



Rancho Los Amigos National Rehabilitation Center

OUTPATIENT SERVICES POLICY AND PROCEDURE

SUBJECT: SCOPE OF SERVICES

Policy No.: 2.01.03

Revision Date: 05/2021

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I. PURPOSE

- A. Provide General Information about the Outpatient Services Clinics.
- B. Provide information regarding the Scope of Services provided by Outpatient Services.
- C. Describe the Provision of Care, through the Patient Centered Medical Homes (PCMH) and Specialty Care Clinics, including access to behavioral health support, social services, and case management.
- D. Describe the patients served by the Clinics, including the age(s) of patients, conditions and diagnoses treated.
- E. Describe the staffing model of the care team.
- F. List the key performance indicators used to monitor and improve performance.

II. PROCEDURE

- A. Outpatient Services maintains a document that describes the Scope of Services available through the Clinics.
- B. The Scope of Services document is posted on the Intranet for convenient access by employees.
- C. Outpatient Services Leadership regularly reviews the Scope of Services, and makes updates to the document as they are required.

III. GENERAL INFORMATION

- A. Location. 7601 Imperial Hwy, Downey, CA 90242.
- B. Days and Hours of Operation.
 - i. Monday through Friday.
 - ii. 8:00 am – 4:30 pm.

IV. SCOPE OF SERVICES

- A. Type(s) of Patients.
 - i. Through the Clinics, Outpatient Services serve patients of most ages, from pediatric through adolescent, adult, and geriatric.
 - ii. These patients live with chronic or severe medical conditions, permanent disabilities, or other specialized needs.
 - iii. Treated conditions include diagnoses related to Rancho Los Amigos' Centers of Excellence, including, but not limited to:
 - a. Alzheimer's Disease

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- b. Arthritis
- c. Dentistry for People with Disabilities
- d. Diabetes/Limb Preservation & Amputation
- e. Epilepsy/ Seizure management
- f. General Surgery
- g. Neurologic Disorders
- h. Neuro-surgery
- i. Orthopedics
- j. Orthopedic Spine
- k. Pediatrics Programs (SHARK)
- l. Post-Polio Program
- m. Pressure Ulcer Management
- n. Rheumatology
- o. Spinal Cord Injury
- p. Stroke
- q. Traumatic Brain Injury

B. Services.

- i. Outpatient Services provide primary care services through the Patient Centered Medical Home model, or PCMH.
- ii. Specialty, non-emergency care services are provided based on the assessment conducted by the clinic Providers.
- iii. Individualized treatment plans are established for the patients, which may include: medication regimens, consultation with other sub-specialty clinic(s), laboratory tests, diagnostic radiology, therapy services, orthotic management, prosthetic devices, wheeled mobility, and other durable medical equipment.
- iv. Emergency and Urgent Care services are not provided.

C. Procedures

- i. Joint injections and aspiration,
- ii. Remicade infusions,
- iii. Saline infusions,
- iv. Wound debridement,
- v. Other diagnostic tests, (Accu-check, EKG, EEG, PFT).

V. STAFFING

A. Types of Practitioners

- i. Physicians
- ii. Nurse Practitioners
- iii. Direct and Indirect Nursing Care is provided by a variety of Nursing Personnel.
 - a. Registered Nurses
 - b. Advanced Practice Registered Nurses (Nurse Practitioners)
 - c. Licensed Vocational Nurses
 - d. Clinical Nursing Attendant I
 - e. Nursing Care Specialists II
- iv. Clinical Pharmacists
- v. Physician Assistants
- vi. Certified Medical Assistants

- vii. Clerical Staff

VI. STAFFING ASSIGNMENTS

- A. To ensure that a sufficient number of qualified nurses and nursing support staff are assigned to provide patient care during clinic hours, an assignment schedule is created each morning.
 - i. The Supervising Nurse or designee will develop a daily assignment schedule for all clinics including designation for emergency response.
 - ii. The Supervising Nurse or designee will review and adjust the daily assignment based on projected number of patients scheduled and services scheduled, staffing absences, and other unusual occurrences.
 - iii. Daily adjustments of staffing are based on available number of staff.
 - iv. Nursing staff on orientation are not included in the total number of assigned staff in the area. The orientee will be reflected on the schedule but not expected to function as a primary patient care giver in clinic during orientation period.
- B. The nurse staffing plan is reviewed annually as part of the overall staffing review. The plan's effectiveness is measured by patients' timely access to services, clinic cycle time, and having appropriate staffing mix for the visit categories (new and established).
- C. The nurse staffing plan will incorporate input provided by patient satisfaction survey.

VII. MONITORING PERFORMANCE INDICATORS

- A. Outpatient Services leadership monitors key performance indicators, including,
 - i. Broken appointment rates.
 - ii. Clinic visit volumes.
 - iii. Hand hygiene compliance.
 - iv. Number of telephone encounters for providers.
 - v. Number of nurse visits.
 - vi. Number of calls to Nurse Message Center.
 - vii. Patient satisfaction scores.
 - viii. Patients' timely access to care.
 - ix. Safety event notifications.
 - x. Timely return visits for patients following for discharge.
 - xi. Wait times for patients during clinic visits.
 - xii. Workload for staff, including care management.
- B. Outpatient Services engages in Process Improvement initiatives to address any observed deficiencies in clinic operations and to enhance care delivery services provided to patients.