Guide on Conducting an Administrative Policy Assessment and Gap Analysis

Purpose and Scope

This document is intended to be a resource and guide for state and territorial health departments to conduct an internal assessment and gap analysis of administrative policies and their associated procedures. The information and tools contained within can be adapted to fit the public health department’s operations and environment. Within the scope of this guide are policies that relate to the management and operations of the organization. This guide includes tips and tools for conducting the gap analysis and building an action plan to prioritize and address policy and procedure gaps.

Policies play an important role in the operations of an organization, providing guidance on how decisions should be made and ensuring administrative and programmatic activities comply with laws and regulations. Key operational policies are part of national public health practice standards, and an efficient and effective policy development, review, and update process is a critical component of a strong operational infrastructure. Additionally, the COVID-19 pandemic has prompted public health agencies to examine their infrastructure and operational needs to support effective operations of the agency including areas where new and updated policies are necessary to meet higher operational standards.

The following definitions are drawn from the Public Health Accreditation Board (PHAB) Acronyms and Glossary of Terms and are used throughout the guide and resources:

- **Policy**: The general principles by which a government entity is guided in its management of public affairs. For a health department, this may encompass external or community-facing policies (e.g., clean air or school physical education guidelines), as well as internal policies affecting staff (e.g., family leave or hiring practices).

- **Procedure/Protocol**: A written description of the way in which a particular action or set of actions should be accomplished.

State and territorial health agencies may also implement work instructions, division directives, operations instructions, field instructions, or standard operating procedures as part of, or in addition to, organizational policies and procedures. These documents provide the steps to perform specific tasks or activities correctly and may be frequently used at the programmatic level within the health department. Directives, instructions, and policies that guide administration of individual public health programs or interventions are out of scope of this guide (e.g., restaurant inspections). Policies that direct the operations of a jurisdiction’s laboratory services are also out of the scope.
Foundational Capabilities

The eight Foundational Capabilities defined in the Foundational Public Health Services framework are critical to supporting public health programs and activities. They include organizational capacities that are necessary for effective management and operations of a public health agency and can be facilitated by strong administrative policy development. Below are the Foundational Capabilities most applicable to administrative and organizational policies:

Organizational Competencies

- **Information Technology Services, including Privacy & Security**: Ability to maintain and procure the hardware and software needed to access electronic health information to support the department's operations and analysis of health data. Ability to support, use, and maintain communication technologies and systems needed to interact with community members. Ability to have the proper systems and controls in place to keep health and human resources data confidential and maintain security of IT systems.

- **Workforce Development & Human Resources**: Ability to develop and maintain a diverse and inclusive workforce with the cross-cutting skills and competencies needed to implement the FPHS effectively and equitably. Ability to manage human resource functions including recruitment, retention, and succession planning; training; and performance review and accountability.

- **Financial Management, Contract, & Procurement Services, including Facilities and Operations**: Ability to establish a budgeting, auditing, billing, and financial system and chart of expense and revenue accounts in compliance with federal, state, and local standards and policies. Ability to secure grants or other funding (governmental and not) and demonstrate compliance with an audit required for the sources of funding utilized. Ability to procure, maintain, and manage safe facilities and efficient operations. Ability to leverage funding and ensure resources are allocated to address equity and social determinants of health.

- **Legal Services & Analysis**: Ability to access and appropriately use legal services in planning, implementing, and enforcing, public health initiatives, including relevant administrative rules and due process.

Accountability and Performance Management

- Ability to perform according to accepted business standards in accordance with applicable federal, state, and local laws and policies and assure compliance with national and Public Health Accreditation Board Standards.

- Ability to maintain a performance management system to monitor achievement of organizational objectives.

- Ability to identify and use evidence-based or promising practices when implementing new or revised processes, programs and/or interventions.

- Ability to maintain an organization-wide culture of quality and to use quality improvement tools and methods.

