ABSTRACT

Health care management risk is rampant. An evidence-based nursing policy and procedure minimizes health care management risks, and promotes safe patient care delivery while utilizing best practice evidence (Dols et al., 2017). In addition, the nursing policy and procedure should continue to ensure relevant health care regulations, state and federal mandates, and accreditation standards are upheld (White, 2010). Health care organizations purposely create and implement nursing policy and procedures to communicate professional best practices. Sustaining comprehensive, evidence-based, up-to-date, and regulatory compliant nursing policy and procedures provides challenges and may even be under-valued by some health care organizations (Destache, 2013). Barriers such as time, financial cost, and expert or legal consultations hinder nurses’ policy and policy reviews within health care organizations.

Designated health care organizational nursing policy committees may anxiously develop new policies and procedures but engagement of administrators, managers, and staff members or policy committees are less enthusiastic to review established policy and procedures. Nurses identify inadequacies of lacking nursing policy and procedure practice changes relatively to a lack of evidence-based knowledge and evaluation (Carroll, 2013). Evidence-based literature is lacking on the review process of how to assess and critique a nursing policy and procedure on current practice (Adams & Cullen, 2011). Many health care organizations lack surveillance tracking and documentation of periodic due dates for nursing policy and procedure reviews, so consistent systematic reviews and revisions may be missed. Williams, Young, Williams, and Schindel (2011) recognize reviews of nursing policy and procedures for sustainability and insurance of anticipated clinical outcomes is necessary to develop a nursing culture of evidence-based practice. Unfortunately, literature is lacking on organizational guidelines, models, and/or policies for reviewing and critiquing nursing’s policies and procedures (Schaeffer, 2013). The development of a health care organizations’ formal training for nursing stakeholders and experts could influence a change in this nursing attitude. The creation of a nursing policy and procedure checklist of review steps provides a critique and formal evaluation method for nurses to review the nursing policy and procedure, review the current evidence and the reduction of risk.

OBJECTIVES

1. The purposes of evidence-based nursing policy and procedures are to minimize risk, promote safe patient care utilizing best practices, and align with health care regulations, and accreditation standards.
2. Appraise the barriers of sustaining comprehensive, evidence-based, up-to-date, and regulatory compliant nursing policy and procedures.
3. Justify the need for a policy and procedure review checklist to critique, and formally evaluate a nursing policy and procedure, review the current evidence, and the reduction of risk.

Research Question

For a nursing policy and procedure review, what information should be included within a policy and procedure review checklist?

Review of Literature

Policy and procedures, part of the health care organization’s culture, are living documents; products of process and progress (Destache, 2013; Schaeffer, 2013). Purposes of policy and procedures facilitate adherence and promote compliance to professional accrediting bodies such as The Joint Commission, professional organizations, national standards and guidelines, and state and national laws and statutes (Destache, 2013; Irving; White, 2010).

Evidence-based policy and procedures prevent practice variations, preserve standardization of safe and consistent care, as serve as resources for health care staff, and provide documentation (avoidance of relying on memory is critical to prevent human error) (Dols et al., 2017; Dowling et al., 2017; Irving, 2017).

Finding a balance for policy and procedure review, and a revision time-line is relevant to keep current in evidence-based health care delivery but avoid information overload, too much detail such as a “cookbook” approaches, and frequent fluctuations in revising policy and procedures overwhelm staff (Schaeffer, 2013).

Hospital staff must have ease of access to policy and procedures manuals; keep all policy and procedures available online in a central location on corporate or institutional intranets with a single sign-on feature, with administration establishing audit trails to insure staff are reading emails on policy and procedures, and completing policy and procedure training (Schaeffer, 2013).

Utilizing a template-driven approach for policy and procedures to separate policy statements from detailed procedures facilitates users navigation while promoting consistent structure (Collins & Patel, 2009).

Novice to expert nursing involvement in critiquing policy and procedures and the creation of policy making is a critical contribution nurses can make to their profession and the delivery of safe health care evidence-based practices (Turale, 2015). bedside or frontline nurses need an active role and voice in supporting nursing best practices by implementation, critiquing and creating policy and procedures; yet many organizations lack any nursing input and rely solely on medical directors, chief operating officers, and department chairs and managers to review and develop policy and procedures (Irving, 2017; Turale, 2015).

Evidence-based practices supporting policy and procedures increase nursing knowledge; regardless if change is needed or not is the most difficult aspect of the review, to insure the evidence-based practice care is aligned with evidence (Dols et al., 2017; Williams et al., 2011).

Nurses feel inadequate shaping policy and procedures relational to limited or lack of evidence-based experiences (Carroll, 2013).

Organizational support of evidence-based practice, and implementation with administrative leaders, and health care staff is necessary for sustainable practices (Dowling, 2017; Williams et al., 2011).

Formal policies and procedures are lacking within health care organizations and institutions to provide knowledge of how to develop, review, and train nursing staff to effectively work with policies and procedures (Adams & Cullen, 2011; Schaeffer, 2013).

Policy and Procedure Review Checklist

In preparation for a review, the reviewer should review similar policies and procedures, protocols or guidelines developed by other groups, institutions, and organizations. The reviewer should conduct a review of literature to appraise the current state of evidence on the appropriate topic. In addition, the reviewer consults with experts who developed the policy and procedure and utilize the policy and procedure on a routine basis. Lastly, patient and family preferences and values should be addressed within the policy and procedure where appropriate.

1. Is the name of the policy and procedure simple and recognizable?
2. Does the policy and procedure adhere to and reference appropriately any accrediting bodies, professional organizations, national standards and guidelines, and or state and national laws and statutes?
3. Documented origin date of the policy and procedure?
4. Documented revisions of the policy and procedure?
5. Documented date of all reviews? A. Review dates follow the designated policy and procedure review time?
6. Documented administrative sign-offs?
7. Who is responsible for the review of the policy and procedure? A. Are staff aware of who is responsible and who can be approached with a problem related to a policy and procedure?
8. The title of the policy and procedure has recognizable and familiar terminology to facilitate the ease of staff locating the policy and procedure?
9. Key terms defined based on evidence-based literature?
10. Purpose of the policy and procedure clearly explained?
11. Measurable objectives and expectations identified?
12. Stakeholders affected by and designated delegates for implementing the policy and procedure are identified?
13. Identification of necessary staff training to implement the policy and procedure is noted?
14. Procedural steps of the policy follow a logical process and flow for safe, and consistent evidence-based practice care? A. What evidence-based literature supports or does not support the current policy and procedure? Is the literature appropriately referenced? Up to date?
15. Are associated patient and family educational materials, impatient and outpatient, and discharge materials and links current, and based on evidence?