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**POLICY**: It is the policy of the Division of MHDS to ensure that all Division policies

are relevant, effective, and current.

**PURPOSE**: To establish a system for the development, review, approval and

communication of Division policies.

SCOPE: Division wide

**REFERENCE**: NRS 233B.050(1)(d)

PROCEDURES:

#### I. Development of new policies:

A. A new policy request can be initiated by a Division agency, or by the Division Central

Office. To avoid duplication of efforts, notify the Division policy coordinator of the intention to develop the policy, and the proposed title or subject of the policy. The Division policy coordinator will notify the Division Director of Program Planning of the proposed policy.

The Division policy coordinator will provide the initiating agency with:

- 1. Electronic copies of the format to be used (Attachment A);
- 2. Policy Review Form (Attachment B); and
- 3. Considerations for Policy Development and Review (Attachment C).
- B. Development of the content of the policy will be enhanced by an inclusive process that provides an opportunity for review and comment from the range of staff within the agencies that are effected by the policy.
- C. The draft of the policy is submitted to the Division policy coordinator for further review, approval, and distribution process.
  - The document is to be marked "DRAFT," provided electronically in the specified format (Attachment A.) through email; policy originator's contact information is to be included. Do not include any dates at the conclusion of the policy; the appropriate date(s) will be added by the Division policy coordinator.
  - The Division policy coordinator will assign a policy number and submit the policy by email to all Division Agency Directors and any designated agency policy contacts for their opportunity for review and comment.
  - 3. The agencies' revision comments for the new policy must be received by the Division policy coordinator a minimum of 28 working days prior to the next scheduled Commission meeting in order to be considered for a review at that meeting.

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- 4. The Division policy coordinator will provide the final draft of the policy to the Division of MHDS Administrator for review and approval.
- 5. Upon approval by the Administrator, the policy coordinator will send the policy to the official review process by the Commission on Mental Health and Developmental Services (Commission), as outlined on section 3.c on next page).
- D. Upon approval by the Commission, the Division policy coordinator will follow the Division procedure for processing policies to completion, including ensuring that the policy is in the appropriate format, adding the approval date, and facilitating placement of the policy on the Division web site.
  - 1. To ensure communication about the new policy, the Division Director of Program Planning, or designee, will present the policy at the Division Leadership Meeting.
  - 2. The new policy will also be communicated through email to Division agency directors and their policy contacts, and to Division Central Office staff.
- E. The policy identification convention is described below.
  - 1. Policies are divided into seven (7) categories, including one for policies that apply only to Developmental Services.
    - a.) Consumer Rights and Responsibilities (CRR)
    - b.) Services and Programs (SP)
    - c.) Information Management, Records, and Technology (IMRT)
    - d.) Human Resources (HR)
    - e.) Administrative (A)
    - f.) Fiscal (F)
    - g.) Developmental Services (DS)
  - 2. The policies will be identified with the letter or letters of the appropriate category, a number to indicate the topic, and a number following a period to indicate the specific policy; the title of the policy will follow. Example: This policy, A -1.1 Policy Development and Review Process is labeled: Administrative (A), the topic (1) is policies, and after the period is the number (1) of the specific policy, which is

followed by the title of the policy.

#### II. Review and revision of existing policies:

A. Division of MHDS policies must be reviewed no less than once every three (3) years per NRS. 233B.050 (1)(d).

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- B. Review and revision of existing policies can be initiated by a Division agency, or by the Division Central Office.
  - To avoid duplication of efforts, notify the Division policy coordinator of the intention to review or revise a policy. The Division policy coordinator will notify the Division Director of Program Planning of the intention for the policy to be reviewed and/or revised.
  - 2. Assignment of the review of an existing policy will include the following material provided by the Division policy coordinator.
    - a) The subject matter expert will receive an electronic copy of the policy the Policy Review Form (Attachment B), the format to be used (Attachment A), and the list of Considerations for Policy Development/ Review (Attachment C).
    - b) The subject matter expert will utilize the electronic copy of the policy and identify revisions through "Track Changes."
    - c) The subject matter expert is encouraged to communicate with all staff necessary to provide an opportunity for their review and comment.
    - d) The reviewed/revised policy is to be returned to the Division policy coordinator within 21 working days of receipt of the assignment.
      - 1) The policy must be marked "DRAFT" and include "Track Changes."
      - 2) The completed Policy Review Form and Considerations for Policy Development/Review are to be attached.
- C. The Division Policy coordinator will follow the procedure for processing reviewed/revised policies to completion.
  - 1. The Division policy coordinator will ensure that the policy is in the appropriate MHDS-required format.
  - A new policy identification will be assigned, if needed, to the final draft of the policy prior to submitting it to the Division Administrator for review and approval.
  - 3. Following the Administrator's approval, the policy coordinator will add the date of approval and send the policy to the official review process by the Commission based on the following categorical criterion:
    - a. New Policies All new policies will be sent to the Commission for review.
    - Existing Policies Only those policies that are determined or estimated to substantially or significantly change an MHDS Service or Program will be sent to the Commission for Review.
    - c. Deleted Policies All policies proposed for deletion will be sent to the Commission for review.

