FBCHHS INTERNAL POLICY AND PROCEDURE

Policy Title: HHS POLICIES MANAGEMENT POLICY

1. POLICY STATEMENT

Fort Bend County Health and Human Services ("FBCHHS") is committed to ensuring that all Department Policies (including those originating from divisions and programs) and related resources are managed in accordance with legal and regulatory requirements and FBCHHS' culture and values. This policy defines a FBCHHS Policy, outlines the relationship to related resources, and describes the key expectations, requirements, and methodology throughout the policy lifecycle, including development, maintenance, retirement, and archiving.

This policy is to ensure that all services are conducted in accordance with applicable sections of state and federal laws and to overlay additional agency policy and procedures so that appropriate agency management review is part of the process and in accordance with Fort Bend County Policies and Procedures set forth by the Commissioner's Court.

2. POLICY PURPOSE

This document defines FBCHHS policy and standards regarding the development, approval, implementation, and maintenance of FBCHHS Policies and related Standard Operating Procedures (defined in Section 4). This policy seeks to create a standardized policy governance framework based on the following guiding principles:

1. Policies align with and strengthen the FBCHHS mission, vision, and values, and take account of public health education leading practices.
2. The policy governance model creates clear ownership and accountability in the policy development and implementation process.
3. The policy governance model enables an efficient and collaborative policy management process and recognizes the importance of engaging stakeholders in the development and review process.
4. Policies, procedures, and related resources are in a consistent and accessible format and written as clearly as possible.
5. Policies are maintained in a user-friendly, organized, central repository to increase awareness and mitigate risk.
6. Policies and related resources are kept up-to-date and compliant with relevant requirements.

3. SCOPE AND APPLICATION

This policy governs the development, approval, implementation, and maintenance of FBCHHS Policies and Standard Operating Procedures (defined in Section 4). All FBCHHS administrative, division, and program employees (full-time, part-time, temporary), volunteers, and contractors involved in the development, approval, implementation, or maintenance of FBCHHS Policies and related resources are expected to comply with this policy.

Any FBCHHS policy that applies to one or multiple divisions or programs is required to adhere to the principles of this policy. Division and program policies must be reviewed against FBCHHS Department policies to ensure there are no provisions that conflict. The policy owners or individuals accountable for drafting division or program policies are

responsible for identifying and addressing such conflicts and should contact the Office of Performance, Policy, and Innovation ("PPI") for assistance if there is a potential conflict in policy provisions. If a division or program policy conflicts with a FBCHHS Department Policy or Standard Operating Procedure (SOP), the FBCHHS Department policy governs.

Consistent with longstanding practice and guidance, all division and program documents related to grant funding and accreditation policies, or revisions to them, must be submitted in advance for review and approval by the Executive Team. The Executive Team may authorize exceptions to such documents, interpret, amend, rescind, or replace them. If a division or program does not adhere to FBCHHS policy, the Executive Team will decide what remedy, if any, is appropriate.

4. DEFINITIONS

Term	Definition
Policy	A FBCHHS Policy is a statement of FBCHHS' intent that broadly communicates expectations for specific actions to be taken or practices to be adopted by a division or program within FBCHHS. It is a commitment to operate in a way that meets legal and regulatory requirements, that yield beneficial impact for FBCHHS employees, partners, customers, and community relationships. Policies tie to FBCHHS Values and outline expected behaviors of FBCHHS personnel.
Policy Division Owner	Has the final authority to approve policies aligned with their subject matter area. The individual(s) assigned to this role holds a director-level role.
Policy Drafter	Responsible for the drafting of a policy and manages the various stages of its development and subsequent modifications and revisions. The individual(s) assigned to this role may differ depending on the policy area or category.
Policy Owner	Monitors the implementation and life cycle of the policy from the time it is enacted. Generally, the policy falls under this role's responsibility, and any questions, exceptions, violations, and complaints will be filtered to the Policy Owner. Works closely with the Policy Drafter and the Policy Review Core Team. The individual(s) assigned to this role may differ depending on the policy area or category.
Executive Team ("ET")	The ET reviews all FBCHHS-wide policies to validate that the proposed policy changes are aligned with the FBCHHS' policy governance framework and related processes. When appropriate, the ET representatives may also review FBCHHS-wide procedures and be called in as advisors on policy changes during emergencies.
Responsible Division	Division responsible for operationalizing, monitoring, and enforcing the policy (may or may not be the same office as the Policy Owner's office).
Subject Matter Expert ("SME")	An individual or an office that has specialized expertise in a particular area and is expected to be consulted during the policy development and/or update process.
Policy Review Core Team	A cross-functional group of subject matter experts engaged on an ad hoc basis who advise on policy reviews and provide guidance on governance process changes, policy impacts, and policy effectiveness.

