSW Health Organisations and Branches in the NSW Ministry of Health are responsible for monitoring the implementation of Policy Documents authored by them. Any reporting requirements to be established as part of the implementation of NSW Health Policy Documents should be considered and assessed during the Policy Document development process).


(xiii) Is there to be inclusion of a form for state-wide use? If so endorsement must be received from the State Forms Management Committee (See PD2009_072 State Health Forms).

Note: The above matters are not an exhaustive list of considerations in proposing and developing a Policy Document. The individual circumstances can raise a range of other issues for consideration.

4 PUBLISHING POLICY DOCUMENTS – APPROVALS AND CONSIDERATIONS

4.1 Review and endorsement by SRC or Legal and Regulatory Services

Prior to a Manual being submitted for approval, the final draft must be reviewed and endorsed by the Director, Legal and Regulatory Services at the NSW Ministry of Health (mail to: legalmail@doh.health.nsw.gov.au). This should only occur once it has been quality checked by the authoring NSW Health Organisation or Branch in the NSW Ministry of Health and approved by the Chief Executive / Branch Director.

Prior to any Policy Directives and Guidelines being submitted for approval, the final draft must be reviewed and endorsed by the Strategic Relations and Communications (SRC) Branch at the NSW Ministry of Health (mail to: srcmail@doh.health.nsw.gov.au). This should only occur once it has been quality checked by the authoring NSW Health Organisation or Branch in the NSW Ministry of Health and approved by the Chief Executive / Branch Director.

Final drafts of Policy Directives, Guidelines and Information Bulletins must be submitted to the SRC Branch with a cover page containing details that will appear as the first page of the document on the website. The cover page template is available from the intranet site http://internal.health.nsw.gov.au/src/er/templates.html The SRC Branch will review the documents, focusing on the following:

- Mandatory requirements or key information clearly presented.
- Policy Document type correctly identified.
- Correct references made to existing policies.
• Are there other existing documents that relate to the subject?
• Should the draft replace any existing document or documents?
• Functional groups selected are appropriate.
• Keywords selected are appropriate.
• The first word of the title allows the document to sit in a suitable a-z list.
• Applies to and distribution lists are appropriate.
• Stylistic compliance for example, font sizes, footers, policy numbers, document formatting, obvious grammatical errors, use of abbreviations, acronyms and use of templates.

Reviewed documents will be returned to the author for amendment, if required. Authors must send updated documents back to the SRC Branch. SRC will then endorse the documents for publication on the Cover Page and return the endorsement and endorsed copies of the Policy Documents to the author for their inclusion in the approval brief to the Secretary or relevant Deputy Secretary.

4.2 All new Policy Documents where substantial amendments are proposed, must be approved by the Secretary or relevant Deputy Secretary

Once reviewed and endorsed by the SRC Branch (or in the case of Manuals, by the Director, Legal and Regulatory Services), the author is responsible for submitting the documents for approval to the Secretary or relevant Deputy Secretary. Only with this approval will the Policy Document be published (please note that Information Bulletins do not require this level of approval – Senior Executive approval is sufficient).

Note: This process is the same for all NSW Health Organisations including those external to the NSW Ministry of Health.

4.3 Approval of minor corrections to existing Policy Documents

If the amendments are only of a typographical or grammatical nature and do not result in any substantive change to the content of the Policy Document, the amended document can be approved by the Chief Executive / Branch Director and will be issued a new policy number on the PDS.

4.4 Submit for Publication

For Manuals, once approved by the Secretary or relevant Deputy Secretary, the signed approval together with the Manual should be emailed to the Legal and Regulatory Services Branch for publication. The Legal and Regulatory Services Branch then coordinates the allocation of an ISBN and the publication of the Manual on the website. The author will be notified.

For Policy Directives, Guidelines and Information Bulletins, once approved by the Secretary or relevant Deputy Secretary (or in the case of Information Bulletins the appropriate Senior Executive), the signed approval together with the Policy Directive, Guidelines and Information Bulletins should be emailed to the SRC Branch for publication.