- Ability to create accountability structures and internal and external equity-related metrics to measure the equity impact of a department’s efforts and performance.
Applying a Quality Improvement Lens to Organizational Policies

The Plan-Do-Check-Act (PDCA) method is used throughout this guide as a suggested framework for improving an administrative policy development process and implementing change in operational infrastructure. For agencies that want to improve their policy development process, consider using the PDCA framework and the following quality improvement tools to guide your work:

- **Team Charter** – A team charter can be used to establish a cross-agency policy review or improvement team and set goals for your policy assessment and review efforts.
- **Process Mapping** – Process maps illustrate current processes and workflows. Visualization and team discussion help create a common understanding, as well as to identify issues, potential areas of waste and redundancy, and opportunities for improvement.
- **Prioritization Matrix** – A prioritization matrix is a flexible tool that can help determine the most critical issues to tackle, as well as which solutions to implement first by weighing factors such as frequency, impact, urgency, and importance.
- **Implementation Planning Tool** – Project management tools like an implementation plan helps keep your Do-Check-Act phases on track and moving towards your goals.
- **Risk Management Tool** – Risk management tools help teams to assess risks, understand why issues may occur, and identify methods of managing those risks.

Promising Practices

To identify and better understand promising practices around organizational policies, key informant interviews were conducted with agency staff from Montana, South Carolina, Arizona, Maine, Ohio, Puerto Rico, and Washington state. In addition, the ASTHO team reviewed Public Health Accreditation Board (PHAB) standards and measures for initial accreditation and reaccreditation. The following are promising practices that support or strengthen an agency’s administrative infrastructure:

- **Documenting key processes staff need to follow.** Codifying key processes in policies or procedures centralizes knowledge and information and empowers agency staff to understand operational practices. Documented policies and procedures ensure processes are performed consistently and accurately, reduce duplicative work, and support compliance with laws and regulations.
- **Standardizing and documenting the process for how policies are developed and reviewed.** Ensure consistency and a minimum standard in agency policies by establishing a systematic and documented approach for developing, reviewing, and updating policies. Several jurisdictions interviewed described a “Policy on Policies” or a “How to Write Policies and Procedures” guide that define expectations for all new and updated policies. By standardizing the process, agencies set the foundation for improving the effectiveness of their policies and procedures.

**Automating Policy Administration**

Montana employs an electronic system called PolicyTech, by NAVEX, that automates the policy development process for the department and helps the agency meet national accreditation standards. The system performs the following actions:

- Generates template for development of new policies.
- Allows document import to MS Word or Adobe.
- Facilitates tracking of the approval process of documents.
- Stores agency policies for easy staff access.
- Notifies employees when a new or revised policy needs to be reviewed.
- Notifies policy owners when document is due for review or update.
• **Adapting state-level administrative policies and guidelines to ensure agency staff are meeting compliance requirements.** Most jurisdictions have a state-wide administrative agency that sets policies or guidelines for all state agencies, often around hiring or procurement. Several states interviewed utilized their policy review process for statewide administrative policies to determine if adjustments are needed to meet agency needs while maintaining compliance requirements. In addition, it is helpful to insert the policy content into the agency’s standard policy template.

• **Organizing policies by administrative domains.** Most states interviewed organize policies according to the administrative domains within the agency. These domains become the core policy areas or categories in a policy manual and allows employees to quickly locate a desired policy. Cataloguing policies also clearly defines who owns the policy within the agency, including review and updates, and where questions or concerns can be directed. Examples of administrative domains could include Human Resources, Information Technology, Financial Services, and Grants Management, among others.

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**Policy Organization**

An assessment was conducted on the policy titles submitted by Arizona, Montana, Ohio, South Carolina, Puerto Rico, and Washington state to explore how agencies structure their policies. Below are several observations produced by the assessment:

- A comprehensive standard does not exist for agency administrative policies. Policies that an agency has in place fit the individual needs of the organization and may often be created after an issue has been experienced. Similarly, there is no consistent standard for what is documented as policy, procedure, or protocol. For example, one agency may choose to make its Emergency and Evacuation Plan a formal policy, while another may choose to provide formal procedures or protocols, and a third may simply provide employees with a flyer of instructions also posted around the agency’s campus.

