

HARBOR-UCLA MEDICAL CENTER

SUBJECT: CREATION AND REVISION OF HOSPITAL POLICIES POLICY NO. 106

PURPOSE:

To establish a standardized process for the development and approval of new and revised hospital policies.

POLICY:

Harbor-UCLA Medical Center shall ensure that all suggestions for new policies, or revisions to existing hospital policies and procedures are reviewed for appropriateness by stakeholders/committees.

PROCEDURE:

At Harbor-UCLA Medical Center, any suggestions for new or revised hospital policies shall be considered first by the appropriate Hospital Administrator, hospital or medical staff committee, and/or by the appropriate Department Chair/Service Director concerned.

I. GENERAL INFORMATION

1. The appropriate committee, Department Chair or Service Director shall determine whether the suggested change keeps with current hospital practices and accreditation standards.
 - A. All Hospital & Medical Administration Manual clinical policies – and other policies as they relate to medical/clinical practice and the Medical Staff – must be approved by the Medical Executive Committee (MEC). A signature line for the Professional Staff Association (PSA) President will also be added at the bottom of the last page for all policies approved by the MEC.
 - B. Except when a new policy or revision of an existing policy is urgently required to comply with law or regulation, new policies or existing policies requiring MEC approval shall first be considered by the PSA Review Committee, and the proposed policy or amendment shall be communicated to the PSA membership prior to the MEC’s consideration.

EFFECTIVE DATE: 9/86

SUPERSEDES:

REVISED: 9/89, 10/92, 1/96, 2/99, 1/02, 9/04, 7/07, 8/10, 9/11, 11/11, 2/14, 4/17, 12/19

REVIEWED: 1/96, 2/99, 1/02, 9/04, 8/10, 2/14, 4/17, 12/19

REVIEWED COMMITTEE: N/A

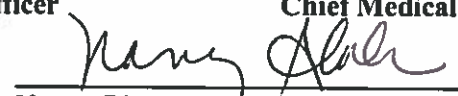
APPROVED BY:



 Kim McKenzie, RN, MSN, CPHQ
 Chief Executive Officer



 Ansh Mahajan, MD
 Chief Medical Officer



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

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- C. An expedited review process may be utilized in cases of a documented need for an urgent revision to existing Hospital & Medical Administration policies necessary to comply with law or regulation. In such cases, the MEC will consider the proposed new policy or revision directly without a prior PSA review.
- D. Hospital & Medical Administration Manual policies not requiring MEC approval shall obtain the necessary approval from the appropriate hospital committee(s), or Service Director(s) during an emergency face-to-face meeting, a conference call, or through e-mail to Hospital Administration.
- E. If a new or revised Departmental policy involves other departments, those policies should be presented to the MEC as a Hospital and Medical Administration Manual policy for approval.
2. The final draft for new or revised policies/procedures shall be submitted to Hospital Administration for determination that the draft has been properly reviewed and edited.
3. In the case of revised policies, a brief explanation of the changes must be submitted.
4. The tracking feature should be used whenever possible when policies are being revised and edited.
5. All policies shall be submitted to the Chief Executive Officer, the Chief Medical Officer, and Chief Nursing Officer, and for policies approved by the MEC, the President of the Professional Staff Association for final approval and signatures.

II. FORMAT

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

1. Subject/Title
2. Policy Number
3. Purpose statement
4. Policy statement
5. Definitions
6. Procedure, when applicable
7. Effective Date (lower left-hand corner of the first page)
8. Dates of all reviews and revisions (lower left-hand corner of the first page)
9. Reviewed By committee(s) (lower left-hand corner of the first page)
10. Supersede policy number(s) (right-hand corner of the first page)
11. Approved By/signature page for the Chief Executive Officer, Chief Medical Officer, and Chief Nursing Officer (right-hand corner of the bottom of the first page)
12. A signature line for the President of the Professional Staff Association will be added as well to the bottom of the last page for all policies approved by the MEC. This will be added and/or amended as needed by the administrative staff preparing the final document for signatures.
13. Times New Roman as the font (11 point for policy section and 12 point for header).
14. Cross-references to other policies or resources used (i.e. CMS, Joint Commission Standards, Title 22, etc.).

Note: See Attachment I - Policy Format Sample

III. REVIEWER/DEPARTMENT/DESIGNEE RESPONSIBILITIES

The primary policy reviewer or departmental designee shall ensure that:

1. Policies are reviewed every three years or as needed.
2. Each policy forwarded by the Policy Coordinator is sent to the appropriate person/committee for

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review, revision and approval.

3. Collaboration with other staff/committee occurs to ensure all areas in a policy are up to standard.
4. The subject/title is correct (if a new policy, must provide a subject/title).
5. The policy number is correct (if a new policy, must work with requestor).
6. The revised policy does not contradict other policies within your department.
7. All revisions are edited by use of the track changes tool in "Word".
8. The policy is typed in Times New Roman font (11 point for policy section and 12 point for header).
9. The policy is approved and signed by the committee chairperson, when applicable, prior to submission.
10. A brief summary of the changes is included with the submission of the policy.
11. The policy is returned to the requestor in a tracked version.
12. The policy is returned to Policy Coordinator in a timely manner within the given due date.

IV. POLICY COORDINATOR/ADMINISTRATION RESPONSIBILITIES

Will ensure that:

1. Every three years or as needed an electronic notification or reminder and the policy with tracking instructions is sent to the responsible department(s) or designee for review.
2. A finalized copy has the correct reviewed and/or revised dates (month/year) on the lower left-hand corner of page 1 (if not, contact designee to obtain correct dates and insert if needed).
3. The "Approved By/Signature" page for the Chief Executive Officer, Chief Medical Officer, and Chief Nursing Officer (bottom of the first page) is correct and present on every policy. Add the Professional Staff Association President's signature line (on last page of all policies that receive MEC approval).
4. All pages are printed correctly.
5. The policy is approved and signed by the committee chairperson, when applicable.
6. A memo indicating the policy change(s), along with those who have approved the changes and include a brief explanation of the changes is created.
7. A memo is inserted with the tracked and camera-ready policy versions into a folder and hand-delivered to the Chief Executive Officer, Chief Medical Officer and Chief Nursing Officer to request their respective signatures.
8. The signed policy is scanned and the previously posted policy is removed from Harbor's Intranet website and replaced with the new, revised and/or updated policy.
9. Both the tracked and finalized versions are electronically saved (for future reference).
10. The original signed policy is filed in the designated binder.
11. The "Change Notice" and updated policy are sent electronically to all policy and procedure manual holders.

CROSS REFERENCE:

Policy 101 Hospital Policies and Procedures

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ATTACHMENT I

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

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

Standard Font for Policy Format

Times New Roman

12 point font for header

11 point font for policy section

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