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- Upon approval by the Commission, the Division policy coordinator will add the date of approval and facilitate placement of the policy on the Division web site.
- 5. Communication about the reviewed/revised policy will be ensured.
  - a.) The Division's Director of Program Planning or designee will present the policy at the Division leadership meeting.
  - b) The reviewed/revised policy will also be communicated through e-mail to all Division agency directors, and their policy contacts, and to Division Central Office staff.

ADMINISTRATOR

#### ATTACHMENTS:

A. Policy Format

B. Policy Review Form

C. Considerations for Policy Development/Review

EFFECTIVE DATE: 11/20/06

REVIEWED / REVISED DATE: 11/13/07, 08/06/10, 9/21/12

SUPERSEDES: #4.066 Policy Development and Review Process APPROVED BY MHDS ADMINISTRATOR: 08/06/10, 9/21/12

APPROVED BY MHDS COMMISSION: 11/17/06, 09/17/10, 9/21/12

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POLICY:			ATTACHMENT A: MHDS POLICY FORMAT (Font: Microsoft Sans Serif #12)		
PURP	OSE:				
SCOF	PE:				
REFE	RENC	E:			
DEFIN	NITION	IS: (W	/hen appr	opriate)	
PROC	EDUR	RES:			
l.	xxxx	X (Bo	Bold Roman numeral headings; don't bold if not a heading)		
	A.	XXXXX	(Use le	eft alignment, which is "friendlier" and easier to read)	
	B.	2.	( XXXXX a) b) XXXXX XXXXX XXXXX	(If no b, don't use an a; just indent paragraph as shown)	
II.	XXXX	X			
	XXXX	X	(If no sec	tion B, do not use an A; just indent paragraph as shown)	
III.	XXXX	X			
IV.	XXXX	X			
				(Policies are signed, not attachments)	
				ADMINISTRATOR	
ATTA	CHME A. Tit B. Tit	:le `		parate documents for Attachments; if numerous attachments, as "Page 1 of X")	
REVIE	EWED	/ REVIS	ED DATE	ommission approval date) E: (Ensuing Commission approval dates; all remain permanently) title; if new, state here)	

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APPROVED by MHDS ADMINISTRATOR: (Most recent date)
APPROVED by MHDS COMMISSION: (Initial and following dates)

## ATTACHMENT B MHDS POLICY REVIEW FORM

☐ NEW POLICY	☐ EXISTING POLICY
POLICY #:	
POLICY TITLE:	
POLICY REVIEW EXP DATE:	ASSIGNED TO:
POLICY DEADLINE:	(must be returned within 30 days of assignment)
POLICY REVIEWED BY:	
POLICY REVISED:  POLICY RECOMMENDED FOR I POLICY CURRENT AND RELEVA	DELETION:  ANT, NO REVISION REQUIRED:
INCLUDE SUMMARY OF REVISI	ONS MADE:  OR RATIONALE FOR DELETION:
COMPLETION DATE:	
ADM REVIEW DATE :	SIGNATURE:
DATE SENT TO WEBSITE:	

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#### **ATTACHMENT C**

# CONSIDERATIONS FOR MHDS POLICY DEVELOPMENT OR REVIEW

Along with other considerations, keep the following in mind as you and other staff develop new policy or examine a policy for possible revisions:
☐ Is the policy still relevant?
☐ Is the policy still effective?
☐ Are additions to the policy necessary?
☐ Are there unnecessary points that can be deleted?
☐ Could the policy be revised to more effectively incorporate cultural competence considerations?
☐ Is "people first" language utilized? "Consumer" or "patient" are the MHDS policy terms for recipients of MHDS services.
☐ Should the policy be combined with another policy?
□ Does the policy appear to be similar to another policy?
☐ Is the policy only relevant to the Division office?