

Policy: Policy on Policies	Effective Date: 6/19/20
Policy Number: 100 Version: 1	Replaces: New
Authorized by: Graduate Medical Education Committee	Page 1 of 3
IR: I.B.1.b).(1)	CPR:

PURPOSE

This policy addresses the process for developing, issuing, and maintaining all policies governing the sponsoring institution.

SCOPE

1. Department of Medical Education
2. Baptist Health Medical Center - North Little Rock
3. Baptist Health Medical Center - Little Rock
4. Baptist Health Medical Center - Conway

POLICY

1. Policy Format
 - a. A standard policy format ensures clarity and consistency. Although not all policies will contain all of the format elements, policies will be written and maintained following the format described and as seen in this policy:
 - i. Header information: (mandatory element)
 - (1) Policy name
 - (2) Policy number and Version
 - (3) Authorizing Body
 - (4) Effective Date
 - (5) Replacement of policy
 - (6) Pages
 - (7) Mapping to the Institutional Requirements (IR) and Common Program Requirements (CPR)
 - ii. Purpose: (mandatory element) Reason for the policy or policy’s existence.
 - iii. Scope: (mandatory element) Identification of parties governed by the policy.
 - iv. Policy: (mandatory element) Description of the actual policy including: duties assigned to responsible parties and other parties as necessary; other information specific to a particular policy subject as needed; and a description of the compliance review process and specific authority to impose penalties or other actions when noncompliance occurs, if applicable.
 - v. Definitions: (optional element) Meaning and interpretation of terms used in the policy.
 - vi. Related Policies: (optional element) List of other policies that relate and can provide better comprehension of this policy; other regulatory agencies

- vii. Revision Date(s): (mandatory element) Latest revision (if there are updates) or review (if there are no updates) date, if applicable.
- viii. Attachment(s): (optional element) Any additional information that supports the policy or can provide better comprehension; forms
- b. Policies will be typed using Times New Roman font and size 12.
- c. Text will be listed using the following multilevel list:
 1. Sample
 - a. Sample
 - i. Sample
 - (1) Sample
 - (a) Sample
- 2. Policy Development
 - a. When the need for a new policy arises, a Policy Initiator will be identified to develop a policy draft. The Policy Initiator can be anyone involved in the GME process.
 - b. The Policy Initiator will review the draft policy with various stakeholders regarding the policy's likely impact on those key stakeholders.
 - c. The Policy Initiator will submit the policy proposal to the Policy Owner for review.
 - d. After review and input, the Policy Owner will determine if the policy is formally approved. The Policy Owner will be the position responsible for managing the policy.
- 3. Policy Revision
 - a. When the need for a revision of a policy arises, a person suggesting the revision or designee will become the Policy Initiator to develop a policy draft.
 - b. The Policy Initiator will review the draft policy with various stakeholders regarding the policy's likely impact on those key stakeholders.
 - c. The Policy Initiator will submit the policy proposal to the Policy Owner for review.
 - d. After review and input, the Policy Owner will determine if the policy is formally approved. The Policy Owner will be the position responsible for managing the policy.
- 4. Policy Review
 - a. Policies will be reviewed annually by the Policy Owner for changes in process or in regulations.
 - b. If no changes are needed, the policy will be updated with a new reviewed date.
 - c. If changes are needed, follow the policy revision section of this policy.
- 5. Policy Versions
 - a. When a policy is created, it will be assigned a policy number by the Policy Owner and will become version 1 of the policy.

- b. After any revision of the policy, the version number will need to be increased so that versions, and therefore revisions, can be traced. Grammatical corrections do not need revisions.
 - c. The Policy Owner, or designee, will update the “policy tracker” spreadsheet accordingly for new, updated, and reviewed policies.
6. Institutional Policies
- a. The Policy Owner will be the Graduate Medical Education Committee who must review and approve all Institutional policies.
 - b. Should there be any conflict between Baptist Health policies and the Institutional policies, the Institutional specific policies should be followed by the programs.
7. Program Specific Policies
- a. Each Program Director will be the Policy Owner for the program specific policies for the program.
 - b. Program specific policies cannot be less restrictive than Institutional policies.
 - c. Should there be any conflict between program specific policies and the Institutional policies, the Institutional specific policies should be followed by the programs.
8. The following are a list of common abbreviations that may be used throughout the policies.
- a. ACGME- Accreditation Council for Graduate Medical Education
 - b. DIO- Designated Institutional Official
 - c. GME- Graduate Medical Education
 - d. GMEC- Graduate Medical Education Committee
 - e. PC- Program Coordinator also known as Program Manager
 - f. PM- Program Manager also known as Program Coordinator
 - g. PD- Program Director
 - h. PGY- Post Graduate Year

DEFINITIONS

- 1. Policy Initiator- a person suggesting the revision of a policy who will develop a revised policy draft.
- 2. Policy Owner- the person responsible for the approval and maintenance of policies.
- 3. Effective Date- the date the policy goes into effect. This may or may not be the day the policy was approved by the Policy Owner.

RELATED POLICIES

Created 06/17/20

Reviewed 04/2021

Revised