

Document Title:	HAAD Standard for Policy Development in Healthcare facilities in the Emirate of Abu Dhabi		
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1. Purpose

- 1.1 This standard sets the requirements for the development and management of operational level policies and procedures for HAAD licensed Healthcare Facilities in the Emirate of Abu Dhabi.

2. Scope

- 1.1 This standard applies to all Healthcare Facilities and Professionals licensed by HAAD in the Emirate of Abu Dhabi.

3. Enforcement and Sanctions

- 3.1 Healthcare providers must comply with the terms and requirements of this Standard. HAAD may impose sanctions in relation to any breach of requirements under this standard in accordance with the [HAAD Policy on Inspections, Complaints, Appeals and Sanctions].

4. Duties for Healthcare Providers

- 4.1 Healthcare providers are required to document facility specific operational policies and standard operating procedures to help staff and management teams run the facility and comply with federal, emirate and HAAD regulations in order to deliver safe and

quality healthcare services. Healthcare providers must ensure that their facility policies and procedures are:

- 4.1.1 Consistent with federal and emirate laws and HAAD regulations including the HAAD Policies and Standards;
- 4.1.2 developed to address the scope of services provided by and functions of the facility;
- 4.1.3. structured to delineate the rules (policy) governing healthcare service delivery from the processes, tools and approaches (procedures) necessary to implement the rules;
- 4.1.4. written in clear, concise and simple and understandable language, in a clear font, design and format, are factual and aligned with applicable laws and regulations;
- 4.1.5. written and reviewed by appropriately qualified members of staff of the healthcare facility and/or by appropriate experts instructed by it, and approved by the authorised and responsible managing delegate or facility committee;
- 4.1.6 written following consultation with any partner organisations or stakeholders to ensure appropriate and implementable operations;
- 4.1.7. regularly reviewed and updated to ensure currency and responsiveness to changes and continuous improvement with review at least every two years.
- 4.1.7 updated to reflect new or revised regulations, and where relevant, HAAD audit findings and directions for improved compliance purposes; and
- 4.1.8 easily accessible to staff and management, and where relevant, to patients and visitors of the facility.

4.2 Healthcare providers must also:

- 4.2.1 Identify senior management accountability and roles and responsibilities for policy and procedure development, review and management and approval;
- 4.2.2. have in place a system to control, monitor and track policy and procedure version control, filing and archiving;
- 4.2.3. have strategies for the communication, dissemination, training and implementation and monitoring of facility policies and procedures; including for

each newly issued policy and procedure, and addressing staff orientation and induction.

5. Standard 1. Policy cover page

5.1 A Healthcare provider must ensure that the following specified details are included on the cover page of each of its policies and procedures:

5.1.1 The headline or title of the policy/procedure;

5.1.2 the date on which it is adopted and comes into force and the date (if any) on which it ceases to have effect;

5.1.3 the facility name and logo;

5.1.4 a document reference and version number which is consistent with that of its other Policies and procedures, allowing it to be easily identified, referred to and stored;

5.1.4 the date, version number and authorised approving delegate name at the foot of each page;

5.1.5 a brief overview of the contents of policy and/or procedure, including as a minimum:

5.1.5.1 Persons involved in the development/revision;

5.1.5.2 statement of purpose;

5.1.5.3 target audience/applicability: who or what the policy applies to or addresses;

5.1.5.4 policy authority; (those responsible for approval);

5.1.5.5 roles and responsibilities specific to the policy/procedure; and

5.1.5.6 reference to all policies and procedures relevant to the implementation of the policy/procedure.

5.1.6 a statement of how and to whom to raise questions about the Facility policy or procedure; and

5.1.7 relevant forms and flow charts for any procedures, in support of implementation.

6. Standard 2. Implementation and Communication

6.1 A healthcare provider must ensure that:

6.1.1 Communication, training and implementation strategies and plans are developed and applied in a coordinated manner with the specific steps mapped to roles and responsibilities within the facility and according to clear timeframes;

6.1.2 they appoint a governing committee, or appropriately qualified and authorised senior officer, to oversee and manage the communication, training and implementation strategies and to monitor and report to the facility management on the effectiveness of the system;

6.1.2 function specific and relevant policies and procedures are included in orientation and induction programmes for new staff and as regular refresher training for all staff;

6.1.2 a copy of each policy and procedure is available at all times to be read by facility staff, and when requested by HAAD auditors, either in hard copy or electronically and is made available to be provided in hard copy for members of the facility staff; and

6.1.3 there is at least one appropriately qualified and authorised member of staff to answer questions about each policy or procedure, who is available to be contacted by other members of staff at all reasonable times;

6.2 Each Healthcare Professional must:

6.2.1 Read and ensure that they have understood all of the policies and procedures that are in force in the healthcare facility for which they work and that are relevant to his/her roles and responsibilities;

6.2.2 sign a declaration that he/she has read and understood all policies and procedures relevant to their roles and responsibilities;

6.2.3 notify the facility specified and authorised member of staff if they believe that any policy or procedure requires revision or is not in accordance with current regulations, or where relevant international evidence based best practices; and

6.2.4 undertake any training that is provided as part of orientataion and for any new applicable policy or procedure.

7. Standard 3. Policy Storage and archiving

7.1 Healthcare providers must:

7.1.1 maintain secure, central and clearly identified locations to store and archive all of its policies procedures including both hard copy and electronic documents; and

7.1.2 ensure that current policies can be easily distinguished from those that have ceased to be in force or which are still under development.