

Position responsible: CEO  
Approved by: ELT

Issue Date : May 2021  
Review Date : April 2024

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Related Documents    Magpas Constitution and Memorandum and Articles of Understanding

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Further information    None

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## **1.0 Introduction**

1.1 The purpose of this policy is to

- (i) Define the processes for the drafting, consultation, approval and amendment of written policies, standard operating procedures (SOPs), procedural aide memoires (PAMs), emergency action checklists (EACs) and drug guides.
- (ii) Ensure that the documents are consistent in format and to the high standard that Magpas aims to achieve.
- (iii) Define the implementation and monitoring of these documents.

## **2.0 Definitions**

2.1 There is a range of documents produced by Magpas in order to define the organisation's philosophy and practice. They are:

- i Governing document - This is the document that defines the philosophy of the organisation, its purpose, what the organisation does and how it is governed. The most recent version of the Magpas Constitution approved by the Charities' Commission is the charities' governing document.
- ii Policies – These documents define how the organisation operates and reflect its values and views as well as any legal, ethical, clinical or regulatory requirements. These include policies related to human resources, financial management, confidentiality and consent etc. A policy is an overall guide, which sets the boundaries within which action will take place, and should reflect the philosophy of the organisation. They should be general, yet comprehensive and incorporate the latest evidence base. Policies will be ratified by the Executive Leadership Team (ELT) and/or Clinical Governance Committee (CGC) and/ or Operational Management Meeting (OMM).
- iii Standard operating procedures (SOPs) - A procedure is a series of related steps designed to accomplish a specific task in a specified chronological order. Safety critical and essential operational activities are 'proceduralised' in order to ensure uniform practice and quality. SOPs should be written in step-by-step detail, so as to require only minimal interpretation. SOPs will be ratified by the ELT, CGC or OMM.

- iv Procedural Aide Memoires (PAMs) - A procedural aide memoire is a short form of an essential or critical clinical or operational procedure which is intended to aide rapid recall. It assumes prior knowledge of the relevant underpinning policies and procedures and is intended to be very easy to refer to in an operational setting. Although they should focus on those procedures which are uncommon, the most common example of a PAM is a cardiac arrest resuscitation algorithm. PAMs will be ratified by ELT, CGC or OMM.
- v Emergency Action Checklist (EACs) – Emergency action checklists are intended to provide an emergency reference for the rapid and safe management of immediately life-threatening complications of treatment or interventions. They are intended to be easy to read and assist in problem solving by providing action points and clear direction. Examples include ventilator alarms and sudden physiological deterioration during anaesthesia. EACs will be ratified by ELT, CGC or OMM.
- vi Drug guides – Drug guides are intended to provide reference information on the use of all drugs in the Magpas formulary.

