Nottinghamshire Hospice
adding life to days

STANDING OPERATING PROCEDURE

Subject	**Policy and Procedures SOP038**
Applicable to	All staff and Volunteers of Nottinghamshire Hospice
Date issued	4 October 2023
Next review date	4 October 2024
Lead responsible for Policy	Chief Executive Officer
Policy Written by	Governance Lead
Notified to	Policy Working Group 3 Oct 2023
Authorised by	Senior Leadership Team 5 Oct 2023
CQC Standard	Well-Led
Links to other Policies/Procedures	Policy Management Policy OP003
Summary	This SOP outlines how the Hospice ensures staff understand their responsibilities in relation to Policies and Procedures.
Target Audience	All staff and Volunteers

IMPORTANT NOTICE

Staff should refer to the Hospice website or Policies and Procedures folder on the 'N' drive for the most up to date Policy. If the review date of this document has expired it is still valid for 3 months. After that staff should seek advice from their clinical lead or manager.

| 1. | **Introduction**

Nottinghamshire Hospice places great importance on ensuring it keeps patients, staff and visitors safe, is compliant with regulations and the law and eliminates or mitigates risk wherever possible.

In order to do this it produces and reviews policies and procedures that ensure that staff know what the Hospice's and their responsibilities are and what should be done in particular situations. |
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| 2. | **Purpose**

This Standard Operating Procedure (SOP) outlines how the Hospice ensures staff understand their responsibilities in relation to policies and procedures. |
| 3. | **Definitions**
Policy

A policy is an internal document written for a specific audience linking to specific service aims (improving service quality, keeping patients and service users safe).

A policy is mandatory, we must do as they say and they are often linked to legislation or regulation.

Standard Operating Procedures (SOPs)

SOPs provide details of how to comply with the policy by providing step by step instructions or checklists.

They are founded on evidenced based practice/best practice

SOPs are also mandatory.

Guidance/Guidelines

A guideline is defined as a principle or criterion that guides or directs action. |

Guidance/guidelines provide general advice and support for policies. They are usually produced by national bodies expert in the specific topic.

Guidelines are voluntary/optional although, as an organisation if we have recommended they are followed, staff would need to evidence why they did not.

Clinical guidelines

Clinical Guidelines are a systematically developed method of operation to assist practitioner and patient decisions about appropriate healthcare for specific clinical situations. A clinical guideline is often informed by national guidance e.g., National Institute of Clinical Excellence (NICE) and codes of practice. The Hospice recognises and uses the nationally recognised Royal Marsden clinical guidelines.

4.	**Responsibilities** **Hospice Managers** It is the responsibility of the Senior Leadership Team and Leadership Team to ensure that policies are in place, staff are aware of these (Appendix 1) and are following the procedures outlined in the SOPs. **Staff and Volunteers** All staff and volunteers are responsible for adhering to published policies and procedures, ensuring they attend training and keep their competencies up to date. They are also required to cooperate with the development and implementation of policies as part of their normal duties and responsibilities.
5.	**Induction** At Induction HR will ensure new staff have sight of this SOP and understand the importance of Policies and SOPs. They will discuss the initial access to policies via the Blue Stream Academy on-line training programme and the Hospice website.

		Line managers will ensure that new starters complete their initial training and have sight of essential policies related to their work area within their probationary period or agreed timescales.
6.	**Training**	Training via Blue Stream Academy will record if a staff member has indicated that they have read the policy linked to the relevant training module.
7.	**New and Reviewed Policies**	New policies/SOPs and reviewed policies/SOPs will be sent out to all staff or specific staff groups by email as appropriate. It is the staff member's responsibility to ensure that they read these. Line Managers should have policies and SOPs as a regular agenda item on Team and Mandatory meeting agendas to prompt staff. After reading a new policy / SOP, if a staff member is in any doubt as to whether or not they have understood it, they must discuss this in the first instance with their line manager to seek clarity of understanding.
8.	**Sickness Absence**	If a staff member has had a prolonged period of absence their manager should check which policies/SOPs have been updated in that period (they can check with the Governance Lead if they have not kept a record).

Policy and Standard Operating Procedure (SOP) Notification Process

Staff are informed at Induction about the importance of Policies and Standard Operating Procedures (SOPs)

Staff complete Blue Stream Academy on-line training and read the Policies related to the training modules

New and Reviewed Policies are flagged up via email to all staff (if appropriate to them)

If after reading the Policy/SOP the staff member does not understand it, they should talk to their line manager to seek clarity

Policies and SOPs are a standard agenda item on Team and Mandatory Meetings

Managers remind staff of their individual responsibilities to keep up to date with workplace Policies and SOPs