

Problem Statement

Without a clear understanding of accountability at all levels, and an ever-changing organizational structure, how can Nova Scotia Health ensure policy making is purposeful, helping our teams to do the right things for the right reasons?

Answer:

Clarifying accountability is key to enabling Nova Scotia Health to create, implement, comply with, and evaluate policy direction. Having clarity lessens operational confusion and burden on the front line. It enables us to focus energy and resources wisely.

In 2022, the Policy Office met with 80% of program leaders and asked: what do you believe is the scope of your authority? What do you believe you are accountable for? The answers informed the updated delegation of Policy Signing Authority

Realms of Leadership Accountability

Sponsor

- Greenlights **Development**
- Accountable for development & revision within Scope
- May be accountable for **Evaluation**

Approval Authority

- Overall accountability for compliance, outcomes and direction
- Exec level for New/Major revision

Operations Leadership

- Accountable for **Compliance** in area
- May be accountable for **Implementation**

Determining Sponsorship

- Consider: What is the applicability of the document
 - Org wide or crosses multiple programs
 - Program specific
 - Site Specific
- Do I have operational/strategic accountability for the problem the policy/procedure is meant to address?

General Principles

- Responsibility for approval can be delegated. Accountability for the approval cannot.
- Sponsors should not provide final approval for new policy/procedures (or major revisions).
- Any approver can bring a policy to the next level of leadership for approval if they feel the situation warrants.
- Any Policy document can be co-sponsored; however, the greater the scope the applicability of the policy, the higher level of sponsorship.
- If more than two areas could reasonably co-sponsor a policy, sponsorship moves UP to the Executive Level
- Any policy that flows from a standard (including ROPs) should be overseen by the network/department who owns that standard. If the scope of the standard is so broad to make accountability unclear, this should be clarified and responsibility delegated by Executive.
- No approver should sponsor or approve policy governing direction where they do not have operational authority.
 - Example: VP Finance does not have authority to approve Medication Policy.
- Board specific policy is approved by the Board of Directors.

This document supersedes: NOVA SCOTIA HEALTH AUTHORITY (NSHA) - BOARD RESOLUTION APPROVAL – Policy Determination (Development and Approval) Delegation April 1, 2015.

Legend:

S: Sponsor (OWNER). Authority to authorize creation of document. Authority to approve Minor revisions/standard review with no changes. Accountability for development, maintenance of policy.

A - Approval. Authority to Approve New/Major Revisions. Overall accountability for compliance, outcomes.

I - Informed. Role must be Informed of Policy development.

* : indicates "as appropriate", depending on the subject matter of the policy.

Document Type	Explanation	Board of Directors	ELT	Vice President*	HAMAC	Clinical Operations Committee	Drugs & Therapeutics Committee	Senior Directors, Clinical Networks	Senior Directors or Provincial Directors/Departments*	Zone Executive Directors	Service Operational Councils	Zone Program Director	Site Leadership	Health Service Managers	Examples/Notes
Corporate Policy	Organization wide non-clinical matters Formerly referred to as "administrative policy"	A*	A*	S*	A/I*				S*	I					Travel Recruitment & Selection
Clinical Administrative Policy	Organization wide issues related to safe practice, or where the focus is 'administrative' in nature. Excludes direction on specific clinical interventions.			A*	A*	A*	E*	S*	S*	I	S*				Overcapacity Client ID Note: D&T Endorses Med Management Policy
Care Directive	Authorizing Mechanism enabling a HCP to perform a specific intervention without an order.				A*	A		I/S*	S*	I	S*				HAMAC approval ONLY when AP is solely a physician.
Delegated Medical Function	Authorizing Mechanism enabling a HCP to perform a specific intervention <i>outside</i> their scope of practice.				A			I	S*	I	S*				Note: This document type is under review.
Clinical Intervention Guide	Umbrella documents to direct HCPs to perform a specific intervention for a patient. Not operational in nature.			A*				I	A*	I	S*	S*			Intra-aortic Balloon Pump
PROCEDURES															
Corporate Procedure & Process	<i>organization wide</i> non-clinical matters		I	A					S	I					Quality Review
Clinical Administrative Procedures	Organization wide focus on safe practice, or where the focus is 'administrative' in nature.							A*	A*	I					Live Organ Donor Expense Reimbursement
Program-specific procedure	Clinical or corporate. does NOT apply across programs/departments.								A*	I	A*	S			Finance - Bad Debt Access to Surgical Suites - Periop
Clinical Procedures	Step by Step direction to perform a clinical task. Not location specific							A*	A*	I	S*	S*			
Site/Zone Specific Procedure	Step by Step direction to perform a task dependent on local operational factors							I	A*	A*		A*	S*	S*	Code Blue - EKM NEWS2 - DGH Zone ED approves Zone specific docs