



Rancho Los Amigos National Rehabilitation Center

ADMINISTRATIVE POLICY AND PROCEDURE

**SUBJECT: RANCHO DEPARTMENTAL MANUAL
DEVELOPMENT, REVIEW, AND REVISION**

**Policy No.: A100.1
Supersedes: November 13, 2015
Reviewed: October 26, 2021
Page: 1 of 2**

PURPOSE

To establish a process for Departmental Manual development, review and revision.

GUIDELINES FOR MEDICAL CENTER DEPARTMENTS/SERVICES MANUALS

To assist in the effective operation and to meet accreditation and regulatory requirements, appropriate departments/programs at RLANRC within the Medical Center shall maintain policy/procedure manuals for their respective areas. These manuals shall be reviewed at least every three years, to determine whether policies should be kept, revised, reassessed and/or deleted. The CEO's designee shall be responsible for the periodic review of the Administrative manual to ensure manual is current.

Each department/program is responsible for the content of each manual. The manual should include the following information:

- **Approval Sheet** - Each manual shall have an approval sheet that indicates the documents have been reviewed by the following personnel:
Department Head/Program Chief
Chief Executive Officer
Chief Medical Officer
Chief Nursing Officer
Safety Committee Chairperson (if applicable)
Infection Control Committee Chairperson (if applicable)
- **Organization Chart** - An approved and current organization chart shall be included in each department/service manual.
- **Table of Contents** - The manuals shall have a Table of Contents with corresponding numbered pages.

Suggested Outline - The following is a suggested outline, which could be used in organization of the manual:

1. Definition/Purpose/Objectives
2. Administrative Authority

EFFECTIVE DATE: November 30, 2001

COUNTY OF LOS ANGELES • DEPARTMENT OF HEALTH SERVICES

APPROVED BY:

3. Staffing/Availability of Service
 - Orientation
 - Training
4. Functions and Responsibilities
5. Policies/Procedures
 - Routine
 - Special
6. Meetings and Committees
 - Purpose
 - Composition
 - Frequency
7. Quality Improvement
 - Methods of Review
 - Committees
 - Continuing Education
8. Safety Program
9. Infection Control

Review/Revision of Manuals

- All manuals shall be reviewed at least every three years, with the exception of Infection Control, which shall be reviewed annually.
- The executive approval sheet shall be issued by Medical Center Administration

Reference: Comprehensive Accreditation Manual for Hospitals, 2021

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Reviewed by: Executive Council

