**HSE National Template for Developing HSE National Policies, Procedures, Protocols, Guidelines (PPPGs) and HSE National Clinical Guidelines**

Revision 3 (Template last updated by HSE National Central Repository Team on 23/04/2024)

**This guidance page should be deleted from your final document.**

**Who must use this template?** This Template for all HSE National Policies, Procedures, Protocols, Guidelines (PPPGs) and HSE National Clinical Guidelines.

**Access:** The National Template should always be accessed from the [HSE National Central Repository](https://www2.healthservice.hse.ie/organisation/national-pppgs/?page=1#listingcontent) to ensure you are using the current version.

**Consistency in naming of document types:** The defined ‘document type’ in the title, such as a policy or a guideline, must be referred to consistently as that ‘document type’ throughout.

**Style guide**

It is important that the document is accessible to users in terms of layout and language.

* Additional approved logos can be inserted on front cover in line with the established governance of the document. Refer to HSE Visual Identify Guidelines [here](https://www.hse.ie/eng/about/who/communications/branding/visual-identity-checklist.pdf).
* The Template is formatted as follows and should not be amended.

Font is set at **Arial,** Font size is set at **12**. Line spacing is set at **1.15**

* Section Headings1 **14 Bold,** Headings2 and Headings3 are type size 12
* Align the text throughout the document to the **left**
* Section Headings are pre-set in **bold sentence case** for an automatic table of contents. **Add any additional headings as required and number each.**
* Double click on header: Insert the document title, version number, effective from date, next review due date.
* Prompt text in **[brackets]** should be deleted as you develop the document.
* Abbreviations and acronyms should be kept to a minimum and if used should be referenced with any definitions in your glossary of terms.
* Minimise use of Latin terms (e.g./i.e./etc.) and try using “for example”, “such as” or “like”.
* Be consistent in terms used, including ambiguous terms such as ‘resource’, don’t assume the reader is familiar with local jargon.
* Due regard should be given to the Official Languages Act and National Adult Literacy Agency (NALA) guidelines for the benefit of all readers.
* **Update the table of contents when the document is completed.**

**Completing the publication information section (examples on page 3)**

These details are required for the content management system on the HSE National Central Repository and are published with the document. All fields of information must be completed.

**Title:** This will appear at the top of the page and will be the title on Google or internal search results.

Ideal is 65 characters, so published title on the Repository may be shortened to aid reading on mobile devices.

**Topic:** Add one topic tag only.

**National Group:** This is the name of the group that developed the document.

**Short summary:** Ideal is 160 characters. This should very briefly summarise the document, building on the words included in your title. This summary will also be visible as the description on Google or internal search results and on pages where the publication may be listed.

**Description:** Max 500 characters. This can be longer than the short summary but should still be short. Focus on the key points you want someone to know about your document.

|  |
| --- |
| National Policy [ ]  National Procedure [ ]  National Protocol [ ]  National Guideline [ ]  National Clinical Guideline [ ] **Insert Title Here** Start title with… HSE National Policy/Procedure/Protocol/Guideline or Clinical Guideline (whichever is applicable) for XXX(remove these prompts in blue when you enter title at Insert Title here) |
| **DOCUMENT GOVERNANCE [[1]](#footnote-1)** |
| **Document Owner (post holder title):** |  |
| **Document Owner name:** |  |
| **Document Owner email contact:** *(Generic email addresses only for the Repository)* |  |
| **Document Commissioner(s): (Name and post holder title):** |  |
| **Document Approver(s): (Name and post holder title):** |  |
| **Lead responsibility for national implementation:** |  |
| **Lead responsibility for national monitoring and audit:** |  |
| **Development Group Name:** |  |
| **Development Group Chairperson:** |  |
| *Additional headings can be inserted as required*  |
| **DOCUMENT MANAGEMENT [[2]](#footnote-2)** |
| **Date effective from:**  | Click or tap to enter a date. |
| **Date set for next review:** | Click or tap to enter a date. |
| **Your Reference No:** *(if applicable)* | Click or tap here to enter text. |
| **Current version no:**  | Click or tap here to enter text. | **Archived version no:**  | Click or tap here to enter text. |
| Note: Original document is Version 0. First revision is Version 1. Second revision is Version 2, and so on. |
| Note: HSE National 3PGs should be formally reviewed every 3 years, unless new legislative/regulatory or emerging issues/research/technology/audit etc. dictates sooner.  |

