

**Scope:** The Inter-Professional Policy Committee (IPPC) is charged by the University of Michigan Health System (UMHS) Executive Committee with oversight of all clinical policies, procedures and guidelines (PP&Gs) related to clinical care and operations at the UMHS, including the University of Michigan hospitals, the outpatient/ambulatory clinics and ambulatory surgery centers (and 100%-owned or controlled clinical facilities). The IPPC's scope does not include the UMMS (UM Medical School), UM Nursing School, affiliates, joint ventures, or subsidiaries that are not 100% owned or not controlled by Michigan Medicine. The operations of Metropolitan Hospital and its subsidiaries and affiliates are also excluded. The definitions below were developed by the IPPC to inform their clinical policy governance work.

### 1. Mandatory – Must be Followed

#### 1.1. Policy

Delineates the principles and values that direct decision making and/or help the organization achieve its objectives and maintain compliance. Aligns and communicates behavioral expectations for the workforce (clinical or administrative). Is concise, broad in scope, high level and is required to be followed.

Example: [UMHS Patient and Family Education Policy and Procedure](#)

#### 1.1. Procedure/Standard Operating Procedure (SOP)

Provides detail on how to practice compliantly according to policy or to achieve a specific outcome. May be clinical or administrative. Explains the responsibilities and practical steps involved for the workforce. Is detailed, may be of broad application or may be localized to reflect practices of a care population, specific clinical condition or environment, and must be followed.

#### 1.1. Operational Standard

Describes the level of quality or attainment to meet a policy, guideline or operational need. Must be followed.

Example: [UMHS Environment of Care Policy](#)

#### 1.2. Clinical Protocol

Describes a system of actions that directs a clinical course in specifically defined situations or treatments. Localizes the expectations of a clinical guideline to our clinical care environment. An order must be placed to initiate the protocol for non-privileged providers unless there is an approved standing order. Deviation may be allowed within scope of practice, but only under the specific circumstances/situations defined in the protocol. Example: [OBGYN SANE HIV Prophylaxis Protocol](#)

##### 1.2.1. Standing Orders

A predefined set of approved orders that may be initiated by a non-privileged provider if the patient meets certain clinically defined criteria.

Example: [Standing Orders for Administering Influenza Vaccine to Patients Admitted as an Inpatient or for Observation](#)

##### 1.2.2. Order Sets

A list of individually selectable approved interventions or orders that the clinical staff is authorized to use. May also be referred to as SmartSets or therapy plans.

## **2. Guidance Documents – Documents that provide guidance and require clinical/professional judgment in their application**

### **2.1. Clinical Pathway**

Describes a multidisciplinary care plan used to optimize the value of care by reducing unnecessary practice variation. Includes detailed care process sequences. Localizes the expectations of a clinical guideline to our clinical care environment. Judgment is required to determine whether a clinical pathway applies to a particular patient, but if it does, it is expected to be followed.

Example: [Radiology Contrast Reaction Policy](#)

### **2.2. Clinical Guidelines (or CPGs)**

Describes the expected best practice to reach a particular clinical goal or manage a particular clinical condition. Defines what care is appropriate and why. Often represents evidence-based best practice or the cumulative wisdom of the clinical field, and may be broad guidance across organizations. Judgment is required to determine whether a clinical guideline applies to a particular patient or situation; but if it does, it is expected the guideline would be followed.

Examples: <https://www.uofmhealth.org/provider/clinical-care-guidelines>  
<http://www.med.umich.edu/i/michart/2018CPGS.html>

### **2.3. Operational Guidelines**

Provides guidance and expected best practice relative to a particular topic or area of operations. Often represents the cumulative wisdom of the organization. Operational guidelines are the administrative equivalent to clinical guidelines.

Example: [Entrance Services Personal Appearance and Uniform Guideline](#)

- Health Care Operations are the administrative, financial, legal and quality improvement activities of a health care institution/system that are necessary to support its core functions of patient care and treatment and to run its business.

## **3. General Definitions**

### **3.1. Clinical Standard of Care**

“Standard of care” is a phrase used both legally and clinically. Legally, standard of care describes the level at which a similarly qualified practitioner would have managed a specific patient’s care under similar circumstances. Clinically, standard of care is often used as shorthand for evidence-based practice. For purposes of our PP&Gs, “evidence-based practice” or similar descriptive language should be used rather than “standard of care.”