	Operational Guideline: Process for Operational Guideline Development	**Guideline Number:** PCOG#3
Winnipeg Regional Health Authority Office régional de la santé de Winnipeg *Caring for Health* À l'écoute de notre santé **PRIMARY HEALTH CARE OPERATIONAL GUIDELINE**	**Approved By:** Primary Care Service Area Leadership	**Pages:** 1 of 4
	Approval Date: March 1, 2022	**Supercedes:** April 1, 2018

1. ### INTENT

   ▪ To provide direction regarding a standard and consistent process for the development, review, approval, communication, implementation and ongoing evaluation of Primary Care Operational Guidelines (PCOG)

2. ### GUIDELINE

   2.1. **Initiation:**
   - Recommendations for any new Operational Guideline may be initiated by Primary Care Service Area Leadership, Primary Care Direct Operation Team, Regional Primary Health Care Quality Team, Community Area Directors, Site Medical Leaders and/or any other stakeholders as applicable. Recommendations may also be initiated to ensure primary care service delivery aligns with Accreditation Canada Required Organizational Practices and Standards.
   - All recommendations should be directed to the Program Specialist or Clinical Operations Lead for review and consultation with Primary Care Service Area Leadership. If the decision is made to proceed with the development of an Operational Guideline, an author will be designated based on the area of focus and/or expertise.

   2.2. **Development and Documentation:**
   - A **standard template** for the development of all Primary Care Operational Guidelines shall be used (See *APPENDIX A – Operational Guideline Template*)
   - An **environmental scan** may be conducted of all Primary Care Direct Operation Clinics and/or other relevant sites as applicable to gather information needed to support the development of any new guideline
   - A **literature review** may be conducted, if relevant. The author may access Library Services through the University of Manitoba and/or have WRHA Research and Evaluation complete the literature review.
   - Extensive **consultation** is an important step for development of every guideline. Relevant committees, programs, teams, agencies and subject matter experts will be consulted. Additional stakeholders may be added to the consultation process as needed.
     ➢ The source of every guideline recommendation/initiation should be consulted regularly with respect to its ongoing development
     ➢ The Regional Primary Health Care Quality Team will play an integral role in the development process and should be consulted on every guideline. Where applicable, this committee may make recommendations regarding:
       ▪ Content, processes and workflows
       ▪ Implementation plans
       ▪ Ongoing monitoring with consideration to risk/operational implications
       ▪ Measuring success of implementation
     ➢ Service Delivery Organizations are to be consulted early in the development to determine impact on end-users affected by the guideline. Where applicable,

> Community Area Directors and Site Medical Leaders should also be part of the consultation process.
> ➢ Documentation and responses related to the consultation process are to be kept in an electronic file on the Primary Care Shared Drive under the assigned Primary Care Operational Guideline number for future reference as necessary
- The author will record the full consultation process within the "Consultation Tracker" section of the Primary Health Care Operational Guideline Development Summary *(See APPENDIX B – Operational Guideline Development Summary)* for future reference as necessary. Key consultations may be noted within the guideline itself under the "Source/Reference" section.

2.3. **Approval:**
- After sufficient consultation has occurred, an updated draft that incorporates relevant feedback received will be forwarded to Primary Care Service Area Leadership for final review and/or discussion. The Director of Primary Care-Integrated Palliative, Primary and Home Health Services will notify the Program Specialist, Clinical Operations Lead and/or author (if different) whether the guideline is approved for circulation and implementation, approved with minor changes, or is requiring revisions. If revisions are required, guideline development will continue.
- Once approved, a Primary Care Operational Guideline sequential reference number will be assigned, and the "Approval Date" adjusted accordingly within the header of the guideline
- In the event a guideline is applicable to and/or crosses other Community Service Areas (i.e. Home Care, Public Health, Mental Health, etc.), the Community Health Services Leadership Team (CHSLT) should also be involved in the review and approval process

