**Policy and Procedure Development Process**

This document aims to help members of staff understand the process of developing new policies and procedures. It lists the stages that should be followed, in order to ensure they are written, approved and reviewed in a consistent manner.

**Version Control**

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| **Author** | Lorna Biddell (National Management Trainee) |
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| **STAGES** |
| 1. **Check the current policies and procedures on the TRI.X system**   Before you begin to write a new policy/procedure, check on the TRI.X system to see if there is already existing information on the topic. If yes, review and update what is already on there. If no, carry on to the next step. |
| 1. **Joint agreement for the development of a new policy/procedure**   All of the stakeholders to discuss the need for the policy/procedure and how the organisation will benefit from having it. |
| 1. **Appoint an author**   Stakeholders to decide who the policy/procedure author will be, depending on experience and demand. |
| 1. **Carry out co-production workshops/focus groups together with staff members and residents**   The author is responsible for co-producing the policy/procedure together with other colleagues and residents. This can be done through workshops or focus groups. |
| 1. **Create a draft of the policy/procedure and consider if it needs an Equality Impact Assessment (EIA)**   This is the first draft of the policy/procedure that should include all necessary details. This will not be the final version. You can find LBBD’s screening tool for EIAs here: [EIA Screening Tool May 2019 Update.docx (sharepoint.com)](https://lbbd.sharepoint.com/:w:/r/sites/IntTp/Strategy-Portal/_layouts/15/Doc.aspx?sourcedoc=%7B6023134A-5CBF-4CA9-B390-43045EF54737%7D&file=EIA%20Screening%20Tool%20May%202019%20Update.docx&action=default&mobileredirect=true&DefaultItemOpen=1&web=1) |
| 1. **Circulate the draft to stakeholders and collect feedback**   Circulating and collecting feedback from stakeholders to ensure the policy/procedure is correct and is in line with good practice standards. This can be done via meetings and/or email, depending on the topic. |
| 1. **Consider if the policy/procedure will need a legal review**   If yes, send the draft to the legal team to review and feedback. If no, skip to the next step. |
| 1. **Create the final draft of the policy/procedure**   Embed all the feedback from stakeholders and ensure all necessary changes are made. |
| 1. **Get the policy/procedure approved**   To get the policy/procedure signed off, it will need to go through the correct governance process as stated below:   1. Shared at OMT (Operational Management Team) and with other relevant Heads of Service 2. Signed off by the Adults Improvement Board 3. Decide if this should be shared with or signed off by the Cabinet Member for Health and Social Care Integration (Cllr Worby) at a portfolio meeting 4. Decide if this should be signed off by Executive Group 5. Decide if it is classified as a ‘key decision’. If yes, it needs to be submitted for Cabinet approval |
| 1. **Roll out and communicate the policy/procedure into practice**   Upload the approved policy/procedure to TRI-X.  Cascade the newly approved policy/procedure by asking Team and/or Service Managers to discuss this with staff in team meetings and service meetings and via the ASC newsletter. |
| 1. **Maintenance and review**   Create a review schedule to allow for maintenance (recommended every 12-18 months). This is to ensure the policy/procedure is kept up to date for staff members to inform consistent practice. |

**Policy and Procedure Development Process (Flowchart)**

1. **Check the current policies and procedures on the TRI.X system**

Before you begin to write a new policy/procedure, check on the TRI.X system to see if there is already existing information on the topic. If yes, review and update what is already on there. If no, carry on to the next step.

1. **Joint Agreement for the development of a new policy/procedure**

All of the stakeholders to discuss the need for the policy/procedure and how the organisation will benefit from having it.

**3. Appoint an author**

Stakeholders to decide who the policy/procedure author will be, depending on experience and demand.

**4. Carry out co-production workshops/focus groups together with staff members and residents**

The author is responsible for co-producing the policy/procedure together with other colleagues and residents. This can be done through workshops or focus groups.

**5. Create a draft of the policy/procedure and consider if it needs an EIA**

This is the first draft of the policy/procedure that should include all necessary details. This will not be the final version. You can find LBBD’s screening tool for EIAs here: [EIA Screening Tool May 2019 Update.docx (sharepoint.com)](https://lbbd.sharepoint.com/:w:/r/sites/IntTp/Strategy-Portal/_layouts/15/Doc.aspx?sourcedoc=%7B6023134A-5CBF-4CA9-B390-43045EF54737%7D&file=EIA%20Screening%20Tool%20May%202019%20Update.docx&action=default&mobileredirect=true&DefaultItemOpen=1&web=1)

**6. Circulate the draft to stakeholders and collect feedback**

Circulating and collecting feedback from stakeholders to ensure the policy/procedure is correct and is in line with good practice standards. This can be done via meetings and/or email, depending on the topic.

**7. Consider if the policy/procedure will need a legal review**

If yes, send the draft to the legal team to review and feedback. If no, skip this step.

**8. Create the final draft of the policy/procedure**

Embed all the feedback from stakeholders and ensure all necessary changes are made.

**9. Get the policy/procedure approved**

To get the policy/procedure signed off, it will need to go through the correct governance process as stated below:

1. Shared at OMT (Operational Management Team) and with other relevant Heads of Service
2. Signed off by the Adults Improvement Board
3. Decide if this should be shared with or signed off by the Cabinet Member for Health and Social Care Integration (Cllr Worby) at a portfolio meeting
4. Decide if this should be signed off by Executive Group
5. Decide if it is classified as a ‘key decision’. If yes, it needs to be submitted for Cabinet approval

If the answer is YES, it needs to be signed off, follow these steps…

If the answer is NO, it does not need to be signed off, follow these steps…

1. Get sign off from Councillor Worby at a portfolio meeting
2. Get sign off from executive group
3. If it is a ‘key decision’, submit for cabinet approval

Once it has been signed off by the above, go on to step 10.

**10. Roll out and communicate the policy/procedure into practice**

Upload the approved policy/procedure to Tri-X.

Cascade the newly approved policy/procedure by asking Team and/or Service Managers to discuss this with staff in team meetings and service meetings and via the ASC newsletter.

**11. Maintenance and Review**

Create a review schedule to allow for maintenance (recommended every 12-18 months). This is to ensure the policy/procedure is kept up to date for staff members to inform consistent practice.