The SRC Branch reviews format and confirms that all documentation meets the requirements for issuing the approved Policy Directive, Guidelines or Information Bulletins on the website. Once loaded, the author is notified.

Each time a **Policy Directive, Guideline or Information Bulletin** is issued it is allocated a unique document number which is used for version control. The document number consists of a prefix, a year and three digits. The document type determines the prefix, the year refers to the year the document was issued and document number is generated sequentially (e.g. PD2014_XXX, GL2014_XXX or IB2014_XXX).

**Table: Summary of process for submitting Policy Directives, Guidelines and Information Bulletins to SRC for issue through PDS**

<table>
<thead>
<tr>
<th>Stage 1 – submit to SRC electronically</th>
<th>SRC review</th>
<th>Stage 2 – Submit to SRC electronically</th>
<th>SRC formats and loads document on website.</th>
<th>SRC sends email notification to the author once online.</th>
<th>SRC distributes documentation to nominated distribution lists in the weekly notification emails.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Guideline</td>
<td>Guideline</td>
<td>Guideline</td>
<td>Secretary / Deputy Secretary approved brief, SRC endorsed Cover Page, Guideline Summary, Guideline, Aboriginal Health Impact Statement, signed Author’s Approval Checklist.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| Policy Directive | Cover Page; Policy Statement; Procedures (PD); and supporting documents | SRC review documents and where necessary provides feedback to author. | Author amends documents where necessary and provides to SRC for final endorsement of format. | |
| Guideline | Cover Page, Guideline Summary, Guidelines (GL) | Once format is endorsed by SRC author must progress document through sign off. | |
| Information Bulletin | Cover Page, Information Bulletin(IB) | | |
5 NOTIFICATION AND DISTRIBUTION OF POLICY DOCUMENTS

5.1 Notification and distribution of Policy Documents within NSW Health Organisations

When a new Policy Directive, Guideline or Information Bulletin is published through the Policy Distribution System (PDS), the NSW Ministry of Health will notify Organisations identified by the author of the Policy Document via email.

A quarterly newsletter will also be circulated to NSW Health Organisations advising of Policy Directive, Guidelines, Information Bulletins and Manuals published in the previous three months.

It is the responsibility of NSW Health Organisations to:

(i) Provide the NSW Ministry of Health PDS administrator with an up-to-date generic email account for the distribution of new Policy Documents.

(ii) Ensure that Policy Documents are distributed to relevant facilities, units and services controlled by the organisation.

(iii) Ensure that any external person or organisation that is required to comply, under an agreement or other contractual arrangement, is notified of any new or amended requirements.

(iv) Ensure that relevant facilities, units or services controlled by the organisation, and relevant contractors, are notified of rescission of obsolete Policy Documents.

Note: NSW Health Policy Documents must not be amended, added to or otherwise altered or rebadged.

5.2 Notification and distribution of Policy Documents applicable to NSW Ministry of Health

When a new Policy Directive, Guideline or Information Bulletin is published through the Policy Distribution System (PDS), NSW Ministry of Health Branches and Deputy Secretaries will be notified via email. When notified of a new Policy Document, Branch heads should have processes in place to:

(i) Identify and assign responsibility for implementing Policy Document requirements applicable to the Branch.

(ii) Distribute Policy Documents to relevant staff within the Branch and to any other persons or organisations that are required to comply as a result of a funding agreement or other contractual obligation managed by the Branch.

(iii) Ensure that relevant staff in the Branch are aware of the requirements and understand their obligations.

(iv) Identify competency and training requirements of staff within the Branch and ensure proper strategies are in place to meet them.

(v) Assess the risks associated with the implementation of Policy Document obligations and develop mitigation or control strategies as appropriate.