- The categories under which policies fall at each agency is dependent on the structure, organization, and function of the agency’s programs. For example, one agency may have the Freedom of Information Act or Public Records Policy under Communications, while others may have it under General Administration. The Ethics Policy may fall under General Counsel or the Legal Office at one agency, or Human Resources at another. Policy owners are often distinctive to the individual agency.

- Many states had similar policies that could be grouped into general themes, such as specific types of leave (e.g., military leave, educational leave, discretionary leave, or elements of the leave process, such as returning to work or donating leave). These policies fall under the “Leave Policy” theme.

- Human Resource and General Administration policy themes were better defined and more consistent across agencies compared to policies related to Finance, Grants/Contracts, and Communications. This may reflect the varying fiscal processes and organization of the communications function across state and territorial health departments.

• **Centralizing access to policies for all staff.** Staff should have straightforward access to operational policies and procedures to be informed of organizational expectations. Most agencies leverage their intranet, or internal website, as a practical and convenient location to electronically store all current policies and procedures. Ensuring all organizational policies are available in one location also reduces the risk of staff accessing outdated versions of a document. Almost all states interviewed have centralized, online access to administrative policies. Most states interviewed also classified their policies with a numbering system to ensure proper identification of policies.
• **Communicating policies and policy changes to agency staff.** In addition to adding new or revised policies to a central location for staff access, a proactive approach to informing staff of changes is through email. Puerto Rico sends an email to all staff with a description of the revisions and a copy of the new or updated policy. Other jurisdictions provide updates in a newsletter distributed to all staff. In Maine, updated policies are sent out via email and staff review and sign off during annual performance reviews. In Washington state, current employees are required to review and electronically sign the Department of Health Values and Policies Agreement on an annual basis, ensuring staff refresh their understanding of department policies.

• **Training staff on the implementation of administrative policies to improve understanding and compliance.** New employee orientation and refresher courses for existing employees can provide training on the policy structure of the agency, expectations set forth by job-specific policies, and core agency policies. Trainings reinforce understanding of procedures, improve compliance, and ensure everyone is up to date on new policies and other changes.

• **Establish a policy, plan, or strategy for incorporating equity organization-wide.** Adopting a health equity policy or diversity, equity, and inclusion policies encourages a common understanding among staff of the values and expectations for integrating equity principles into the administrative and programmatic work of the agency.

**Getting Started**

Use the [implementation planning tool](#) and follow steps to guide development of a formal policy assessment and review process within your agency. Your agency may already have some or all the following elements already in place and the implementation tool can be adapted to your agency’s needs.

1. **Establish a cross-agency team to serve as a Policy Review Committee.**

   A Policy Review Committee (PRC) is a standing committee with high-level representatives from each operational or administrative area of the agency that is charged with instituting and implementing the department’s organizational policy review process.

   For many states, a manager from an administrative area, such as operations or human resources, acts as the chair or convener of the committee, while a staff person manages the documentation associated with committee meetings, policy development, and review. In South Carolina, for example, the committee is co-chaired by the chief human resources officer, chief of staff, and the chief of finance/operations. In Washington state, the Labor Relations Manager leads the committee.

   Other members of a Policy Review Committee may include:

   - Directors from each administrative area (finance, HR, IT, grants/contracts)
   - Representatives from each section or branch in the agency
   - General counsel/legal office
   - Internal auditor
   - Office of Civil Rights or Equal Employment Office
   - Performance improvement office
   - Health equity or social justice manager or staff
   - 1-3 volunteers from across the agency

   Seeking a few volunteers from across the agency could be a development opportunity for staff, and an engagement strategy to facilitate better understanding of agency administrative policies.
at all levels of the agency. Volunteers may have 1-2 year terms and can be rotated to give others the opportunity.

