



# Quick Guide for Stakeholder Review/Endorsement Provincial, Program, and Site-Specific Policies and Standards

- Consider if the feedback of an authorized individual is appropriate as opposed to that of an entire group
- ✓ Clarify what you are asking the stakeholder to do: i.e. Review or Endorse?
- ✓ Give the stakeholder clear instructions on what is being sought
- Provide the stakeholder with a deadline and note that if no response is received by the deadline, it will be deemed that adjustments to the policy document are not required

Remember:

- It is *review* or *endorsement* and <u>not</u> approval which is sought from stakeholders
- Only the Approving Authority is authorized to approve policies (with the exception of groups with specific and formal authorizations to approve policies such as the Provincial Nursing Leadership Committee; Provincial Cancer Coordination Steering Committee, etc.)
- It is the Approving Authority's role to either accept or reject the results of the stakeholder engagement

## Further Reading (available online):

Harvard School of Public Health et al. (2009) *Guidelines for Conducting Stakeholder Analysis*. Prepared by K. Schmeer for Abt Associates.

Committee on Standards for Developing Trustworthy Clinical Practice Guidelines. (2011). "Background and Key Stakeholders in Guidelines Development and Use," (p.29-52) in *Clinical Practice Guidelines We Can Trust*. R. Graham, M. Mancher, D. Wolman, S. Greenfield, & E. Steinberg (Eds.), Institute of Medicine of the National Academies.

Dafna, C., Howells, A., Chang, M., Hirji, N., & English, A. (2009). An Integrated Approach to Stakeholder Engagement. *Healthcare Quarterly* 12 (Sp), 62-70.





## STAKEHOLDER REVIEW AND ENDORSEMENT GUIDE Provincial, Program, and Site-Specific Policies and Standards

| Approved by:                                 | Date: June 01, 2015 |
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The purpose of this document is to provide guidance for policy authors planning the stakeholder review process when developing policies and standards.

**Stakeholder** – is an individual or committee usually within Health PEI having expertise in the subject matter addressed by the policy or standard, whose practice is impacted by the policy or who has a legitimate interest or concern with the policy or standard subject matter (such as an individual or group directly affected by the policy).

**Choosing a Stakeholder** – In general, it is preferred that if an individual is authorized to provide feedback equal to that of a group, that the individual be contacted. For example, a functional manager/director or committee chair, as opposed to a committee or group, could be asked to review a policy document to determine potential impacts. Before seeking stakeholders to review a policy or standard document, consider whether the feedback of an entire group is actually needed, or if simply providing the document to a manager, director, committee chair or physician who has authority will suffice.

**'Review', 'Approval', 'Endorsement'** – The terms 'review', 'approval', and 'endorsement' are important to differentiate. When a policy or standard document is provided to a stakeholder, it should be clarified if the stakeholder is being asked to *review* or *endorse* the policy or standard. <u>Stakeholders provide</u> review or endorsement and not approval.

**Approval** – Only those individuals or groups who have a specific and formal authorization, which provides the authority to approve policies, may actually *approve* a policy (for example, but not limited to, the CEO, an Executive Director, Director, CAO, the Provincial Nursing Leadership Committee, etc.). All other individuals, groups, and committees <u>review</u> or <u>endorse</u> policy documents. The Approving Authority decides which groups/individuals to seek review and or endorsement from (if necessary). The Approving Authority decides whether or not to proceed with development and approval should a policy or standard not receive endorsement or review from the stakeholder. The Approving Authority is the most responsible for the content of a policy document.







### Intervenants

**Approving Authority** – by signing a policy document, the Approving Authority is acknowledging that the document is:

✓ Up-to-date

**Stakeholders** 

- ✓ Based on best practices
- ✓ Has received the appropriate stakeholder feedback

**Endorsement** – To be asked to *endorse* a policy or standard essentially means that support and/or confirmation is being given for the policy or standard to be approved by the Approving Authority. Those who endorse a policy are responsible for the accuracy of the content; however, those who endorse <u>are not</u> responsible for such tasks as: document control, updating the policy as per the review cycle, ensuring that other stakeholders review the policy, etc. These latter tasks are the responsibility of the Approving Authority. The group or individual endorsing a document should keep a copy of the endorsed document for accountability purposes.

**Review** – To be asked to *review* a document essentially means that the stakeholder is being asked to review the document because they are experts in the content of the policy. Stakeholders providing review are **not** responsible for the final content of the policy document.

**Directing Feedback** – Stakeholders should be provided with <u>clear instructions</u> as to exactly *what* about the policy or standard document they are being asked to review. For example, for potential impacts on their area, for a specific set of procedures, for general clarity, for potential issues in implementation, for directing communications, clinical appropriateness, etc. Be as specific as possible so that the stakeholder(s) can quickly provide feedback. Issues like spelling, grammar, syntax, etc. are generally the responsibility of the policy author and not a committee. Circulating via e-mail is often sufficient.

**Ensuring Timeliness: Deadlines** - In order to ensure that policy documents are returned to the Approving Authority for signature in a timely manner, providing <u>deadlines</u> to stakeholders is encouraged. For less complex policy documents which require the review of only a few individuals, <u>2 weeks</u> is an acceptable timeframe (for more complex issues a longer timeframe may have to be negotiated).

Stakeholders should be advised when sent a policy or standard document for feedback that it is up to the stakeholder to **re-negotiate a deadline** if they are not able to return feedback in the time specified. Additionally they should be advised that if a stakeholder does not respond in the specified time frame, and has not renegotiated an extension, then it can be assumed that the **stakeholder has no issues** with the policy or standard document as written.

## **Questions?**

If you have questions about policy development, please contact the Policy Coordinator at <u>healthpeipolicy@ihis.org</u>



## **Stakeholders**



#### Intervenants



#### References

The information in this document was gleaned from a jurisdictional scan and was informed by the following sources:

Annapolis Valley Health – Document Control & Organizational Performance Office

Capital Health - OP3 Policy Office

Northern Health – Quality and Innovation Department

Royal Victoria Regional Health Centre - Policy Administration Office

**Lindquist, E. & Desveaux, J.** (2007). Policy analysis and bureaucratic capacity: context, competencies, and strategies. In L. Dobuzinskis. M. Howlett, D. Laycock (Eds.), *Policy Analysis in Canada* (pp.117-142). Toronto: University of Toronto Press.

Mintrom, Michael. (2012). Contemporary Policy Analysis. Oxford: Oxford University Press.

**Mintrom, Michael.** (2003). Interviewing informants. In *People Skills for Policy Analysts* (pp. 71-89). Washington: Georgetown University Press.