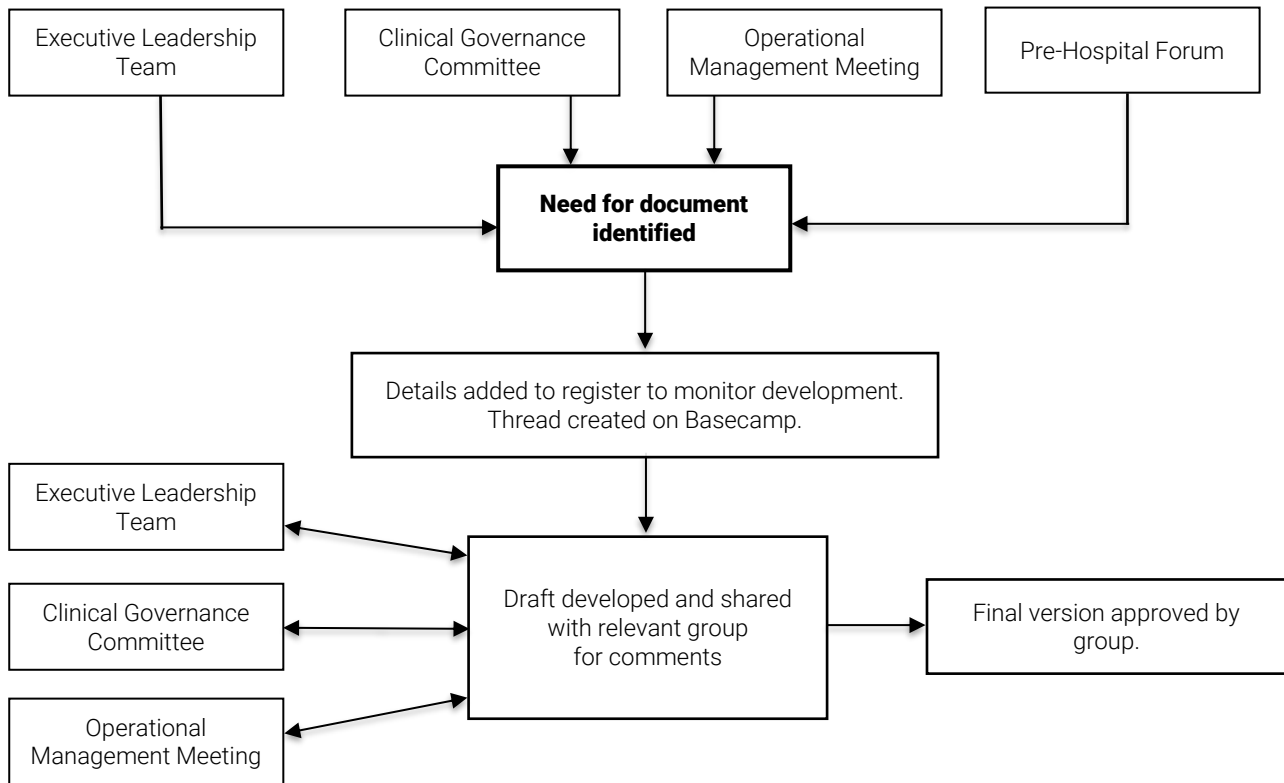
### **3.0 Organisation of documents**

- 3.1 The diverse nature of Magpas means that there will be a large number of documents. Some will apply across the organisation, and others are relevant only to specific groups. For ease of reference:
  - Policies will not be numbered, but referred to by their given title.
  - SOPs, PAMs and EACs will be numbered.
  - Drug guides will be referred to by the generic drug name.
- 3.2 This list of documents will be set out in the 'Documents That Guide Practice' (DTGP) register which shall be maintained by a designated manager and will detail:
  - Reference of document
  - Title of document
  - Person/position responsible for the document (a member of ELT)
  - Date of approval by the Executive Leadership Team, Clinical Governance Committee or Operational Management Meeting.
  - Date of next review
- 3.3 A summarised list of the document titles will be made available to all members of Magpas, and managers will ensure that volunteers and staff are aware and have the opportunity to read all documents relevant to them.

### **4.0 Developing documents**

- 4.1 The development of any of the policy document should follow a defined process. This is summarised in figure 1.
  - i Need for a policy, SOP, PAM, EAC or drug guide is identified. A review of existing documentation should be carried out to avoid duplication or consider whether an addition or amendment to an existing document may be more appropriate.
  - ii The ELT, CGC or OMM reviews the need and, if necessary, draws up a work plan, including adding details to the relevant register.

- iii ELT, CGC or OMM delegates responsibility for the document development process to the relevant clinician and/or manager.
- iv If necessary, the person responsible will liaise with the relevant forum (Pre-Hospital Forum), any ad-hoc working groups and any other interested parties to prepare the draft document in standard Magpas format.
- v Draft document is reviewed by ELT, CGC or OMM. If further work is required then step iii will be repeated.
- vi Once a document is approved by ELT, CGC or OMM it will be implemented and distributed as required and previous issues removed from use.



- 4.2 All documents developed should examine, and where possible reference, relevant national or international guidance, the evidence base underpinning a topic and current accepted best practice.
- 4.3 All documents would, with due consideration and authorisation by the Clinical Governance Committee, be reviewed to create a version for uploading to the public website allowing access to them. This allows for sharing of practice and encouraging feedback from others to further inform future development of clinical practice.

## 5.0 Format of documents

5.1 Magpas policies and SOPs have a standard format. It is recognised that PAMs and EACs are designed for immediate reference by a Magpas clinician at an incident, and so will have a different and appropriate format approved by the Clinical Directorate.

5.2.1 The minimum standards required when formatting a policy or SOP are:

- i Documents should be produced in Microsoft Word (or compatible)
- ii A summary table will be included at the beginning of each document and a footer will appear on each page containing the document name and page numbers. See appendix 1 for the SOP template and appendix 2 for the policy template.
- iii
- iv The title of each section will be numbered and formatted in Roboto black size 11. Each paragraph will be numbered and formatted in Roboto light size 11.
- v Title/paragraph numbers will be aligned to the left side of the document. Title/paragraph text will be indented 1.28cm from the left side of the page. Where there is a list in a paragraph, each item will be denoted by a solid bullet point (the bullet point will be indented 1.28cm from the left of the page and the text a further 0.64cm from that). If more appropriate, lowercase roman numerals may be used to denote items in a list (as illustrated in appendix 1 and appendix 2). Where there is a list from one of the bullet points, each item will be denoted by an outline bullet points or lowercase alphabet and will be indented a further 0.64cm.
- vi On the first page of an appendix, 'Appendix x' will appear in Roboto Black size 14 with the title, document header or description.

