10 Principles for Developing/Reviewing/Updating PROMPT documents

1. **Clarify – do we really need it?** Has it already been written, why write it, what will it achieve, what is it about, who should read it, and who will be responsible for it? Note: duplication is not acceptable.

2. **Know what type of PPG document you are writing? Develop the information accordingly:**
   - **Policy** - BOD or CEO/Executive - rules oriented towards a long-term purpose or designed to meet legal & operational requirements often embodied in legislation; applies to the whole organisation rather than to one part of it.
   - **Procedure** - Set of steps / a process that provides details about how to do something, for example: investigations; diagnostic, therapeutic or technical tasks; work practices.
   - **Guideline** – Statements/options to assist the practitioner make decisions about appropriate patient/consumer care – provides clinical considerations.

3. **Write for the reader, the Target Audience and consider their requirements – Ask them.**

4. **Be consistent:**
   - pay attention to language for example ‘should’ implies choice; ‘must’ implies required
   - if writing a procedure use the word procedure (be consistent)

5. **Care Factor – who cares about what you write: Everyone! Consumers/family/public/staff/legal groups**
   **CARE** about the content! Make sure it is:
   - **Current** Align to current legislation, standards & up-to-date health care/practice. Update information whenever practice changes. Know review dates and schedule ahead to keep information current.
   - **Appropriate** Determine knowledge gaps, check key areas of communication and customise to suit local context. Research quality health outcomes & health practitioner information. Liaise with all relevant professionals; consult and seek expert feedback.
   - **Reliable** Ensure readability; eliminate risks: ambiguity; inaccuracies; inefficiencies. Identify continuous improvements to processes/resources/service. When reviewing information purposefully clarify relevance (see point 1).
   - **Evidenced-based** Evidence-based practice (EBP), refer University of Canberra, *Evidence-Based Practice in Health*. Identify ‘Key’ references only; preferably ≤ 5 years.

6. **Follow the right Template; right version; right standardised headings.**

7. **Evaluation –** provide a systematic process to critically assess the information over time (eg. audit; data; feedback from expert/team/consumer – how will you monitor for emerging evidence/gaps?)

8. **Involve the CREW**
   - **Check** Consider the CARE Factor!
   - **Reflect** What applies: legislation; regulation; standards; references; links; key documents
   - **Engage** Ask for feedback. Consult with all relevant people/services/experts
   - **Write** Develop the document using knowledge, resources, research & feedback

9. **Request approval** from the right level of authority

10. **Communicate - CARE** about the right people having the right up-to-date information
information for publishing documents on prompt

templates vary according to document type:

- **Drug Protocols** – Pharmacy template (refer pharmacy)
- **Forms** for internal & external use – Style Guide template (refer Communications and Marketing)
- Medical Records – DMR template (Barcoded) (refer PROMPT)
- **Policy/Procedure/Guideline** – template (refer PROMPT)
- Terms of Reference – TOR template (refer PROMPT)
- **Web-based Template** – for approved websites (refer PROMPT)
- **WISE Template** – for all Patient/Consumer Information including surveys - WISE (refer https://onepoint.barwonhealth.org.au/corporate/clinical_support/Consumer_Centred_Care/WISE/SitePages/wise_nest.aspx)

**Duplication:**
- Replicated information will **not** be approved for inclusion on PROMPT.
- If a content variation is required, please discuss the inclusion of your information with the Lead Service – check the document for the Lead Reviewer and Approver details.

**Template for policy/procedure/guideline**

- **Follow template headings** do **not** delete (see following pages for template heading explanations)

**Highest Approval** Committee must sight & approve the document (**sign-off evidence required**)

**Policy** must be reviewed by the appropriate Governance committee & approved by the appropriate **Chief Officer** (can only be approved by the Executive Governance Committee or Board)

**Procedure/Guideline** must be reviewed by all relevant key stakeholders and approved by the aligned Committee

All documents containing drugs **must** be reviewed and signed-off by a specialist Pharmacist or the **Drug & Therapeutics Committee** prior to uploading onto PROMPT. The relevant Pharmacist or committee must be included in the Contributor’s table

All **Consumer Information** must be consumer reviewed and approved through the WISE process. **Confirmation of sign-off by WISE must be provided.** If there are not significant changes, a second WISE process can be bypassed.

All contributors are listed in the Contributors table (document owner: top row, lead-reviewer, individuals, groups and committees (meeting date included in 4th column)

**Committee** review or sign-off (where relevant) - Evidence of discussion in the meeting minutes

All relevant Legislation, Acts and **Standards** should be considered & identified

All references are included under the correct heading in APA citation style (listed alphabetically) and hyperlinked (where appropriate). See last page for examples of APA

A quality compliance check must be before publishing on PROMPT New & Updated policy/procedures/guidelines must be submitted to the Policy Administrator (or delegate) for a. All relevant template criteria must be met before the document will be published.