Division or Program Policy	Formal policy that applies only to the operation of an individual division, program or unit within FBCHHS.
FBCHHS-wide Policy	Applies to all organizational divisions, employees, volunteers, and contractors within FBCHHS.
Procedure	Procedural documents identify the tasks and processes that must be followed to ensure quality, consistency, and compliance with policies. A procedure details the "how" of the policy. Procedures involve specific required actions, generally presented in a high-level step-by-step description, and the conditions under which those actions must be taken.
Standard Operating Procedures	Set of mandatory requirements in support of a Policy that are intended to prescribe a disciplined uniform approach or specify a product, that is, a mandatory document that provides, for common and repeated use, rules, guidelines or characteristics for activities or their results, aimed at the achievement of the optimum degree of order given in a context

5. POLICY DETAILS

I.   Policy Creation or Revisions

<u>Identified Need</u>

Once the need for a new or revised policy is identified, the designated Policy Owner should complete the Policy Notification and Assessment Form (Appendix A) and submit the request to the Office of Performance, Policy and Innovation ("PPI") for review.

Administrative revisions that are technical and not substantive (e.g., new contact details, new position titles, date of last review, links to related policy materials, policy taxonomy changes, etc.) do not require a Policy Notification and Assessment Form and do not require the formal policy review and approval process. For these changes, Policy Owner must notify and send updated policy to OCEE (COMMS@fortbendcountytx.gov) to update document and link.

<u>Policy Creation or Revision</u>

A policy must be created or revised using the FBCHHS Policy Template (Appendix B). Throughout the policy creation or revision, the Policy Drafter and/or Policy Owner must consult with the appropriate SMEs to gather guidance and understand impacts across departments and divisions for HHS department-wide policies or policies that may have an HHS department-wide impact. SMEs should be selected by the Policy Drafter, Policy Owner, Responsible Division, and in consultation with PPI, as needed. In addition to consulting SMEs, the following offices must also be consulted prior to submitting a policy for approval as appropriate:

- Office of Communications, Education, and Engagement
- Office of Operations, Finance and Social Programs
- Fort Bend County Attorney's Office
- FBCHHS Executive Team

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- Human Resources
- Risk Management

The Policy Owner must also inform their Policy Division Owner of the new policy or policy revision prior to submitting the policy for approval.

Policy Format

Policy format and required information to be included in policies can be found in the FBCHHS Policy Template (Appendix B). All policies should adhere to this template. Information regarding tone, tenor, voice, level of detail, and language can be found in the FBCHHS Branding Guide.

II.   Policy Review and Approval

Policy Review

Policies will be submitted for review and will follow the established approval workflow. Policies will be reviewed by the Executive Team for the following:

- Adherence to applicable law or regulations, FBCHHS' values and culture including a clear statement of accountability measures
- Consistency, integration, and impact on other policies
- Equity
- Format, accessibility, style, and language
- Impact on staff and external stakeholders
- Impact on FBCHHS operations and culture

III.   Policy Management

Policy Hierarchy, Categorization, and Taxonomy

FBCHHS utilizes a Policy Document Hierarchy Pyramid to demonstrate the relationship of FBCHHS policies to the following related documents: Policy (Appendix B), Standard Operating Procedures (Appendix C), and Guidelines (do not require a standardized template).

