

Highlights of the IHOP Process

The review process for a policy routinely takes 45 days, however, some policies may be expedited in less time and due to the complexity of a policy, the review process may take longer.

- A new or reviewed/amended policy comes to the IHOP coordinator for presentation at an IHOP meeting
 - If the policy is clinical in nature it is first reviewed by the CAPP Committee and if approved sent forward to the IHOP committee
 - Before presentation at the IHOP committee meeting, the IHOP coordinator clarifies the policy author and to the extent possible that all stakeholders have had input
 - The IHOP coordinator invites the author or a policy representative to the IHOP meeting to explain the policy, changes and answer questions. Having the policy author or policy representative at the meeting eliminates the need to return the policy for further edits if those edits can be agreed upon at the meeting.
- The policy is presented at the IHOP meeting or it is sent back with the author to make modifications or to represent recommendations from the IHOP committee to the group that has proposed it (or the changes).
- When approved, the policy is sent to the Entity Leaders for review prior to the policy being placed on the agenda for approval by the SEC
- IHOP may attach recommendations that were provided to policy authors and not accepted to the Entity Leaders and the SEC. The SEC has the final decision on approving policies.
- Once approved by the SEC, the policy is posted to the web, distributed by email to hospital leadership and announced in the morning bulletin
- The policy is then sent to OGC for approval by the UT System. Any edits that are suggested by UT System are discussed/shared with the policy author; unless the UT System recommendations are binding, i.e. refer to the Regents' Rules, State or Federal Law, or another regulatory agency, the policy author does not need to make those changes.
- Any changes that are made subsequent to the policy being posted to the web resulting from UT System recommendations are shared again with the UTMB community via broadcast bulletin and email notification and posted to the web.

Policies that are clinical in nature may be shared with the Nursing Practice Standards Committee to ensure that Nursing does not have any issue with the content. This may occur prior to or subsequent to the CAPP meeting, but will occur prior to going to IHOP.

An attempt is made to review policies every three years unless a change with internal operations or regulatory requirements changes necessitate an earlier review.

In 2008 the decision was made to host an orientation for all IHOP representatives and Departments to clarify the importance of communicating policy changes to employees.

Policies included at the IHOP level are required by a regulatory requirement or have an impact across all of UTMB. All policies whether at department or IHOP level are to be respected. The IHOP committee may offer alternatives to policy authors for policies that are not included in IHOP.

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If a policy presents a significant change to day to day operations or UTMB culture, the IHOP committee will recommend a thorough roll out to provide education and understanding to the UTMB community. The roll out would include forums for discussion.