

<b>Policy Title:</b> Establishing Policies and Procedures	
<b>Section:</b> General	<b>Reference No.</b> SA 001
<b>Effective:</b> July 1991	<b>Revision:</b> November 2017

## 1. SCOPE

All Breast Screening Program Staff

## 2. POLICY

Policies & Procedures will be established and updated through a standard approval process to ensure up-to-date user information at all staff levels.

## 3. PROCEDURE

1. Submit proposed policies & procedures to the Screening Operations Director.
2. New and/or revised policies & procedures will be circulated among the appropriate reviewers before continuing on to final approval by the Quality Management Committee.
3. At the discretion of the Screening Operations Director and Breast Screening Medical Director, revised policies & procedures may not require Breast Screening Quality Management Committee approval.
4. New and/or revised policies will be distributed immediately if they directly affect current operations. If current operations are not directly affected, the policy will be circulated upon approval.
5. The following are reviewed by:

### Policy & Procedure Manual

- Screening Operations Director
- Breast Screening Medical Director
- Professional Practice Leader – Breast Screening Technologists
- Client Services Manager

### Clerical Manual

- Client Services Manager

### Registry Manual

- Screening Registry Leader

### Computer Manual

- Client Services Manager

#### **4. RELATED POLICIES**

#### **5. RESPONSIBLE PARTY**

Screening Operations Director