

HARBOR-UCLA MEDICAL CENTER

SUBJECT: HOSPITAL POLICIES AND PROCEDURES

POLICY NO. 101

PURPOSE:

To communicate official policies to all workforce members for the operation of the hospital.

POLICY:

Harbor-UCLA Medical Center's on-line Policy Manual provides guiding principles which are broadly stated for all of the hospital's varied operations. This manual does not provide all of the detailed answers to questions that may arise. Instead, this manual is a guide to those situations that occur most frequently and should serve to reinforce good management decision-making.

The policies contained in this online manual are official and supersede any and all other policies. Situations may arise where conformance with policies in this manual are impractical. This may be because of sudden changes in program, related policies, or emergencies. When such situations arise, all workforce members are expected to exercise good judgment as to whether official policy shall be suspended pending a higher review of emergency conditions.

This does not mean that workforce members may, at will, suspend the effect of the Department's policies with which they may not be in agreement. This shall be regarded as emergency authority only and in every case of the exercise of this authority, a full report shall be made through the chain of command to the Administrator. This report shall, among other things, justify why action exempted the basic policy of Harbor-UCLA Medical Center without prior authorization.

PROCEDURE:

I. PREPARATION OF MATERIAL

At Harbor-UCLA Medical Center, the various policies will be prepared and preliminarily approved by Administration, by appropriate hospital or medical staff committees and/or by the Department Head/Service Director concerned.

The completed policies or revisions will be submitted to the Assistant Administrator on policies for determination that the material has been properly provided, reviewed, edited, formatted, and approved by committee prior to executive signatures and distribution.

EFFECTIVE DATE: 3/99

SUPERSEDES:

REVISED: 12/02, 7/10, 7/13, 4/14, 4/17, 12/19

REVIEWED: 1/02, 12/02, 12/04, 8/07, 7/10, 7/13, 4/14, 4/17, 12/19

REVIEWED COMMITTEE: N/A

APPROVED BY


Kim McKenzie, RN, MSN, CPHQ
Chief Executive Officer


Anish Mahajan, MD
Chief Medical Officer


Nancy Blake, PhD, RN, NEA-BC, FAAN
Chief Nursing Officer

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II. FORMAT

Each policy will be written in a standardized manner to include:

1. Purpose statement
2. Policy statement
3. Definitions when applicable
4. Procedures section
5. Effective date for policies and procedures in the lower left-hand corner of the first page
6. Dates of all revisions, reviewed and review committee; and
7. Signature of the Chief Executive Officer, Chief Medical Officer, and Chief Nursing Officer, as well as Department Head/Service Director or committee chairperson when applicable.
8. Cross references to applicable policies

Note: Policy font should be 12, typed in "Times New Roman", and must use Tracking feature for Executive Officers to review changes made. For references on policy changes see Policy #106.

III. DISTRIBUTION/TRAINING

Each policy, upon finalization of review or revision, will be distributed to policy and procedure stakeholders with instructions to replace the previous version from their area manual: Department Chairs; Service Directors; Nursing Leadership Council including all nurse managers; and Division Chiefs. It is the responsibility of these policy stakeholders to inform and/or train their workforce members.

IV. PERIODIC REVIEW

At least every three years or as needed, all policies will be reviewed for consistency with the current practice by Administration, by the appropriate hospital or medical staff committee, and/or by the department head/service director concerned. If no revisions are recommended, the date of the review is indicated at the bottom of the first page. Recommendations for revision are detailed in Policy #106.

V. ADDITIONAL SOURCES

For policies not addressed in Harbor-UCLA Medical Center's online manual, please refer to the Department of Health Services' Policy Manual (online), the Research and Education Institute (REI) Rules and Regulation, REI Bylaws, or the relevant hospital departmental policy and procedure manual.

REFERENCE:

Policy 105 Departmental Policy and Procedure Manuals
Policy 106 Hospital Policy Changes

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COUNTY OF LOS ANGELES	DEPARTMENT OF HEALTH SERVICES
HARBOR-UCLA MEDICAL CENTER	
SUBJECT: _____	POLICY NO. _____

PURPOSE (*Brief statement of 1-3 sentences*):

To ensure... To provide... To guide...

DEFINITION(S) (*If necessary*):

POLICY:

Harbor-UCLA Medical Center will... shall...

PROCEDURE:

Introduction (brief)

Bullets or Numbers for Procedure Steps

Standard Font for Policy Format

Times New Roman

12 point font for header

11 point font for policy section

CROSS REFERENCES:

At the end before the signatures, cross-reference other policies or resources used, i.e. CMS CoP, Joint Commission Standards, etc.

EFFECTIVE DATE:	SUPERSEDES:
REVISED:	
REVIEWED:	
REVIEWED COMMITTEE: (Committee's name)	
APPROVED BY: _____	_____
(name) Chief Executive Officer	(name) Chief Medical Officer

(name) Chief Nursing Officer	