5.2.2 Policy and SOP templates are held on the Magpas server.

5.3 When considering the text of the document:

- i The main text of the document should be concise, with correct spelling and grammar. The language used should be plain English, using short sentences where possible.
- ii Jargon, technical words and colloquialisms should be avoided. If technical language is unavoidable, a glossary explaining the technical term should be included as an appendix
- iii Where commonly used abbreviations or acronyms are included in the document, the first reference should spell out the term in full with the accepted abbreviation then stated immediately after in parentheses
- iv The text should be unambiguous and avoid scope for misinterpretation or misunderstanding
- v With the exception of finance reports or tables, when numbers are quoted in the text, for numbers between zero and nine, they should be shown in written form, e.g. six rather than 6. Except at the beginning of a sentence, numbers greater than 10 should be shown as figures, e.g. 150.

## **6.0 Consultation**

- 6.1 All documents should be developed in consultation with those involved in implementing them and should use the current best practice. Magpas operates closely with a number of other organisations and agencies, and aims to involve these groups in the relevant process.
- 6.2 Where possible and appropriate, members of the public who may be in receipt of Magpas services may be consulted, developing links with local communities.

## **7.0 Distribution**

- 7.1 To ensure the up to date version is used, printing of DtGP should be discouraged except where necessary for clinical purposes (et EACs). Printed versions should be tracked and checked annually to ensure they are the most recent versions of the documents.

- 7.1.1 There should be a nominated individual who will be responsible for the maintenance and upkeep of these folders.
- 7.2 Electronic copies of all documents that guide practice (DTGP) are available to clinical team members and staff on MagNet, the charity's online intranet.
- 7.3 Master electronic copies of all policies and procedures are saved in a shared folder on the Magpas server.
- 7.4 All documents will aim to be distributed within 10 working days of ratification.

## **8.0 Implementation**

- 8.1 All employees and volunteers are responsible for the implementation of the contents of any instructions which are relevant to their area of operation. Where necessary, the ELT, CGC or OMM will produce support material and training when new policies or procedures are introduced.

## **9.0 Monitoring and Review**

- 9.1 In order to maintain best practice throughout Magpas, all policies and procedures will be reviewed by the ELT/CGC/OMM regularly. The standard reviews of all documents should be at least every three years, excepting those concerning new practice and major policies which will be reviewed annually, where appropriate
  - 9.1.1 Documents may be reviewed early in order to be updated in light of learning, experience, evident or evolving best practice. When new guidance is published, for example from NICE or RCEM, existing DtGP should be checked and updated if necessary.
- 9.2 Early review of policies may be necessary in the event of organisational change or new clinical evidence. The named post-holder responsible for the document is tasked with reviewing the document and submitting to ELT/CGC for approval. All documents that have been reviewed should be circulated via email to all relevant committee members with tracked changes at least five working days prior to review meeting date.

## **10.0 Ownership of Policies and Standard Operating Procedures**

- 10.1 All documents produced remain the property and copyright of Magpas and should not be circulated outside of the organisation without the express permission of the CEO or Medical Director.
  - 10.1.1 Some documents may be made publicly available on the Magpas website as agreed by ELT. Sensitive information will be redacted (ie hospital contact numbers) where appropriate.

## Appendix 1 – SOP template



## STANDARD OPERATING PROCEDURE

X.X Title

Position responsible: Name  
Approved by: [committee name]

Issue Date : Month Year  
Review Date : Month Year

Related Documents

Further information

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### 1.0 Introduction

1.1 Text

### 2.0 Next section

2.1 Text


2.2 Text

- First bullet point
- Second bullet point
- Third bullet point
  - Secondary list 1
  - Secondary list 2
  - Secondary list 3

### 3.0 Third section

3.1 Text

## Appendix 2 – policy template

|   |  |                       |
|---|--|-----------------------|
|    | <b>POLICY</b>  |                       |
| Position responsible: Name<br>Approved by: Committee  | Title<br>Issue Date : Month Year<br>Review Date : Month Year |                       |
| Related Documents   |  |                       |
| Further information   |  |                       |
| This document is the intellectual property of Magpas  |  |                       |
| <b>1.0 Introduction</b>   |  |                       |
| 1.1 Text  |  |                       |
| <b>2.0 Next section</b>   |  |                       |
| 2.1 Text  |  |                       |
| 2.2 Text  |  |                       |
| <ul style="list-style-type: none"><li>• First bullet point</li><li>• Second bullet point</li><li>• Third bullet point<ul style="list-style-type: none"><li>○ Secondary list 1</li><li>○ Secondary list 2</li><li>○ Secondary list 3</li></ul></li></ul> |  |                       |
| <b>3.0 Third section</b>  |  |                       |
| 3.1 Text  |  |                       |
| Policy: Name  | Page 1 of 1  | Copyright Magpas 2021 |