**Review of a document must be completed before the “due for review by: [date]”**.

Clinical reviewers must consider evidence-based practice, scholarly literature and provide evidence of knowledge inquiry where appropriate (references should not be older than 5 years)

**Refer:**
- Document Control Policy
- Document Management Procedure
Submit a Policy/Procedure/Guideline for Publishing

Header
Title: a straightforward concise title (to assist PROMPT searches to find the right document).
   Include a keyword – one that staff are most likely to use when searching PROMPT.
   Make sure your title is easily differentiated from other PROMPT titles.
Department: is where the document is listed on the PROMPT system.
Approved by: the Approver must be a Committee (where available) – see Document Control Policy: The Director can now be included in the Reviewer list either as they Lead Reviewer or a Contributor.

Template Headings
- All headings must have some wording. If any of the headings are not applicable N/A must be displayed (under the heading) to show that they have been considered and not just missed.
- The text starts under the heading (not next to the heading).

Purpose
The intention/aim/reason for the policy/procedure/guideline must be clear and concise as well as be aligned to the title.

Target Audience
- Identities who the document applies to
- (if applicable) who it does not apply to
- Where competency requirements are a prerequisite these must be identified e.g. specific competencies

Definition
Definitions are listed alphabetically or if no definitions are required, N/A

Policy/Procedure/Guideline
Based on the content e.g. Procedure provides steps; a guideline provides decision choices
- Content (text)
  - Content must be easy to read and understood.
  - Must provide a local context.
  - The use of words such as “must” and “should” - apply as appropriate.

  Be consistent
  As a General Rule:
  Should implies choice
  Must implies required or compelled to; be reasonably expected to; or bound to
  - The document must be clearly marked as a draft during its development/review status, prior to submitting to PROMPT for publishing.
  - The document needs to reflect evidence-based or best known practice

Evaluation
Evaluation is about assessing if the document is performing the function or purpose it is supposed to be doing.
What monitoring and compliance methods could be used to reflect upon the content of the document?
What data can be collected to see if results match expected outcomes – the content/processes/practice are current, appropriate, reliable & evidence-based? For example: audit data; minuted team discussions; committee reviews; consumer/staff feedback; KPI data; RiskMan incidents; reported non-compliance; staff appraisals; how frequently the document is accessed …
Key Aligned Documents

When other Barwon Health documents are relevant they should be listed alphabetically under key aligned documents (KADs). Each KAD is hyperlinked (to PROMPT document or Intranet site) and a clear pathway included so the source can be traced if the link breaks. The KAD formatting is indent 2nd row (see following example)

Standard & Transmission-based Precautions, PROMPT: Barwon Health \ Infectious Diseases \ Infection Prevention Services

Key Legislation, Acts & Standards

All websites must be checked whenever the document is reviewed and retrieval dates updated accordingly - this confirms that link/s remain active, current and appropriate.

Listings are ordered alphabetically as per APA citation style (see next page for some examples)

Include only key legislation, acts & standards. If a website address is identified include the retrieval date so we know when the website was last accessed. See following example:


Barwon Health Executive Sponsors : 1.06

References

All references must be written in the APA reference style (as discussed above). Listings are ordered alphabetically as per APA citation style (see next page for some examples) Numbers are not used.

Contributors

Document Owner: must be identified on the first row of the contributor table. No personal name is required, only the title and the Directorate or the area of the Directorate that this person is responsible for.

Lead Reviewer: must be identified on the second row of the contributor’s table

Contributors: the Lead Reviewer of the document is responsible for consulting with and engaging all stakeholders so they can contribute to the review. All contributors are identified in the Contributor’s table (committee members may be identified as “members” – committee sign-off identified as the “meeting date”)

Where appropriate, the Lead Reviewer, Lead Service or Policy Administrator may request the document be reviewed by an appropriate committee/s.

Documents containing drugs/medications must be signed-off by a specialist Pharmacist or the Drugs & Therapeutics Committee prior to uploading onto the PROMPT system. The relevant Pharmacist or committee must be included in the Contributor’s table.

Consumer/Patient Information must be signed-off by the Consumer Representative Committee (WISE) Committee involvement and approval is acknowledged and the date of the meeting is displayed in the last column

Interim Review Approval: this must be noted if a document is taken down for a change in between the specified 3 year period when a full review is required. The Director/Chief is the Interim Approver and a date noting approval was given is required.

NOTE: whenever a document is reviewed, the details of the previous contributor's list must be refreshed with the details of the current reviewer, contributor/s and committees.

Footer

The template footer is formatted with special electronic “stamps” that enable PROMPT to automatically adjust the information contained in the footer when the document is uploaded. There is nothing for you to do.
Submit a Policy/Procedure/Guideline for Publishing

Other
Appendices should be cited in the text and the information added to the end of the document.
Flowcharts – see Instruction Sheet Flowchart Symbols and Development
Microsoft Visio can also be used which allows the chart to be adjusted/updated over time.
APA Citation Style – examples of common applications (Deakin University, 2012)

**Book**


**Journal article**


**Web page**

Author, A. (year). Title of page. Retrieved month, day, year from web address

*The title of a web page is not italicised.*

Barwon Health requires the retrieval date to be identified.


**Eight or more authors**


*Provide the family names and initials of the first six authors followed by three ellipsis points and the last author’s family name and initial.*

**Standards** (citation without link)


**In compiling your APA reference list, you should:**

- include books, journal articles, online sources etc. in one alphabetical listing
- order entries alphabetically by family name of author/s
- list works with no author under the first significant word of the title
- indent second and subsequent lines of each entry (0.5 cm)

**Reference**