All new FBCHHS Policies will be assigned a policy identifier as part of the overall FBCHHS taxonomy, to ensure clear understanding of the policy hierarchy and to easily identify related resources. A full index of FBCHHS Policies can be found on Fort Bend County's intranet site (*eConnect*) under Documents & Forms.

Policy Identifier

The policy numbering system will be a six-digit numbering system consisting of a three-letter general classification and a three-digit index number, separated by a colon, in the format "XXX:YYY," with leading zeros for the index number as needed. All Policies will have a (P) at the end of the numbering system. All Standard Operating Procedures (SOP) will have an (S) at the end of the numbering system. Examples are HHS:001P and HHS:001S.

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Abbreviation	General Three Letter Classification by Division/ Program
HHS	Administrative policies that govern all areas within FBCHHS
ANS	Animal Services
CDP	Chronic Disease Prevention Program
CHW	Community Health and Wellness
CHS	Clinical Health Services
EMS	Emergency Medical Services
ENV	Environmental Health
EPI	Epidemiology
IHP	Indigent Health Program
LTR	Long-Term Response
CEE	Office of Communication, Education, and Engagement
PPI	Office of Performance, Policy, and Innovation
PHP	Public Health Emergency Preparedness and Response
SSD	Social Services Division

Policy Distribution, Communications, and Training

FBCHHS intends that all FBCHHS policies will be retained and made available on *eConnect* under Documents & Forms.

The Policy Owner is responsible for understanding change impacts and determining communication and training needs required for the policy. If a new or revised policy requires communications or training, such communications and training will be developed by the Policy Owner in consultation with appropriate stakeholders and prior to the policy taking effect.

Minor revisions that are technical and not substantive (e.g., new contact details) do not require communications and training.

Attestations and Tracking

Certain FBCHHS Policies may require that individuals to which a policy applies, acknowledges that they have read, understood, and agree to comply with a policy. Attestation of policies are managed by the Responsible Division and attestation records are maintained in accordance with FBCHHS division and program requirements. Any impact metrics that are required to be tracked by nature of the policy are the responsibility of the Policy Owner and Responsible Division. An example of the FBCHHS Attestation (Appendix D)

IV.   Periodic Policy Review

At minimum, FBCHHS intends to review policies on a biennial basis. FBCHHS Policy reviews will be prompted by PPI.

Off-cycle updates or reviews may be prompted by, but not limited to, a change in regulation, investigation, audit, change in leadership, emergency situation, or a change to FBCHHS operations.

If an update is needed, Policy Owners should develop and submit a request for policy creation or revision, as outlined in section 5. If a policy is found to be duplicative or unnecessary, the Policy Owner must submit a request to retire the policy by submitting the FBCHHS Policy Notification and Assessment Form.

V.   Retirement and Archiving

Policies may be retired for several reasons, including but not limited to:
- Changes in federal, state, regulatory, or local legislation
- Changes to FBCHHS operations
- Identification of any existing policies that overlap or are duplicative

If a policy must be retired, the Policy Owner must submit the FBCHHS Policy Notification and Assessment Form, which will be reviewed and approved by PPI and the Executive Team. The Policy Division Owner must also approve of the retirement.

Upon notification, The Office of Communications, Education, and Engagement (OCEE) will initiate the retirement of the policy from the Policy Management intranet site (*eConnect*). The Responsible Division will assist in the removal of the policy from all work areas and applicable sites.

The Policy Owner is responsible for working with the Responsible Division to communicate the retirement of the policy to all applicable stakeholders. If the retired policy has been replaced by a new policy, the communication of the retired policy should be included in the new policy announcement.

Policies that are no longer in effect will be removed from FBCHHS Policy webpage, including all applicable sites, and archived. Archival of policies will be initiated by PPI and maintained in accordance with the FBCHHS Policy on Record Management. Timing of retirement and archival will be coordinated between the Policy Owner and PPI.