(vi) Report the implementation of Policy Document obligations, as required.
6 MONITORING AND REVIEWING POLICY DOCUMENTS

6.1 Requirement to Monitor

NSW Health Organisations and Branches in the NSW Ministry of Health are responsible for monitoring the implementation of Policy Documents authored by them and for providing advice and assistance regarding their implementation.

Any reporting requirements to be established as part of the implementation of Policy Documents should be considered and assessed during the Policy Document development process.

6.2 Requirement to Review

The current default review date for Policy Directives and Guidelines is five (5) years. Policy Directives and Guidelines should be reviewed earlier when there are changes in law, policy or practice requiring an amendment or rescission.

Three months prior to the review date an automated email will be sent by SRC Branch to advise the author of the review date for that Policy Directive or Guideline. The review to be undertaken by the author must establish if the document is to remain active and unchanged, is to be replaced or made obsolete.

If a Policy Directive or Guideline is to remain active and unchanged, the revised review date will be a date determined by the author Branch / Organisation. The original document number will be retained if the document remains active.

If the content of a Policy Directive or Guideline requires amendment, the author Branch / Organisation must process a new replacement document which will be issued a new document number.

6.3 Questions to consider when reviewing a Policy Document

(i) Is there still a need for a state-wide approach or is the issue better addressed locally?

(ii) What are the ongoing direct and indirect financial or other resource implications of the Policy Document? Are the Policy Document requirements as cost effective as they can be whilst still achieving the intended purpose?

(iii) What are the ongoing competency and training requirements for managers and staff that will be required to implement the Policy Document and the cost of ensuring these requirements are met (see PD2016_048 - Mandatory Training - Criteria for Approval as a NSW Health Requirement?);

(iv) What are the ongoing resource implications of monitoring, measuring and reporting on the implementation of the Policy Document?

(v) Is the kind of Policy Document still suitable to address the issue – Policy Directive, Guideline, Information Bulletin or Manual?

(vi) Are there any existing Policy Documents that can be consolidated?

(vii) Does the Policy Document need to be transferred to another author Organisation/Branch? – see chapter 6.5.
6.4 Rescission of Obsolete Policy Documents

All Policy Directives and Guidelines remain active until formally rescinded, irrespective of the prescribed review date.

If a Policy Document becomes obsolete, the author Branch / Organisation must take timely action to rescind it through a formal approval to the Secretary or the relevant Deputy Secretary.

Once this occurs the Policy Document will be removed from the active document lists and placed in the archive. The author Branch / Organisation can prepare an Information Bulletin (using the same distribution list) to advise that the document is no longer current.

Manuals should be regularly reviewed to ensure the information in them is current. Where Policy Directives or Guidelines are amended, any related Manual is to be amended at the same time.

6.5 Transfer of responsibility for Policy Documents

From time to time due to functional change or restructure, responsibility for a Policy Document may need to be moved from one Branch / Organisation to another. It is the responsibility of the original author Branch / Organisation to identify where a Policy Document should transfer to another Branch / Organisation and liaise with that other Branch / Organisation to obtain agreement for the transfer. Once agreement is reached, a “Transfer Form” should be approved by each Branch / Organisation and sent to the SRC Branch in the NSW Ministry of Health for update.

7 TEMPLATES AND FORMAT OF POLICY DOCUMENTS

7.1 Templates


There is no template for Manuals, as these are prepared based on the content and audience.

7.2 Format of Policy Documents

7.2.1 Format of Policy Directives

There are four mandatory headings within the Policy Directive:

(i) Purpose

The ‘purpose’ section should provide the reader with a succinct outline of the intended outcomes. This section must state in three to four sentences what the policy is about. This may include information on why the policy exists and what its purpose or objectives are.

(ii) Mandatory requirements
The ‘mandatory requirements’ section of the Policy Directive states what must be undertaken to achieve the objectives of the Policy Directive.

The critical requirements should be summarised within this section and a reference, including section number, provided if supporting document must be read and understood.

