

# SESLHD PROCEDURE COVER SHEET



**Health**  
South Eastern Sydney  
Local Health District

<b>NAME OF DOCUMENT</b>	NSW Health – Policy Directives, Guidelines and Information Bulletins – distribution and management within SESLHD
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<b>EXECUTIVE SPONSOR or EXECUTIVE CLINICAL SPONSOR</b>	Manager Executive Services (delegated by Chief Executive)
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<b>KEY TERMS</b>	Policy allocation, policy distribution, policy directive, guideline, information bulletin
<b>SUMMARY</b>	Describes the process of managing policy directives, guidelines and information bulletins received from NSW Health. All NSW Health Policy Directives, Guidelines, Information Bulletins received by SESLHD Executive Services are catalogued in the records management system and distributed for action.

## **COMPLIANCE WITH THIS DOCUMENT IS MANDATORY**

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## NSW Health – Policy Directives, Guidelines and Information Bulletins – distribution and management within SESLHD

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### 1. POLICY STATEMENT

South Eastern Sydney Local Health District (SESLHD) shall ensure that changes to legislation, regulations, NSW Health Policy Directives, Guidelines, Information Bulletins and Procedure manuals are communicated to the relevant Director/s and Clinical Streams responsible for policy/procedure development.

NSW Health Policy documents must not be amended, added to or otherwise altered or rebadged.

### 2. BACKGROUND

SESLHD is required to have documented processes for district wide coordination and dissemination of NSW Health Policy Directives, Procedures, Guidelines and Information Bulletins.

Allocation of a NSW Health document to an Executive or Clinical Sponsor ensures a record of implementation and compliance is maintained and provides a mechanism for escalation of any compliance issues.

Dissemination of documents enables appropriate review and update of District corporate and clinical policies and/or procedures; and facility based business rules.

### 3. DEFINITIONS – NSW Health policy documents

**Policy Directive:** a policy document that must be complied with and implemented as a part of ongoing operations.

**Guideline:** a policy document that establishes best practice in relation to clinical and non-clinical activities and functions. Although compliance with Guidelines is not mandatory, the intention is that Guidelines are to be adopted across the Local Health District.

**Information Bulletin:** a policy document that contains information on new or amended requirements imposed by external sources of authority. For example, an Information Bulletin might describe changes to statutory, award or other legal provisions.

**Policy and Procedure Manual:** a policy document containing a compilation of resources and advice on a specific subject utilised where there is a significant body of information on a critical function or set of functions.

All Policy Directives, Guidelines, Information Bulletins and Policy and Procedure Manuals are published on the NSW Health website at [www.health.nsw.gov.au/policies](http://www.health.nsw.gov.au/policies).

### 4. RESPONSIBILITIES

Executive Services is responsible for dissemination of correspondence relating to NSW Health Policy Directives, Guidelines, Information Bulletins, Procedure Manuals and other documents that effect corporate and clinical services.

SESLHD is required to:

- Comply with all NSW Health **Policy Directives**.
- Adhere to NSW Health **Guidelines** as these represent best practice. Sound reasoning must exist for departing from recommended standards within a Guideline.

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- Note that important information is contained in NSW Health **Information Bulletins** which may relate to changes to statutory, award or other legal provisions, or broader Government policy directions.
- Adhere to NSW Health **Policy and Procedure Manuals** as these provide a compilation of resources and advice on a specific subject and are designed to provide practical support for NSW Health organisations in exercising their functions.
- Ensure that any local procedures or protocols that are developed are consistent with NSW Health Policy Documents. These must be clearly branded with SESLHD logo and must not be branded with the NSW Health logo.

### 4.1 Executive Services will:

- Disseminate NSW Health Policy Directives, Guidelines, Information Bulletins and Policy and Procedure Manuals to the relevant Tier 2 Director or Clinical Stream Director.
- Ensure that the Tier 2 Director or Clinical Stream Director is notified of rescission of an obsolete NSW Health policy document by way of the policy monthly report
- Maintain a record of an endorsed statement of compliance in the District Electronic Records Management System (Content Manager).
- Escalate any issues identified with compliance to the Chief Executive or relevant committee for review/recommendation/endorsement/further escalation.

### 4.2 Tier 2 Directors will:

- Disseminate information to relevant facilities, units, services and staff.
- Advise Executive Services that compliance and implementation is in place. If issues are identified an internal brief is provided to Executive Services.

### 4.3 Clinical Stream Directors:

- Disseminate information to relevant facilities, units, services and staff.
- Advise Executive Services that compliance and implementation is in place. If issues are identified an internal brief is provided to Executive Services.

## 5. PROCEDURE

### 5.1 Receipt of NSW Health Policy Directives, Guidelines and Information Bulletins

NSW Health send documents classified as Health Policy Directives, Guidelines or Information Bulletins in the following four main functional groups:

1. Corporate Administration
2. Clinical and Patient Services
3. Population Health and
4. Personnel and Workforce

NSW Health Policy Directives, Guidelines and Information Bulletins are received by Executive Services. Executive Services catalogues the document into Content Manager and reviews and allocates the document to a Tier 2 Director or Clinical Stream Director.

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### 5.2 Distribution of documents

It is the responsibility of the Action Officer (Tier 2 Director/Clinical Stream Director) who receives the Policy Directive, Information Bulletin and Guideline to:

- Ensure it is distributed to the relevant facilities, units, services and staff
- Determine if the LHD complies and has implemented the Policy Directive
- Endorse the compliance template and return to Executive Services by the due date specified
- Prepare a brief if any issues with compliance or implementation are identified
- Ensure local procedures/practices are in place to support compliance.
- Develop local documents that support, but do not repeat, content within the NSW Health document.

### 6. DOCUMENTATION

Template - Policy- [Ministry of Health Policy Compliance Form](#)

### 7. AUDIT

Executive Services is responsible for monitoring the implementation and compliance of NSW Health policy documents. Any issues with implementation or compliance will be brought to the attention of the Chief Executive/Clinical and Quality Council/Executive Council, as appropriate.

Executive Services prepares a weekly report for overdue compliance forms. An email is sent to the relevant Executive Assistant to the Tier 2/Clinical Stream Director outlining the overdue policy directive.

A monthly report listing new, reviewed or rescinded documents is prepared for the District policy group and published in the Intranet.

### 8. REFERENCES

[NSW Health Policy Directives and Other Policy Documents](#) PD2016\_049

### 9. REVISION AND APPROVAL HISTORY

Date	Revision No.	Author and Approval
December 2011	1	Former SESIAHS Policy PD 011 reviewed, updated and formatted as SESLHD procedure
April 2015	2	Reviewed by Executive Services Consultant – endorsed by Manager Executive Services
May 2020	3	Minor review – minor changes to document and updates to hyperlinks Endorsed by Executive Sponsor Processed by Executive Services prior to publishing.