VI.   Standard Operating Procedures

<u>Creation or Revision</u>
FBCHHS division Standard Operating Procedures should be developed using FBCHHS Templates and in consultation with appropriate SMEs.

Review and Approval

FBCHHS division Procedures that require engagement from the FBCHHS Executive Team in a significant manner may be subject to the same approval process as FBCHHS department-wide policies described in Section 5. The Policy Owner must work with PPI and the Policy Review Core Team on a case-by-case basis to determine if the Procedures in question may have a significant impact to FBCHHS.

Distribution, Communications, and Training

The Policy Owner is responsible for understanding change impacts and determining communication and training needs required for the Standard Operating Procedures. If a new or revised Standard Operating Procedure requires communications or training, such communications and trainings will be developed by the Policy Owner in consultation with the OCEE and all appropriate stakeholders.

Periodic Review

Procedures, Standards, and Guidelines should be reviewed against Policy requirements each time a policy is reviewed or updated, and whenever there is an operational change which impacts how the Policy is implemented or monitored.

Exceptions

In the event of an emergency situation, legally mandated deadline, agency audit, or any other circumstance that requires a FBCHHS policy be approved on an expedited basis; refer to the Procedure on Emergency Policy Creation, Review, and Approval (see Section 6). No exceptions to this policy may be made without the prior written approval of the Division Director or the Executive Team.

6. PROCEDURES

Emergency Review Process

If a policy requires emergency creation, review, and approval due to legal, regulatory, statutory, or other requirements at FBCHHS, the Policy Owner or Responsible Division should consult the New Policy Process listed in Section 5 to determine what is considered reasonable based on the scenario and contact PPI to determine how to proceed.

Review Process

This policy will be updated by the Office of Performance, Policy, and Innovation and reviewed by the Executive Team biennially.

7. FORMS

- FBCHHS Branding Guidelines
- Appendix A. Policy Request & Assessment Form
- Appendix B. Policy Template
- Appendix C. Standard Operating Procedures (SOP) Template
- Appendix D. Policy Acknowledgment Form

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- Appendix E. Policy Management Process Flow
- Appendix F. Policy Revisions Process Flow

8. RESPONSIBILITIES

All Staff (administration, divisions, programs, full-time, part-time, contract, interns, volunteers, and temporary employees): The below units or roles are responsible for aspects of the policy.

Position or Office	Responsibilities
Office of Policy, Performance, and Innovation("PPI")	Has the final authority to approve policies aligned with their subject matter area.
Office of Communication, Education, and Engagement ("OCEE")	Manages the internal/external FBCHHS website/intranet (*eConnect*) for publication or approved policies. Reviews draft policies for grammar and brand template alignment.
Executive Team ("ET")	Review and approve new policy requests/revisions. Provide guidance and advise on policy changes during emergencies
Policy Review Core Team	Advise on policy reviews and provide guidance on governance process changes, policy impacts, and policy effectiveness on an ad hoc basis.
Policy Owner	Oversee policy drafting, revisions, required tracking, attestations, and retirement. Determining communication and training needs required for new and revised policy. Coordinate reviews with the Policy Review Core Team members who have expertise to policy-related content.
Policy Division Owner	Provide final sign-off of policy once approved through the policy management workflow system. Approve retirement and archiving of policies.
Responsible Division	Track required policy attestations and developed policy communication and training. Support Policy Owner in updating policy and related content on applicable websites and communicating to impacted stakeholders.

9. RELATED INFORMATION

Not Applicable

10. CONTACTS

Please direct any questions regarding this policy to:

Office	Phone	Email

Date Issued: 2/1/2024
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Date Last Revised: 1/31/2024

| PPI | 281-238-3233 | HHS-PPI@fortbendtx.gov |

11. POLICY URL

Click or tap here to include links to where the policy is hosted on FBCHHS' website.