This section must make clear to readers of the Policy Directive what obligations must be met and undertaken as a result of the mandatory position taken by the NSW Ministry of Health.

(iii) Implementation

The ‘implementation’ component of the Policy Directive provides an overview of the roles and responsibilities of key parties in implementing the Policy Directive. This section should allow the audience of the Policy Directive to understand the requirements as it relates to them and what they must do as a result of the Policy Directive requirements.

The positions or bodies with responsibility for delivering the requirements of this Policy Directive should be listed with bullet points indicating their key responsibilities.

If a responsibility that is listed within this section refers to information provided in the supporting documentation, a reference to the relevant section should be provided in brackets.

(iv) Revision History and list of supporting documents

A document information page including a revision history and a list of supporting documents must be provided with all Policy Directives. The revision history indicates previous versions of the document and any relevant changes.

The above content (called the Policy Statement) must not exceed two pages. A third page can be added for the revision history and attachment listing, if required. Additional information necessary to be understood to carry out or comply with the Policy Directive must be detailed in supporting documents (such as the Policy Procedure) and issued together with the Policy Directive.

7.2.2 Format of Guidelines

There are four mandatory headings within the Guidelines:

(i) Purpose

The ‘purpose’ section should provide the reader with a succinct outline of the intended outcomes. This section must state in three to four sentences what the Guideline is about. This may include information on why the Guideline exists and what its purpose or objectives are.

(ii) Key principles

The ‘key principles’ section of the Guideline states what should be undertaken to achieve the objectives of the Guideline. The key recommendations should be summarised within this section and a reference, including section number, provided if an attached document needs to be read and understood.
This section must make clear to readers of the Guideline what should be undertaken as a result of the position taken by the NSW Ministry of Health.

(iii) **Use of the Guideline**

The ‘use of the Guideline’ component provides an overview of the actions that should be taken by parties that the Guideline applies to. This section should allow the reader of the Guideline to understand the recommended standards/actions as a result of the Guideline as they relate to them.

The positions or bodies that the Guideline affects should be listed with bullet points indicating how the Guideline should be used.

If a responsibility that is listed within this section refers to information provided in the attached documentation, a reference to the relevant information should be provided in brackets.

(iv) **Revision History and list of supporting documents**

A document information page including a revision history and a list of supporting documents must be provided with all Guidelines and is included in the templates. The revision history indicates previous versions of the document and any relevant changes.

The above content (called the Guideline Summary) must not exceed 2 pages. A third page can be added for the revision history and attachment listing, if required.

7.2.3 **Format of Information Bulletins**

Information Bulletins contain the following headings (the first two are mandatory):

(i) **Purpose**

The ‘purpose’ section of the Information Bulletin should provide the reader with a succinct outline of the intended outcomes of the information bulletin. This section must state in 3 to 4 sentences what the Information Bulletin is about. This may include information on why the Information Bulletin exists and what it is designed to achieve.

(ii) **Key information**

The key information should be summarised within this section and a reference, including section number, provided if an attached document needs to be read and understood.

(iii) **List of attachments**

(iv) A ‘list of attachments’ is optional.

7.2.4 **Format of Manuals**

There is no specific format for Manuals, as these are prepared based on the content and audience.
### ATTACHMENT 1 - Table: Summary of Policy Documents and their features