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| --- |
| **VERSION CONTROL UPDATE** [[3]](#footnote-3) |
| **Version No.**(most recent version first) | **Date reviewed**(most recent date first) | **Comments**(1 sentence max, if required) |
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| **Document management notes:***[For example: If title of the HSE national document has been changed since the last version]*  |

|  |
| --- |
| **PUBLICATION INFORMATION [[4]](#footnote-4)**  |
| **Topic:**  |
| Example: Lone Working |
| **National Group:**   |
| Example: National Health & Safety Function (policy team) |
| **Short summary:**  |
| Example: It is the policy of the HSE to ensure the safety of lone workers by minimising the related risk and putting in place appropriate measures to improve their safety. |
| **Description:**  |
| Example: The purpose of this policy is to raise awareness of the risks presented by lone working to managers and employees. To provide a framework to support managers in managing lone working activities in consultation with their employees. To provide evidence based guidance on minimising the risk associated with lone working activities. To outline the responsibilities each employee has in relation to their role as a lone worker. |

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# Planning

## Overview

[Development Group may wish to insert an algorithm or process flow diagram here for the reader to help streamline/clarify the processes in the document in visual format. Delete if not required and update your contents page].

## Purpose

[Describe the overall purpose of this HSE National 3PG].

## Scope

[List the target users and target population covered by the document and settings that apply – who does this document apply to].

[Be specific, such as includes Section 38/39, all HSE funded, all Community Healthcare Organisations].

[Specify what is out of scope as appropriate].

### **Target users**

[Describe here]

### **Target population**

[Describe here]

1. 1.
	2.
	3.

## Objective(s)

[The objective(s) deals with the potential impact of the document on society and populations of staff, patients and service users. The specific objective(s) of the document should be described in detail].

## Outcome(s)

[The expected or desired outcome(s) deals with the end result or the consequence of the document. The expected benefits from the document should be specific to a problem or topic].

1. 1.
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## Disclosure of interests

[If no conflicts of interest were declared, this should be stated here. Where conflicts / interests are declared, include a description of how the conflicts were managed. A conflict of interest declaration form must be signed by each member of the Development Group and those who review and provide feedback during the consultation process (Appendix 3). All signed forms should be retained in the document ‘master file’ held by the Document Owner].

## Rationale / alignment with HSE national priorities

[Explain why this document is required, why was it commissioned? How this document aligns with HSE national priorities such as the Sláintecare strategy, National Quality Improvement Programme / National Clinical Programmes / corporate or service plans].

## Supporting evidence

[List relevant legislation / regulations / related 3PGs].

#  Methodology

[Use the expertise of a librarian or other information specialist to complete this section].

## List of key questions this National 3PG will answer

[This will help guide the search plan to find the best available evidence related to your topic].

## Describe and document the evidence search

[Provide a general outline of the search strategy followed].

[Outline a summary of the supporting evidence from the literature for the National 3PG].

[The resources searched such as online databases, dates of searches, limits applied should be documented and kept in a master file held by the document owner for reference, but does not need to be attached].

## Describe the method of screening and evidence appraisal

[Summarise how the evidence was screened and appraised and the decision making process the Development Group followed. There must be an explicit link between the guidance / recommendations developed and the supporting evidence].

## Attach any copyright or permissions sought

[If none were required, please state no copyright or permissions are required in relation to this document].

#  Procedure

[Outline the specific guidance / recommendations in the National 3PG and provide steps on how to make this happen operationally].

[Use process flow diagrams and tables to enhance understanding of the document. Keep it clear and concise using Plain English].

## Specific roles and responsibilities

[Use separate headings for each role].

#  Consultation

## Stakeholder involvement

1.

[Describe the nature and extent of stakeholder consultation undertaken. Include information on the national consultation and review process or separate stages of consultation. Document all individual stakeholders involved in the development process. Describe how the views and preferences of the target group were sought / considered and what the resulting outcomes were].

## External review

[Provide information on the external review groups/independent experts (as relevant) prior to publication, who was this with; their relevant expertise outlined; the process by which they were selected; their direct input to be outlined].