12. EXECUTIVE APPROVAL

Signature	Print Name	Date

13. LEGAL COUNSEL REVIEW

Signature	Print Name	Date

Date Issued: 2/1/2024
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APPENDIX A

This template serves as a reference for the Policy Notification & Assessment Request Form. Click here to access the electronic version of this form for submission.

1. POLICY OWNER

Click or tap here to enter Policy Owner name.

2. DIVISION/PROGRAM

Select Division/Program.

3. REQUESTOR'S NAME

Name	Click or tap here to enter requestor's name.
E-mail	Click or tap here to enter requestor's email.
Phone Number	Click or tap here to enter requestor's phone number.

4. REQUEST TYPE

Click or tap to indicate request type.

☐ New Policy	☐ Revision	☐ Archive

5. PURPOSE OF POLICY

Click or tap here to describe the purpose of policy request .

FORTBEND
HEALTH & HUMAN SERVICES
Prevent. Promote. Protect.

FBCHHS INTERNAL POLICY AND PROCEDURE
Policy Title:

This policy is to ensure that all services are conducted in accordance with applicable sections of state and federal laws, as well as to overlay additional agency policy and procedures so that appropriate agency management review is part of the process.

1. POLICY STATEMENT

Click or tap here to provide a brief statement of FBCHHS' intent regarding the policy's subject matter, the rationale for the policy.

2. POLICY PURPOSE

Click or tap here to describe the purpose of this policy.

3. SCOPE AND APPLICATION

Click or tap here to address when this policy applies and what happens if there is a conflict between this policy and another.

4. DEFINITIONS

Term	Definition
[Term]	[Define terms specific to these guidelines]

5. POLICY DETAILS

Click or tap here to add the detailed "what" of the policy, but not the "how" as that will be detailed in the procedures section.

Date Issued: Enter a date.
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6. PROCEDURES

Click or tap here to enter the "how" of this policy.

7. FORMS

Click or tap here to hyperlink and describe any forms needed to meet the policy's requirements.

8. RESPONSIBILITIES

Position or Office	Responsibilities
[Units or individuals who are responsible for aspects of the policy]	1. [Unit or individuals' major responsibilities]

9. RELATED INFORMATION

Click or tap here to list (and provide any available hyperlinks to: (i) related policies; (ii) any applicable legal or regulatory information (from Purpose section); or (iii) any FAQ documents, or other information related to this policy.

10. CONTACTS

Please direct any questions regarding this policy to:

Office	Phone	Email

11. POLICY URL

Click or tap here to include link to where this policy is hosted in eConnect.

12. EXECUTIVE APPROVAL

Signature	Print Name	Date

Date Issued: Enter a date.
Date Last Reviewed: Enter a date.
Date Last Revised: Enter a date.

13. LEGAL COUNSEL REVIEW

Signature	Print Name	Date

Date Issued: Enter a date.
Date Last Reviewed: Enter a date.
Date Last Revised: Enter a date.

APPENDIX C

Please use the Standard Operating Procedures template instructions as a guide when filling out this document and remove this sentence once the guidelines are finalized.

1. STANDARD OPERATING PROCEDURES FOR [ENTER SUBJECT]

Click or tap here to provide description of the Standard Operating Procedures (SOP).

2. PURPOSE

Click or tap here to provide a brief statement of intent and/or rationale for the SOP/Guidelines. Include reference and link to the applicable FBCHHS Policy that the SOP supports.

3. SCOPE AND APPLICATION

Click or tap here to identify the primary offices that should actively adhere to these SOP and who this SOP will be distributed to.

4. STANDARD OPERATING PROCEDURES

Click or tap here to list detailed SOP/Guidelines in bulleted format (see instructions for further guidance).

5. DEFINITIONS

Term	Definition
[Term]	[Define terms specific to these guidelines]

5. REFERENCES

Click or tap here to hyperlink all forms and list all tools needed to support this SOP.

Issued Date: Select date.
Revised Date: Select date.

