***[HOSPITAL NAME]***

**ADMINISTRATIVE POLICY**

CATEGORY: General Administration **CODE: F-2**

SUBJECT: Format and Coding for Policy Handbooks **EFFECTIVE:**

**COORDINATOR: Chief Executive Officer**

In an effort to standardize the structure of the policies this is the format and coding for the policies adopted by this hospital.

1. FORMAT:
2. Policies and procedures shall always be prepared in the approved format.
3. Heading:
4. “Category” refers to the general subject matter of the policy/procedure and will correspond to the letter designation of the Code in the upper right of the policy/procedure.
5. “Subject” refers to the title of the particular policy/procedure.
6. “Code” refers to the unique letter and number combination identifying each policy/procedure.
7. “Effective” is the month and year of when the policy/procedure goes into effect.
8. CODES FOR CATEGORIES:

Each policy is to be coded by general subject/department according to the following list: *[This list can be modified per the departments of the hospital using this template except for A-G. Those are standard categories that all hospitals should use.]*

1. Organization and Responsibilities
2. Finance
3. Personnel/HR
4. Risk Management
5. Public Relations/Marketing
6. General Administration
7. Patient Care
8. Cafeteria Department Policies
9. Patient Records Department Policies
10. Laundry Department Policies
11. Housekeeping Department Policies
12. Maintenance and Grounds Department Policies
13. Security Department Policies
14. Business Office Department Policies
15. Stores Department Policies
16. Surgery Department Policies
17. Nursing Department Policies
18. Dental Clinic Department Policies
19. X-ray Department Policies
20. Laboratory Department Policies
21. Pharmacy Department Policies
22. Chaplin Department Policies
23. IT Department Policies

Example: “B-2” policy would be an administrative financial policy

 “N” policy would be a department policy pertaining to the Business Office

 “Q” policy would be a department policy pertaining to the Nursing Department

APPROVED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_