#  National implementation plan

## Resource implications

[Provide direction on assessing any resources that may need to be in place in order to implement the National 3PG at the local level and whose responsibility this is. For example, conducting a self-assessment and gap analysis of the current situation to plan how to address each of their identified gaps and any barriers to implementation].

## Describe the structure and governance of your national implementation team.

[A national implementation team/contact must be in place and be available to communicate, disseminate and provide guidance, education materials and support to enable local teams to implement your National 3PG].

## List tools and resources developed to support local implementation of your National 3PG.

[Advise local implementers in this section, that a sample implementation plan template is available in Appendix 4 of the National Template, available on the home page of the [HSE National Central Repository](https://www2.healthservice.hse.ie/organisation/national-pppgs/?category=2&page=11)]

[List where any tools and resources can be accessed and provide links. Examples: National memo’s/circulars, resources on websites, HSeLanD training modules, patient and service user information leaflets, training linked to CPD, e-learning, podcasts, study days, research, checklists, audit tools, seminars, conference, patient pathways, toolkits, algorithms, teaching aids, presentations].

## Expected date of full implementation of your National 3PG

[This will provide guidance to local sites of when your National 3PG should be fully implemented].

#  Governance and approval

[Provide a statement on the formal governance arrangements of the National 3PG i.e. background to development of the document].

Example:

[The governance and approval arrangements rest with XXX. The (name of National 3PG) was commissioned by (name/title). Following development of the National 3PG, a Checklist was used in assessing that the National 3PG met the standards outlined in How to Develop HSE National PPPGs – A Practical Guide, and signed and dated by the Chairperson of the Development Group.

The (name of development group) recommended the National 3PG to (name of steering / governance Group) with a signed and dated copy of the Checklist. The (name of steering / governance group) submitted the final document and Checklist to (name of Approver) for sign off.

Once approved, the final version was converted to a PDF document to ensure the integrity of the National 3PG and uploaded to the HSE National Central Repository. A signed and dated copy of the Checklist was attached to the master copy, which is retained with (Document Owner name)].

#  Communication and dissemination plan

[Describe the plan for communicating, sharing and promoting the new or updated National 3PG and its’ key guidance and recommendations].

[Inform the reader the document can be accessed only on the [HSE National Central Repository](https://www2.healthservice.hse.ie/organisation/national-pppgs/?page=1#listingcontent) which is the single trusted source for accessing, storage and document control for National 3PGs. No duplicate copies of the National 3PG should be accessible in any secondary electronic locations, only the link to the document on the Repository should be used on other locations. This link will automatically update in all locations if changed on the Repository].

#  Sustainability

## Describe the plan for national monitoring and audit

[Outline the governance structure for monitoring, audit and evaluation of your National 3PG and clearly define roles and responsibilities in this regard]. [Describe the process in place for receiving and responding to feedback from local implementers].

*[For support, refer to the toolkit and guidance in the sustainability section (stage 5) in ‘How to Develop HSE National Policies, Procedures, Protocols and Non-Clinical Guidelines - [A Practical Guide](https://assets.hse.ie/media/documents/How_to_Develop_HSE_National_Policies_Procedures_Protocols_and_Non-Clinical_Gui_XyjIbKr.pdf) ]*

## National audit tool

[Describe the National audit tool developed for your National 3PG and the appendix it is located in].

[Give direction to Local sites how to use your Audit Tool to audit their compliance with the key guidance and recommendations in your National 3PG, and how they can provide feedback as per 8.1].

#  Review / update

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## Next review date

[State date next formal review is due, standard is on a three-yearly basis unless there is any new supporting evidence identified by findings from audit and evaluation, advances in technology or research, then the National 3PG should be reviewed, updated and published as necessary]

[If there are no amendments to the National 3PG following the review process, the date and detail of the review must still be recorded in the version control update box (page 3)].

1.
2.

#  References

[List all references used in the National 3PG].

#  Glossary of terms

[List terms, abbreviations, definitions used in the document in alphabetical order. If this is an extensive list then it may be included in an appendix].

#  Appendices

[List all appendices which are to be published as part of your National 3PG on the HSE National Central Repository].

[Any supplementary documentation not required to be published with your National 3PG should be held in the document ‘master file’ by the Document Owner’].