10. CONTACTS

Please direct any questions regarding these guidelines to:

Office	Phone	Email

11. STANDARD OPERATING PROCEDURES

Corresponding Policy Number:	Click here to enter Policy #.
Effective Date:	Click or tap to enter a date.
Last Reviewed Date:	Click or tap to enter a date.
Approval Authority:	Division Director approving guidelines.
Guidelines Owner:	Enter Division/Program owning guidelines.
Responsible Office:	Enter Responsible Division/Program.
Guidelines URL:	Click or tap here to list links to where SOPs are hosted on FBCHHS' website.
Supplemental Documents:	Click or tap here to insert any supplemental document related to this SOP (e.g., forms, procedures, FAQs.

APPENDIX D

FBCHHS POLICY ACKNOWLEDGMENT FORM

I, Click to type Employee Name.   **Employee #:** Enter Employee #.

Division Name: Select Division Name.

Acknowledge that I have read and understand the policies listed below and agree to adhere to the provisions provided. I understand that if I have any questions regarding any elements of these policies, I can consult with my immediate supervisor.

1. Click here to enter policy # & name
2. Click here to enter policy # & name.
3. Click here to enter policy # & name
4. Click here to enter policy # & name
5. Click here to enter policy # & name.
6. Click here to enter policy # & name
7. Click here to enter policy # & name
8. Click here to enter policy # & name
9. Click here to enter policy # & name
10. Click here to enter policy # & name

Date: Click to Select a date.   **Employee Signature:** _____

NOTE: Divisions and Programs are responsible for tracking and maintenance of division level policies. Please keep a signed copy of this acknowledgment form for all employees.

APPENDIX E

New Policy Request — FORT BEND Health & Human Services

Policy Owner
- Identifies a need to document a required practice
- Policy Required
  - Yes → Engage SMEs to lead policy development
  - No → Create Standard Operating Procedure/ Guidelines using FBCHHS Policy Guideline/ SOP Template

Subject Matter Experts (SMEs)
- Policy Owner engages SME and Stakeholders for input and develop draft policy using FBCHHS Policy Template
- Review legal, regulatory, and practice requirements to ensure policy appropriately aligned
- Submit policy recommendations, training, and attestation requirements to Policy Division Owners for review and approval
- Program Specific
  - Yes → Submit to Division Leader along with Draft Policy for approval
  - No →

Policy Performance & Innovation (PPI)
- Review Policy Notification & Assessment form
- Research for duplication/existing policy
- Duplication
  - Yes →
  - No → Submit policy request to Executive Team for approval
- Engage Division Policy Owner to present policy for approval

Executive Team
- Division Policy Owner provide feedback/ recommendations to Policy Owner and SMEs
- Policy Approved
  - No →
  - Yes →

Communication Engagement Education (OCEE)
- Validate branding and apply policy number
- Upload onto eConnect

APPENDIX F

Policy Renewal or Revision — FORT BEND Health & Human Services

Policy Owner
- Review Existing Policy
- Modify Policy (decision) — Yes → Engage SMEs for policy revision; No → Policy Revision Date Updated

Subject Matter Experts (SMEs)
- Policy Owner engages SME and Stakeholders for input and modify policy using FBCHHS Policy Template
- Review legal, regulatory, and practice requirements to ensure policy appropriately aligned
- Submit policy recommendations, training, and attestation requirements to Policy Division Owners for review and approval
- Program Specific (decision) — Yes → Submit to Division Leader along with Draft Policy for approval; No → (down)

Policy Performance & Innovation (PPI)
- Review Policy Notification & Assessment form
- Research for duplication/existing policy
- Duplication (decision) — Yes → (up); No → Submit policy request to Executive Team for approval
- Engage Division Policy Owner to present policy for approval

Executive Team
- Policy Approved (decision) — No → Division Policy Owner provide feedback/recommendations to Policy Owner and SMEs; Yes → (down)

Communication Engagement Education (OCEE)
- Validate branding and apply policy number
- Upload onto eConnect