

1. Introduction and Who Guideline applies to

- 1.1 This guideline is to be used to guide the development, consultation and approval of Category 'C' documents within the Clinical Support and Imaging (CSI) Clinical Management Group (CMG) and applies to all staff involved in this process.
- 1.2 This guideline should be read in conjunction with the Policy for Developing and Approving Clinical and Non-Clinical Policies and Other Guidance Documents (Policy for Policies) (Trust Reference B16/2004) available in the Policy and Guideline Library (PAGL) on INsite
- 1.3 Category C policy and guidance documents (P&Gs) are those that are to be used entirely within one CMG or one Corporate Directorate but which do not require explicit Trust Board approval.
- 1.4 All CSI CMG Category 'C' P&Gs will be approved by the Clinical Support & Imaging Quality & Safety Committee (CSI Q&S)
- 1.5 Within the CMG a Category C Policy Group has established to review all Category C P&Gs prior to submission to the CSI Q&S for approval. The Terms of Reference for this group are detailed in Appendix 1

2. Guideline Standards and Procedures

Refer to Appendix 2 for the overall process

2.1 Developing a new Category C P&Gs

- a) The need for a new P&Gs may be identified through Service or CMG Governance or Quality & Safety groups (and may be in response to audit, clinical incident, patient feedback, national guidance, etc)
- b) The group/service that identifies the need for the P&G will decide upon the appropriate author, usually the 'local' expert, for the subject
- c) It may be appropriate to enlist others as authors in order to benefit from their specific knowledge and expertise.
- d) All CSI CMG Category C P&Gs must be formatted using the UHL templates attached as appendices to the Policy for Policies.
- e) The author will take overall responsibility for the development, consultation, submission for approval and dissemination of the P&Gs and agree on a timescale.
- f) The author will circulate the document to all appropriate staff for consultation and will be responsible for reviewing comments made and agreeing on any amendments or alterations required.
- g) The author can submit the draft P&G to the CSI Category C Policy Group at any stage during the development process for advice and/or support
- h) The final draft of the P&Gs submitted for approval must be accompanied by the Proformas for submission to Approval Body (Appendix 4 of the Policy for Policies)

2.2 Approval

- a) The final draft P&Gs, and accompanying proformas should be submitted to the CSI Category C Policy Group for review and initial approval.
- b) If initially approved by the CSI Category C Policy Group, the Head of Nursing will submit the final P&Gs to the CSI Q&S for final approval. It must be clear in the minutes of this

meeting whether the document has been approved, approved subject to amendments or not approved, requiring further work.

- c) If extraordinary approval is required (e.g. urgent approval) the Clinical Director and Head of Nursing has the capacity to approve any Category 'C' documents
- d) The CSI Q&S Chair will inform the CSI CMG Board of the approval prior to submission to the Policy & Guideline Committee (PGC)
- e) Following approval, the P&Gs, along with evidence of approval, must be sent to the Trust Administration Office for allocation of a Trust reference number, notification to the Policy and Guideline Committee (PGC) and recorded on the Trust P&G register.
- f) Following receipt of a Trust reference number, the P&Gs must be sent to the Policy and Guidelines Library (PAGL) Team along with evidence of approval. They will ensure that the document is uploaded into PAGL and that any previous version is archived.

2.3 Dissemination and Implementation

- a) Once the document has been uploaded into the PAGL the author must ensure dissemination of the P&Gs to all relevant staff

2.4 Review

- a) The first review of a new P&Gs should be within 18 months of the date of first approval. Subsequent reviews should be no later than three years after the previous approval date.
- b) The Head of Nursing, (via the CSI Administration Team) will maintain a database of CSI Category C and Category B P&Gs, including author, approval date and review date
- c) Additionally, any Category 'C' document can be recalled by the author or CMG if there is need for the document to be reviewed because of a change in practice.