## Appendix 1: Membership of Development Group

*[This is a mandatory appendix and must be published with your National 3PG]*

*[Please list all members. Identify chairperson/co-chair of the Development Group. A membership list of any other sub-committees of the Development Group must also be provided in additional appendices as relevant].*

|  |
| --- |
| **Membership of [name of Development Group]** |
| **Name** | **Role and position**  |
|   |  |
|   |   |
|   |   |
|   |   |
| Add additional lines as required |  |

## Appendix 2: Membership of Approval Governance Group

*[This is a mandatory appendix and must be published with your National 3PG]*

*[Please list all members of the Approval Governance Group who have final approval of the document. The approval of the document must be an agenda item at the approval governance group meeting for formal ratification. The date of approval must be recorded on the front page of this template].*

|  |
| --- |
| **Membership of [name of Approval Governance Group]** |
| **Name** | **Role and position**  |
|   |   |
|   |   |
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| Add additional lines as required |  |

**Sign-off by Chair of Approval Governance Group**

[Name of National 3PG] was formally ratified and recorded in the minutes of the Approval Governance Group on dd/mm/yyyy.

|  |  |
| --- | --- |
| **Name: (print)** |   |
| **Title:** |  |
| **Signature:** **(e-signatures accepted)** |   |
| **Registration number: (if applicable)** |   |

## Appendix 3: Conflict of Interest Declaration Form

[Conflict of Interest forms do not need to be published with your National 3PG, but should be held in the document ‘master file’ by the Document Owner].



**CONFLICT OF INTEREST DECLARATION FORM**

This form must be completed by each member of the Development Group.

**Title of National 3PG being considered:**

**Please indicate the statement that relates to you**

I declare that **I DO NOT** have any conflicts of interest [ ]

I declare that **I DO** have a conflict of interest [ ]

|  |
| --- |
| **Details of conflict** (please refer to specific National 3PG)*(Append additional pages to this statement if required)* |

**Signature:**

**Print name:**

**Registration number (if applicable):**

**Date:**

The information provided will be processed in accordance with data protection principles as set out in the Data Protection Act. Data will be processed only to ensure that Development Group act in the best interests of the members. The information provided will not be used for any other purpose.

A person who is covered by this National 3PG\* is required to furnish a statement, in writing, of:

(i) The interests of the person, and

(ii) The interests, of which the person has actual knowledge, of his or her spouse or civil partner or a child of the person or of his or her spouse which could materially influence the person in, or in relation to, the performance of the person's official functions by reason of the fact that such performance could so affect those interests as to confer on, or withhold from, the person, or the spouse or civil partner or child, a substantial benefit.

\*policy, procedure, protocol or guideline.

## Appendix 4: Sample implementation plan template

*[For support, refer to the toolkit and guidance in the implementation section (stage 4) in ‘How to Develop HSE National Policies, Procedures, Protocols and Non-Clinical Guidelines - [A Practical Guide](https://assets.hse.ie/media/documents/How_to_Develop_HSE_National_Policies_Procedures_Protocols_and_Non-Clinical_Gui_XyjIbKr.pdf) ]*

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| National 3PG Title: Click or tap here to enter text.Expected date of implementation (refer to the expected date of full implementation of the National 3PG): Click or tap to enter a date.*[Consider allowance for training to be carried out, or an old document to be phased out]*Implementation lead/role: Click or tap here to enter text. |
|  |
| **IMPLEMENTATION ACTION** | **Implementation barriers / enablers** | **List of tasks to implement the action** | **Lead responsibility for delivery of the action** | **Expected completion date** | **Expected outcomes**  |
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| **Describe the structure and governance of your implementation team.**[An implementation team/contact must be in place and be available to communicate, disseminate and provide guidance, education materials and support to local implementation teams]**Education / training required to implement the National 3PG:**[List any tools and resources developed to support the implementation of this National 3PG at the local level, and where these tools can be accessed].Example: National memo’s/circulars, Resources on websites, HSeLanD training modules, patient and service user information leaflets, training linked to CPD, e-learning, podcasts, study days, research, checklists, audit tools, seminars, conference, patient pathways, toolkits, algorithms, teaching aids, presentations. |

Adapted from National Clinical Effectiveness Committee (NCEC) Implementation Guide and Toolkit (Department of Health 2018)

## Appendix 5: National Audit Tool

[This is a mandatory appendix and must be published with your National 3PG]

[Local sites can then use your Audit Tool to audit their compliance with the key guidance and recommendations in your National 3PG. A sample tool is provided below.].

