

POLICIES AND PROCEDURE MANUAL

Chapter:	Governance: General Management		
Title:	Policy and Procedure Development & Approval		
Policy: <input checked="" type="checkbox"/> Procedure: <input type="checkbox"/> Version: 1.0 Page: 1 of 3	Review Cycle: Annually Author: Chief Executive Officer	Adopted Date: 07.01.2014 Review Date: 05.08.2018 Revision Eff. Date:	Related Policies: Board Governance

DO NOT WRITE IN SHADED AREA ABOVE

Purpose

Mid-State Health Network (MSHN) develops and maintains policies and procedures to support achievement of the organization's Mission, Vision and Values; to meet the changing needs of MSHN; to achieve compliance with applicable laws, rules, and funding requirements and; to assure responsiveness to customer/stakeholder needs.

Policies that require approval are those that, if not followed, represent a risk to MSHN. The Board has authorized the Chief Executive Officer (CEO) to recommend policies necessary to carry out the Mission of the organization and to accomplish the objectives established by the Board. Policies require Board approval and shall be reviewed annually. Policy shall be easy to understand, communicated broadly, and enforceable.

Procedures are established by MSHN staff/designees to assure effective and efficient implementation of Board approved policies and business practices. Procedures may be developed in consultation with Community Mental Health Service Programs (CMHSP) Participants as necessary.

Policy

The CEO shall manage the annual review of policy/procedure and shall provide for maintenance of an electronic policy/procedure manual. The policy/procedure approval process shall be a collaborative effort inclusive of CMHSP Participants as appropriate. Policy review shall be led by a designated author with review and input being facilitated through appropriate councils/committees. Compliance and/or legal review shall be conducted as necessary.

Policies shall be developed, maintained, organized and approved in a consistent, easily accessible format.

Policy Header:

- MSHN Approved Logo
- Policy Chapter
- Policy Title
- Policy/Procedure
- Version
- Page
- Review Cycle
- Author
- Date Adopted
- Review Date
- Revision Effective Date
- Related Policies

Policy Body:

- Purpose: The rationale for the policy
- Policy/Procedure: The governing principle and/or senior leadership expectations, plan or understanding that guides the action. It states what we do, but not how.
- Definitions: Explanation of key terms/phrases not obvious or otherwise self-explanatory.
- Other related materials: Other source documents that provide context of support the need for the policy.
- Reference(s)/Legal Authority: Provide a summary of related laws, regulations, and other institutional policies.

Footer:

Each policy shall reflect the following footer. The 'Change Log' provides a history of the policy/procedure, including evidence or regular review and rationale for related changes.

Change Log:

Date of Change	Description of Change	Responsible Party

Formatting:

- Times New Roman, 11 pt. font; bold for headings
- One inch margins on all sides
- Paragraphs are left justified (i.e. left aligned with a ragged right edge)
- Single spacing for paragraphs
- Use position titles (e.g., Chief Executive Officer/CEO) rather than names
- Acronyms should be used only after the full compound terms have been written out
- Policies submitted for approval of revisions shall be submitted in Microsoft Word, 'Track Changes' format

Policy Approval: Policies shall be established/reviewed by the responsible MSHN employee; reviewed by designated councils/committees in the MSHN organizational structure (as appropriate); and vetted by the Board's Policy Committee. Policies are not effective until formal Board action has occurred. After approval and posting to the official website, MSHN policies are in effect unless a specific date on which they become effective is noted.

Procedures: MSHN personnel shall maintain operating procedures for all important organizational processes. Procedures shall be reviewed annually and approved by CEO or designee. Procedures shall be accessible and shall be communicated to involved personnel and MSHN's provider network as part of the regular professional development/training and contract management practices. Any changes in procedures shall be consistent with and supportive of associated MSHN policy.

Applies to:

- ☒ All Mid-State Health Network Staff
☐ Selected MSHN Staff, as follows:
☒ MSHN's Affiliates: ☐ Policy Only ☒ Policy and Procedure
☒ Other: Sub-contract Providers

Definitions:

MSHN CEO: Mid-State Health Network Chief Executive Officer

CMHSP: Community Mental Health Service Programs Participants

Other Related Materials

Board By-Laws

References/Legal Authority

N/A

Change Log:

Date of Change	Description of Change	Responsible Party
04.09.2014	New Policy	Chief Executive Officer
05.2016	Annual Review	Chief Executive Officer
01.2017	Annual Review	Chief Executive Officer
03.2018	Annual Review	Deputy Director