2.4. **Communication and Storage of Related Documentation:**
- Once approved, the Program Specialist will be responsible for preparing the guideline for global distribution along with a communication that outlines the highlights and relevant implementation details
- The main forums for sharing approved guidelines include:
  - ➢ Primary Care Direct Operations Team - includes the responsible Team Manager for each Primary Care Direct Operation Clinic and Walk-In Connected Care Clinic; should also include the responsible Community Area Director and/or Site Medical Lead where applicable
  - ➢ Regional Primary Health Care Quality Team - includes the Site Quality Lead from every Primary Care Direct Operation Clinic, Funded Community Health Agency and Centralized Service (includes Midwifery Service and Antenatal Home Care Program)
  - ➢ Funded Community Health Agencies – includes the Executive Director (or designate) of those Funded Community Health Agencies offering primary care services
- Every Team Manager shall be responsible for ensuring staff are aware of the addition of a new guideline or update of an existing guideline to the Primary Care Operational Guidelines section on WRHA INSITE. If the clinic

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maintains a hardcopy of all guidelines within a binder, the respective guidelines will need to be updated accordingly.

- The Program Specialist will post approved guidelines on both the internal and external WRHA websites for WRHA staff and the general public to access electronically
- Requests for copies of any guideline from external parties should be directed to the Program Specialist for action
- Documentation and responses related to the development of a guideline are to be kept in an electronic file on the Primary Care Shared Drive under the assigned Primary Care Operational Guideline number for future reference as necessary

2.5. **Implementation:**
- Primary Care Operational Guidelines may apply to the Primary Care Direct Operation Clinics, Walk-In Connected Care Clinics, Centralized Services and others as defined within the "Scope Statement". The statement exists at the bottom of every guideline and identifies all sites/programs within scope. The statement may also list specific sites/programs that are exempt, if applicable.
- While the Funded Community Health Agencies are out of scope of Primary Care Operating Guidelines, it is recommended the content and/or processes be adapted/adopted by them where applicable to ensure consistency across Service Delivery Organizations
- Team Managers are responsible for implementing the guideline at their respective Primary Care Clinic. Collectively the Team Manager, Community Area Director and Site Medical Leader at each site will develop an implementation strategy. A rollout will be much more successful if the leadership group champions the guideline together.
- Issues related to implementation should be forwarded to the Program Specialist or Clinical Operations Lead for review at the next Primary Care Direct Operations Team meeting
- Questions regarding any Primary Care Operational Guideline should be directed to Primary Care Service Area Leadership for assistance

2.6. **Monitoring and Ongoing Review:**
- The Program Specialist will maintain a "Primary Care Operational Guideline - Master Tracker" template which summarizes all existing guidelines along with the respective approval date and anticipated future review due date

MASTER Tracker - Primary Care Operational Guidelines

Guideline Name		Approval Date	Revision Due	
Patient Access and Transfers	PCOG #1	Mar-18	Mar-23	
Third Party Billings	PCOG #2	Nov-18	Nov-23	
Process for Operational Guideline Development	PCOG #3	Mar-22	Mar-27	
MIS Monthly Data	PCOG #4	Jan-22	Jan-27	
Management of Telephone Inquiries and Triage	PCOG #5	May-17	May-22	
Emergency Response Training in Primary Care	PCOG #6	Jun-18	Jun-23	
Patient Chaperones During Intimate Physical Examination	PCOG #7	Feb-22	Feb-27	
Emergency Cart - Equipment, Supplies & Medication	PCOG #8	Sep-17	Sep-22	
TBD	PCOG #9	TBD	TBD	
Patient Status	PCOG #10	Jul-18	Jul-23	
RESULTS MANAGEMENT-Critical Result, Test, or Report Values	PCOG #11	Feb-20	Feb-25	
Advanced Access Strategies	PCOG #12	Oct-16	Oct-21	

- The Program Specialist will be responsible for ensuring all existing guidelines are reviewed at a minimum every 5 years. Guidelines may be reviewed and updated sooner if significant operational circumstances change.

3. **APPENDICES**
   - **APPENDIX A** – Operational Guideline Template
   - **APPENDIX B** – Operational Guideline Development Summary

SCOPE: Applicable to all WRHA Primary Care Direct Operation Clinics (including WRHA Walk-In Connected Care Clinics)

NOTE: While the Funded Community Health Agencies are out of scope of Primary Care Operating Guidelines, it is recommended the content and/or processes be adapted/adopted where applicable.

Questions regarding this or any other Primary Care Operating Guideline should be directed to Primary Care Service Area Leadership