

LAC+USC MEDICAL CENTER POLICY

Subject: POLICY/PROCEDURE OVERRIDES	Original Issue Date: 10/20/22	Policy # 184
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Departments Consulted: Hospital Administration	Reviewed & Approved by: Attending Staff Association Executive Committee Senior Executive Council	Approved by: (Signature on File) Chief Medical Officer
		(Signature on File) Chief Executive Director

PURPOSE

To describe the conditions and process by which medical center personnel may override other existing LAC+USC Medical Center policies, procedures, or standards for the benefit of a patient, family-member, or staff member.

POLICY

LAC+USC Medical Center staff may override any existing LAC+USC Medical Center policy, procedure, or standard when **all** of the below conditions are met:

- 1) The staff member has a reasonable belief that the override is necessary to benefit the health and/or wellness of a registered patient, or their family member, or another staff member. A reasonable belief is one that is likely to be agreed with by other similarly qualified people under similar circumstances;
- 2) The override is within the scope of the normal duties and responsibilities of the staff member, and if applicable, their professional practice, licensing, and/or privileging (e.g., doctors cannot override nursing policies/procedures/standards, nurses cannot override pharmacy policies/procedures/standards, etc.);
- 3) Other than emergency situations (see 3c below), the staff member’s supervisor is contacted in real time, assesses the situation, and concurs with the staff member’s judgement about the reasonable belief that the override will benefit the health and/or wellness of the patient, family-member, or staff member;
 - a) If the staff member’s supervisor or other members of their chain of command are not available in real time, the Medical Officer of the Day (MOD), Nursing Officer of the Day (NOD), or Administrator of the Day (AOD) can be contacted for this purpose
 - b) Note supervisory concordance is not necessary if the decision is being made by a Chief Officer of the hospital (Chief Executive, Chief Medical, Chief Nursing, Chief Operating, Chief Quality, Chief Financial, Chief Information, Chief Medical Information) or their designee (e.g., the MOD, NOD, or AOD)
 - c) Review and concordance of a supervisor/MOD/NOD/AOD is not required in an emergency situation, which is defined as an immediate risk of serious disability or death of patients, family, or staff members, for which taking the desired action, in the staff member’s opinion, has a reasonable potential to alleviate that risk
- 4) The staff member and their supervisor reasonably believe that overriding the existing policy will not present undue risk to the patient, family member, staff member, or LAC+USC Medical Center;

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- 5) The staff member documents in the medical record, or if for an ancillary service, in an area file or memo, the rationale for the decision, describing the benefit to the patient/family member/staff member, and why the override was needed to achieve that benefit; and
- 6) After the override is done, the staff member or their supervisor must notify their manager to inform them of the action, and so that a review can be made of the written policy, procedure, or standard that was overridden so as to determine if a revision is warranted. The manager should communicate with their respect hospital officer (CNO, COO, CMO, CQO, CFO, CMIO) within 2 days to ensure a hospital-wide evaluation of the policy, procedure, or standard is conducted.

When the above conditions are met, this policy applies to other Medical Center policies, procedures, and/or standards relevant to the specific instance of the override action, signifying that not complying with the policy/procedure/standard did not constitute violation in that instant.

REVISION DATES