



Rancho Los Amigos National Rehabilitation Center

DEPARTMENT OF NURSING

ADMINISTRATIVE

POLICY AND PROCEDURE

SUBJECT: RESOLVING CONFLICTS REGARDING PATIENT
CARE BETWEEN NURSING AND MEDICAL STAFF

Policy No.: A455
Effective Date: 08/1997
Page: 1 of 2

PURPOSE: To provide guidelines for nursing personnel to follow when disagreement exists with the interprofessional team regarding care and/or treatment of patients at Rancho Los Amigos National Rehabilitation Center (RLANRC).

POLICY:

1. Nursing personnel are responsible to ensure the safety of all patients at all times. This is part of the greater accountability for the protection of all patients' rights.
2. Nursing personnel will follow their chain of command in an attempt to resolve disputes with all connected clinicians and providers of record regarding prescribed care/treatment or lack thereof which is perceived to be harmful, detrimental, or which may result in adverse patient outcomes.
3. It is within the scope of practice of nursing at RLANRC for a Registered Nurse (RN) to make an inquiry and/or seek consultation when concerned about the care provided to any patient and/or when appropriate consultation is needed and has not been obtained.

PROCEDURAL STEPS:

1. When any member of the Licensed Nursing staff determines that a physician's order or lack thereof may be harmful to the health, safety, and welfare of a patient, immediate actions must be taken as follows:
 - a. Contact the physician who wrote the order or with responsibility to write the order, and seek clarification, indicating concerns.

Key point: Nurse should be very familiar with the patient's case history, working diagnosis, treatment plan and previous 24-hour assessment, including relevant diagnostic data.

- b. If concerns still exist, after direct discussion with the treating physician, the nurse will:
 - 1) Notify the unit charge nurse or nurse manager/designee.
 - 2) The manager or charge nurse will review the issue and concerns.
 - 3) If indicated, the Nurse Manager/designee contacts the treating physician to further mitigate and find resolution. During off-shift hours and weekends, the Administrative Nursing Supervisor acts on behalf of the Nurse Manager in attempting to get a resolution in collaboration with the Risk Manager, Clinical Nursing Director/designee, and Chief Nursing Officer (CNO) as needed.
2. Any concern identified by nursing personnel that has not been resolved by the RN, Nurse Manager or the Administrative Nursing Supervisor should be referred immediately to the Clinical Nursing Director/designee. If after discussing the issues with the appropriate physician(s) the situation has not been resolved, the Clinical Nursing Director/designee takes immediate action through appropriate medical and nursing chain of command.

- a) Review the issues and concerns with the involved Nursing staff
- b) Request intervention or guidance on resolving the issue from the CNO
- c) Contact the Chief of Service, Department chairman followed by the Medical Director to discuss the nature of the dispute including perceived, actual, or potential adverse consequences to the patient
- d) Communicate the agreed upon course of action to the staff

Key Point #1: At no time prior to the satisfactory resolution of the dispute, will the nurse administer or withhold any prescribed treatment or medication which is the focus of such concern.

Key Point #2: For situations of a critical nature, all measures possible must be undertaken to reach a resolution expeditiously.

- 3. Inform patient, if appropriate, regarding the delay in care or treatment.

DOCUMENTATION:

- 1. Risk Management
Complete a Safety Intelligence report (SI) if considered a risk factor or follow-up by risk management is needed.
- 2. Medical Records
Document the following:
Contacts with physician staff to clarify orders
Referral to Nurse Manager, Administrative Charge Nurse, Pharmacy, etc.
Indicate if medication or treatment was not administered
Key point: Document only the **FACTS**.
Do not document SI submission within medical record.

Reviewed by:

References:

ANA Code of Ethics for Nurse with Interpretive Statements

06/99 – Reviewed
08/02 – Revised
09/05 – Revised
09/09 – Revised
09/12 – Revised
06/16 – Reviewed
04/20 – Reviewed
09/22 – Revised