Creating a team charter will clarify the purpose of your agency’s committee and determine who will play which role in the policy planning process. Here are some examples of how other jurisdictions have defined the role or aim of their Policy Review Committees:

**South Carolina** - “This Charter designates and empowers the Department of Health and Environmental Control Policy Review Committee (PRC or the Committee) to develop, approve and publish DHEC Policies and defines the process to be utilized for these purposes. This Charter also authorizes the Committee to grant variances from Policies where appropriate.”

**Washington** - “The agency will develop and implement clear and concise administrative policies and/or procedures that effectively provide guidance on standard agency operations and address recurring issues affecting divisions.”

2. **Create procedures for policy development and a standard policy template.**

Developing a process map of the current policy development and review process is an effective way to start planning a policy development guide. A process map is a graphic representation that creates a common understanding of the process flow. Process maps also provide insight on what is working and what is not and helps the team brainstorm ideas for a more efficient system. When the team develops a future state map for the development and review processes, the written guide can follow the workflow of the process map.

Most policy guides or “policy on policies” from interviewed states contain the following sections:

- Purpose of document or guide
- When to consider a policy
- Location of agency policies
- Format for policies
- Process for development of a new policy
- Process for the review or revision of an existing policy
- Timeframe for regular review of policies

In addition to the policy guide, most states interviewed have a standard policy template in place to ensure uniformity in all agency policies. Most commonly, the templates included a header with the agency’s logo and information used to track the policy, and the body, which consists of the content of the policy:

<table>
<thead>
<tr>
<th>Header</th>
<th>Body</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Agency logo</td>
<td>• Purpose/policy statement</td>
</tr>
<tr>
<td>• Policy number</td>
<td>• Definitions relevant to policy</td>
</tr>
<tr>
<td>• Reference to legal rule</td>
<td>• Description of policy</td>
</tr>
<tr>
<td>• Applicability (who policy applies to)</td>
<td>• Description of procedures</td>
</tr>
<tr>
<td>• Program/position responsible</td>
<td></td>
</tr>
</tbody>
</table>
3. Establish a central location to house policies and a process for communicating to staff about new or updated policies.

As a team, consider what the best location is for staff to electronically access policies and procedures. All the states interviewed for this guide described their agency intranet, or internal website, as an effective platform to store and organize all final policies and procedures. The intranet enables them to control versions of updated policies and organize policies and procedures by the functional, core policy areas, such as IT, human resources, general counsel, finance, and contracts. If possible, try adding a search feature to the policies page. This enables staff to find policies faster using keywords if they are unsure which core area to look through. Also consider who staff will receive communication about new or updated policies. Some states use existing newsletters as a communication tool to announce operational changes, while others send an email to staff following regular Policy Review Committee meetings with a list and attachments of the new or revised policies that were recently reviewed and approved.

4. Assess gaps in administrative policies using a variety of approaches.

- **PHAB Standards and Measures**
  The PHAB Standards and Measure version 2022 sets administrative policy requirements in Domain 10 (Build and maintain a strong organizational infrastructure for public health). Assessing the policies your agency has in place against the PHAB requirements will help identify potential gaps or inconsistencies in your agency’s operational infrastructure.

- **Audits and Risk Management**
  Internal and external audits can help identify operational inefficiencies and variabilities in policy compliance. Engage managers with in-depth understanding of your agency’s audit findings to determine if there are gaps or revisions needed in policies and procedures that can be addressed in your action plan. Risk management tools are also an effective approach to identifying potential compliance, operational, and financial risks that could be managed with comprehensive policies. A formal risk management process will allow your agency to prevent issues, as well as understand why an issue occurs and if policy or other interventions can resolve the risk.

- **Employee Feedback**
  Evaluate which policies agency staff have the most trouble complying with by seeking internal customer feedback. Consider engaging the Quality Improvement Council or other small cross-agency team to assess pain points in staff experiences or conduct a focus group of managers and staff to identify gaps and policies that may need clarification to improve compliance. Meeting with administrative staff in finance, grants, contracts, and other operational sections could help to pinpoint which policies and processes have consistently low compliance or frequent process errors and staff rework.