[Insert Audit Tool you have developed for your National 3PG here]

**Methodology**

**Population:** A sample of target users

**Sampling:** A total of 10% or 10 target users, whichever is greater, should be selected.

**Frequency:** To be determined locally at least annually.

**Method:** Record **Y** for **Yes**, if the criteria are met. Record **N** for **No**, if criteria are not met or **N/A** for **Not applicable**.

**Compliance requirement:**

*[Should have a 100% compliance requirement unless your National 3PG allows flexibility – compliance levels should be set].*

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| --- | --- | --- | --- | --- |
| **Is standard/criteria being met for the following statements:**The Development Group should identify the core statements that should be audited at least annually. | **Yes** | **No** | **N/A** | **Evidence** |
| **Statement 1***Insert as relevant to the National 3PG subject matter* |  |  |  |  |
| **Statement 2** |  |  |  |  |
| **Statement 3** |  |  |  |  |
| **Statement 4** |  |  |  |  |
| **Statement 5** |  |  |  |  |
| **Statement 6** |  |  |  |  |
| Date of Audit:Audited by (name/title):Compliance Rate %: |
| **Calculation of Compliance Rate %:**  The score, expressed as a percentage, is calculated by dividing the number of “yes” and “no” answers. “Not applicable” answers are excluded from the calculation of the percentage score.**Example:** If there are 6 “yes” and 2 “no” answers, the score is calculated as follows:6 (yes answers) divided by 8 (total of yes and no answers) multiplied by 100 = 75% |

## Appendix 6: Checklist

*[Your Checklist does not need to be published with your National 3PG, but should be held in the document ‘master file’ by the Document Owner].*

*[Completion of the Checklist is the responsibility of the chairperson of the Development Group]*

|  |
| --- |
| **Checklist for Best Practice in Developing HSE National 3PGs** |
| **Stage 1** | **Deciding the need** |
|  | Aligned with HSE National Priorities |[ ]
|  | Clearly defined document type (P,P,P or G) |[ ]
|  | Approval obtained to develop  |[ ]
| **Stage 2** | **Planning** |
|  | Governance clearly established |[ ]
|  | Appropriate stakeholder involvement |[ ]
|  | Defined in-scope and out-of-scope |[ ]
|  | Development Group (terms of reference/conflict of interest forms) |[ ]
| **Stage 3** | **Development** |
|  | Evidence methodology based |[ ]
|  | Creation of guidance / recommendations |[ ]
|  | Explicit link between the evidence to guidance / recommendations |[ ]
|  | Circulated for national consultation/independent expert review (as required) |[ ]
|  | Audit Tool developed |[ ]
| **Stage 4** | **Implementation** |
|  | Implementation plan completed / Team established |[ ]
|  | Communication and dissemination plan developed |[ ]
|  | Supports: advice, tools, resources developed and where to access  |[ ]
| **Stage 5** | **Sustainability** |
|  | Monitoring and Audit Plan outlined |[ ]
|  | Audit outcomes: structure in place to link to quality improvement and risk management processes |[ ]
| **Document Control** |
|  | Mandatory pages 2+3 of this template are fully completed.  |[ ]

I confirm that all of the above key activities have been met: [ ]

|  |  |
| --- | --- |
| **Chairperson name:** | **Title:** |
| **Signature:** (e-signatures accepted) |
| **Registration number:**(if applicable) | **Title:** |
| **Date:** |  Click or tap to enter a date. |

**Submit this Checklist with your final National 3PG to the Document Approver.**

## Appendix 7: Signature sheet

[This is a tool for line managers to print off and have staff sign as part of good record keeping/audit trail. This Signature Sheet should *not* be attached with the final published document].

*I have read, understand and agree to adhere to this Policy / Procedure/ Protocol/ Guideline/ Clinical Guideline (delete as appropriate)*

Document Title:

|  |  |  |  |
| --- | --- | --- | --- |
| **Print Name** | **Signature** | **Job Title** | **Date** |
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1. Records the senior management roles involved in the governance and development of the document. [↑](#footnote-ref-1)
2. Records the control information about the document. [↑](#footnote-ref-2)
3. Records details when a document is reviewed, even if no changes are made. [↑](#footnote-ref-3)
4. Records the document information required for publication on the HSE National Central Repository. [↑](#footnote-ref-4)