<table>
<thead>
<tr>
<th>Type of policy document</th>
<th>Is it binding?</th>
<th>Is it issued through the PDS?</th>
<th>Approval required prior to development</th>
<th>Approval required prior to publication</th>
</tr>
</thead>
<tbody>
<tr>
<td>Policy Directive</td>
<td>Yes. Compliance mandatory.</td>
<td>Yes – must be.</td>
<td>Senior Executive</td>
<td>Endorsed by SRC. Approved by Secretary or Deputy Secretary.</td>
</tr>
<tr>
<td>Guideline</td>
<td>Not mandatory, but sound reasons must exist for departing from it.</td>
<td>Yes – where identified to be applied and distributed across NSW Health Organisations.</td>
<td>Senior Executive</td>
<td>Endorsed by SRC. Approved by Secretary or Deputy Secretary.</td>
</tr>
<tr>
<td>Information Bulletin</td>
<td>Yes. Require a compliance response or contain important information for public health system.</td>
<td>Yes – must be.</td>
<td>Senior Executive</td>
<td>Endorsed by SRC. Approved by Senior Executive.</td>
</tr>
<tr>
<td>Manual</td>
<td>Not mandatory, but intended to set out best practice. Sound reasons must exist for departing from it.</td>
<td>No. Issued through Ministry’s Legal &amp; Regulatory Services Branch.</td>
<td>Director Legal &amp; Regulatory Services Branch Ministry of Health</td>
<td>Endorsed by Director Legal &amp; Regulatory Services Branch. Approved by Secretary or Deputy Secretary.</td>
</tr>
</tbody>
</table>
### ATTACHMENT 2 - Author’s Approval Checklist


#### Policy content

1. Is it a Policy Directive/Guideline?  
   - [ ] yes  
   - [ ] no

2. Previous Policy Directives/Guidelines and files have been researched.  
   - [ ] yes  
   - [ ] no

3. Previous Policy Directives/Guidelines have been rescinded and the proposed Policy Document is to be distributed **at least** to the level of the rescinded Policy Directives/Guidelines.  
   - [ ] yes  
   - [ ] no

4. Functional and sub group titles have been used.  
   - [ ] yes  
   - [ ] no

   - [ ] yes  
   - [ ] no  
   - [ ] n/a

6. The draft has been referred to:  
   - [ ] Local Health Districts, Statutory Health Corporations  
   - [ ] Relevant NSW Ministry of Health Branches (i.e. matters that involves nursing are reviewed by the Nursing & Midwifery Office)  
   - [ ] Chief Financial Officer (If financial matter)  
   - [ ] Director, Legal and Regulatory Services (If legal matter)  
   - [ ] Workforce Planning and Development if the Policy Directive contains a mandatory training requirement (PD2016_048).  
   - [ ] yes  
   - [ ] no  
   - [ ] n/a

#### Aboriginal Health Impact Statement


7. Has the Declaration been completed?  
   - [ ] yes  
   - [ ] no

8. Has the Checklist been completed?  
   - [ ] yes  
   - [ ] no

9. Have these documents been provided to the Centre for Aboriginal Health?  
   - [ ] yes  
   - [ ] no

#### Distribution Lists

10. Distribution list selected is to the appropriate level.  
    - [ ] yes  
    - [ ] no

11. Distribution list is indicated on the approval brief.  
    - [ ] yes  
    - [ ] no

12. Who the document applies to has been indicated.  
    - [ ] yes  
    - [ ] no

#### Strategic Relations and Communications

13. The document has been reviewed and the cover page has been signed off by Strategic Relations and Communications  
    - [ ] yes  
    - [ ] no

14. Date endorsed by Strategic Relations and Communications  
    - [ ] yes  
    - [ ] no

### Process for distribution

15. A copy of the approval to issue is attached, and appropriate approval has been obtained.  
    - [ ] Policy Directives and Guidelines must be approved by the Secretary or a Deputy Secretary  
    - [ ] Information Bulletins must be approved by either Directors of Branches or more senior officers
    - [ ] yes  
    - [ ] no

#### Inclusions

16. The following have been provided:  
    - [ ] Hardcopy of all documents for approval  
    - [ ] Electronic copy of all documents to SRC for loading on PDS  
    - [ ] File number and contact details have been cited in the cover page  
    - [ ] Attachments to be sent out with the document, if any
    - [ ] yes  
    - [ ] no

Author’s name _____________________    _______________________   ___/___/___
Print  Signature Date

The approving officer is certifying that all of the above have been carried out/provided. If there are any omissions the material will be returned to the author.