- **Gap Analysis Tool**
  This gap analysis tool can be used to help assess where gaps exist and evaluate the urgency or importance of addressing them. The self-assessment tool is prefilled with requirements from national public health standards and policies that have been observed to be in place and operational at a minimum of four of the seven jurisdictions that participated in the key informant interviews and/or submitted policies for review for this assessment. Identification of key finance policies were also supported by resources from the Government Finance Officers Association and Best Practices which shares strategies for financial planning, identifies specific policies for various fiscal-related categories, such as
Finding a Balance

Having too few policies leaves staff with a lack of guidance, consistency, accountability, and clarity on how an organization operates, while too many can make it difficult for staff to manage, understand, and comply with the policies. Here are how several jurisdictions clearly determine when a policy should be developed:

**Montana** – “A policy and procedure is needed only where quality and performance is critical.”

**South Carolina** – “Policies should be adopted only where necessary to standardize appropriate conduct and ensure uniform and fair treatment of employees, protect the agency legally, conform to state or federal law or grant requirements, and/or establish a framework for standards or procedures that prescribe best practices.”

**Washington** – “An administrative policy should be considered if the issue impacts more than one division; the issue is significant and recurring; risk to the agency is determined to warrant a policy; or the agency has been given statutory authority or direction to develop a policy in order to implement a state law, statute, or Governor’s Executive Order.”

Building an Action Plan to Address Gap in Policies

**Utilize the Prioritization Matrix to prioritize policy development or reviews.**

With the infrastructure in place to develop, review, and approve agency policies, the agency can start considering which policy gaps to prioritize for review or development. A Prioritization Matrix can help the Policy Review Team chart out priorities based on the urgency and importance of individual policy gaps. This tool is flexible and can also be used to prioritize issues in the process or other challenges in the gap analysis. Simply change the x- and y-axis of the chart to fit the needs of your team. For example, instead of “Importance/Urgency,” your team may decide to use “Impact/Effort.”

**Complete the Implementation Planning Tool to track and monitor the development of prioritized policies.**

Once selected, add the prioritized policy gaps to the implementation planning tool and track the implementation of the agency’s activities to address each gap area by listing each necessary task, defining a timeline, and identifying the team or people responsible for carrying out a task. This tool will help teams stay on track and accountable to completing tasks and implementing the gap priorities. Your implementation plan should be considered a living document, frequently reviewed, and discussed by the Policy Review Team to monitor progress, identify challenges and successes, and adjust activities and timeframes within the framework of PDCA and general spirit of improvement.
Highlighting Innovative Policies

**Arizona – COVID-19: Payment of Annual Leave to a Non-Separating Employee**
To support the physical and mental well-being of staff during the pandemic, Arizona authorized payment of unused annual leave to non-separating employees experiencing financial hardship. The policy is active for the duration of the governor’s Declaration of Emergency and allows employees to request the payment of a portion of their accumulated annual and unused annual leave up to a maximum of 80 hours.

**Montana – Customer Satisfaction**
To ensure services are meeting customer expectations, Montana collects feedback, analyzes data, and measures progress on customer satisfaction. Agency programs identify their customers and establish outcome metrics related to seven required questions as well as any additional questions desired by the program. Customer satisfaction outcome metrics have since been adopted as part of the agency’s performance management system and are applied in quality improvement initiatives.

**Ohio – Nursing Mothers**
Ohio’s policy for nursing mothers provides staff with four dedicated breast-feeding rooms, each with a hospital-grade pump, and two with sinks to clean parts. In addition, employees are offered kits that include pump attachments and bottles, free of charge.

**Washington – Mobile Workforce**
Before the COVID-19 pandemic, Washington state initiated a teleworking policy to enhance recruitment, reduce its environmental footprint, and reduce leasing costs. The policy enabled employees to shift to and from different modes of work to maximize productivity and to be effective and efficient regardless of their location. When the pandemic necessitated staff to work from home, Washington was able to smoothly transition out of the office and maintain continuity of operations without compromising services or performance.