

**OLIVE VIEW-UCLA MEDICAL CENTER  
POLICY & PROCEDURE**

**NUMBER: 389  
VERSION: 4**

**SUBJECT/TITLE: CREATING AND REVISING POLICIES AND PROCEDURES**

**POLICY:** All Olive View-UCLA Medical Center policies and procedures, including those that apply both organization-wide and to individual departments, are to be reviewed at least once every three years (36 months) to ensure their accuracy and appropriateness.

Exceptions to this requirement include the Infection Control Plan, Environment of Care Management Plans, and Managed Care Services policies and procedures, which are to be reviewed annually.

Policies and procedures will be maintained and managed using the Policy and Procedure Management (PPM) technology system.

**PURPOSE:** To define the process for the development, review, and approval of policies and procedures for Olive View-UCLA Medical Center.

**DEPARTMENTS:** All

**DEFINITIONS:** **Policy:** A statement that establishes a clear set of performance standards for organization-wide or department-specific practices.

**Purpose:** States the intent of the policy.

**Key Words:** Words that help define, clarify, and emphasize the purpose of the policy.

**Definition:** Description of terminology used in the policy that may not be commonly understood.

**Procedure:** Definition of the process or steps necessary in order to comply with the policy.

**Original Date:** Date on which the policy was originally developed and approved.

**Review Date:** The date on which the policy is reviewed only and no revisions are made.

**Revision Date:** The date on which changes to the policy are made.

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**Approved Date:** The date on which the hospital’s Executive Leadership (Chief Executive Officer, Chief Medical Officer, and Chief Nursing Officer) approved the policy for publication. For departmental policies, it is the date on which final approval is given by the head of the department and any other required signatories.

**Document Owner:** The individual or author responsible for the content and management of the policy.

**Proxy:** The individual who has been delegated authority to enter policies into the PPM system for the Document Owner.

**Reviewer:** Person(s) with knowledge of content of document that reviews and/or revises policy prior to approval.

**Approver(s):** Person(s) who approves policies and procedures.

**Policy and Procedure Management System (PPM):** The electronic system that maintains the database of policy and procedure documents.

**PROCEDURE: I. DEVELOPMENT OF POLICIES AND PROCEDURES**

Olive View-UCLA Medical Center policies and procedures shall be clear and concise. Separate detailed procedures may be developed for specific department practices.

The hospital utilizes the PPM system to maintain all of its policies and procedures. Each policy is assigned a “Document Owner” who is responsible for ensuring the policy is developed and reviewed by the appropriate parties prior to final approval and implementation. In order to ensure consistency and avoid duplication of policies and procedures, prior to creating a new policy or revising an existing policy, the Document Owner should search the PPM to identify any existing policies that address the subject in question.

All new policies shall be presented to the Policy Steering Group, which is made up of representatives from Hospital, Medical, and Nursing Administration, for review prior to initiation. The Policy Steering Group will evaluate such factors as the need for the policy, the scope of the proposed policy, and what departments/individuals should be included in the development or review of the policy. Requests for review should be submitted to Hospital Administration.

The Document Owner creates the draft policy on the PPM system following the steps outline in the attached. When setting the properties for the document, the Owner should identify the appropriate reviewer(s) and approver(s) in their

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department or the hospital to review, edit, and/or approve the document for consideration and final approval. All Olive View-UCLA Medical Center policies and procedures must be approved by the Executive Leadership.

Policies related to direct patient care delivery must be reviewed by a physician and must be sent to Medical Executive Committee (MEC) for review and approval, prior to final consideration by the hospital's Executive Leadership.

Ancillary services departmental policies (e.g., Pharmacy, Respiratory Therapy) should be approved through the department's chain of command and obtain final review and approval from the supervising hospital Administrator.

Unit-specific Nursing policies are to be approved by the Clinical Nursing Director and associated physician leader. Department of Nursing policies are to be approved by the Chief Nursing Officer. All Medical Department policies are to be approved by the Chief Medical Officer.

All policies that are interdisciplinary or multidisciplinary and effect more than one department (e.g., a policy that involves Nursing and Pharmacy or Nursing, Physicians, and Respiratory Therapy) should be created as a hospital-wide policy. Interdisciplinary/multidisciplinary policies should include appropriate reviewers from the chain of command from each affected department and must be reviewed and approved by the hospital administrator(s) over the department(s) prior to submission to Executive Leadership for final approval and electronic signature.

All organizational and individual department policies must be reviewed by the creator/owner to ensure they are consistent with Olive View-UCLA Medical Center or Department of Health Services (DHS) policies and procedures.

Olive View-UCLA Medical Center adheres to DHS policies and procedures and maintains organization-specific policies in those instances where greater specificity or detail as to operational procedures is required. In the absence of a hospital Policy and Procedure, the creator/owner should review the DHS Policy and Procedure Manual, which can be accessed via the Olive View-UCLA Medical Center intranet by clicking "DHS Policies and Procedures" on the Policies and Procedures page.

## **II. MAINTAINING POLICIES AND PROCEDURES**

All Olive View-UCLA Medical Center hospital-wide and department-specific policies and procedures are to be maintained electronically in the PPM System.

Each hospital department should maintain one hard copy of its Policy and Procedure manual within the department office for emergency purposes. The hard

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copy manual should be reviewed on an annual basis to ensure it contains policies that have been newly written or updated during that period.

Hard copies of the Olive View-UCLA Medical Center Policy and Procedure Manual are maintained in Hospital Administration and the Administrative Nursing Office and are updated quarterly to reflect new or updated policies and procedures.

Hard copies of the Environment of Care and Infection Control Manuals are to be maintained in each clinical area and will be updated and distributed by the Environmental Health and Safety Office and Infection Control, respectively.

References: DHS Policy No. 102	
Approved by: Anne Robinson (Compliance Officer), Judith Maass (Chief Executive Officer), Shannon Thyne (Chief Medical Officer)	Date: 12/06/2013
Review Date: 3/96, 10/01, 4/05, 5/08, 05/04/2017	Revision Date: 6/83, 1/99, 10/01, 4/05, 3/09, 4/11
Next Review Date: 05/04/2020	
Distribution: Olive View Hospital-Wide Policies	
Original Date: 12/21/1976	