2.5 Review of existing P&Gs

- a) All P&Gs must be reviewed within the agreed timescales
- b) Once reviewed, the approval and dissemination process for existing P&Gs is the same as that for new documents starting with section 2.1 e) above.
- c) If, following review a P&Gs is no longer required the author should inform the PGC. The P&G will then be taken off the PAGL.
- d) The PAGL Team will inform the author of the need to review a P&G, giving six months notice, and also inform the Head of Nursing.

2.6 Category B P&Gs

- a) Category B P&Gs are those that are to be used by staff outside one CMG or one Corporate Directorate are approved by the PGC
- b) The CSI Category C Policy Group will support the development/review of Category B policies and guidelines before submission to the Policy and Guideline Committee.
- c) The details of all CSI Category B P&Gs are maintained on the CSI P&G database

3. Education and Training

None

4. Monitoring Compliance

What will be measured to monitor compliance	How will compliance be monitored	Monitoring Lead	Frequency	Reporting arrangements
All CSI Category C P&Gs will be developed in accordance with this procedure	CSI P&Gs Database	Head of Nursing via CSI Category C Policy Group	Quarterly	Report to CSI Q&S
All CSI Category C P&Gs will be reviewed within the agreed timescales	CSI P&Gs Database	Head of Nursing via CSI Category C Policy Group	Quarterly	Report to CSI Q&S
% of P&Gs passed their review date	Clinical Effectiveness Project Support Officer	Head of Nursing via CSI Category C Policy Group	Monthly	Report to PRM

5. Supporting References

UHL Policy for Developing and Approving Clinical and Non-Clinical Policies and Other Guidance Documents (Policy for Policies) (Trust Reference B16/2004)

6. Key Words

Category C documents, Policies, Procedures, Guidelines

CONTACT AND REVIEW DETAILS	
Guideline Lead (Name and Title) Linda Martin, AHP Education & Practice Development Practitioner	Executive Lead Lisa Lane, CSI CMG Head of Nursing
Details of Changes made during review: <ul style="list-style-type: none"> In new Trust format Procedure revised to reflect revised Policy for Developing and Approving Clinical and Non-Clinical Policies and Other Guidance Documents (Policy for Policies) (Trust Reference B16/2004). 2020 Review <ul style="list-style-type: none"> Change in title for PAGGS team Amended flow chart Appendix 2 2023 Review <ul style="list-style-type: none"> Removal of reference to CEPSCO in section 2.2 f 	

- Membership: CSI CMG Head of Nursing (Chair)
AHP Education & Practice Development Practitioner
Head of Service or delegated representative from:
- Breast Imaging
 - Dietetics
 - Medical Physics
 - Pathology
 - Pharmacy
 - Radiography
 - Speech & Language Therapy
 - Therapies (Occupational Therapy and Physiotherapy)
 - Other services as required
- Purpose :
- To ensure the process for developing and approving Category C Policies and Guidelines is followed
 - To review the development process of documents to ensure they have been considered by all appropriate groups/bodies
 - To ensure the training implications and dissemination methods have been fully considered, and make recommendations where required
 - To initially approve Category C policies and guidelines and forward the documents to the Quality & Safety Committee for final approval
 - To ensure approved documents are sent to the Trust Administration Office, along with evidence of approval, for the allocation of a Trust reference number and notification to the UHL Policy and Guideline Committee
 - To ensure that documents are uploaded onto the Policy & Guideline Library once a Trust reference number has been allocated, via Clinical Effectiveness Project Support Officer
 - To support the development/review of Category B policies and guidelines before submission to the Policy and Guideline Committee
 - To ensure all documents are reviewed by the agreed review date
 - To act as a resource in the development/review of Category C documents
 - To ensure a register is maintained of all Category C Policies and Guidelines within the CMG
- Quorum : Chair plus 3 members
- Meetings : The group will meet monthly
- Minutes and Reporting : Meetings will be documented to include attendance, apologies, actions and progress
A register of attendance will be maintained
Quarterly reports will be made to the CSI CMG Quality & Safety Committee
- Sub-Committees: N/A
- Review : The role and remit of the group will be reviewed in line with this procedural document

PROCEDURE FOR REVIEWING AND APPROVING CATEGORY C POLICIES & GUIDELINES – APPENDIX 2

