



Rancho Los Amigos National Rehabilitation Center

DEPARTMENT OF NURSING

ADMINISTRATIVE

POLICY AND PROCEDURE

SUBJECT: POLICY AND PROCEDURE DEVELOPMENT
AND REVIEW, NURSING

Policy No.: A170
Effective Date: 07/1999
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Purpose:

To define the mechanism for the development, approval, and review of Clinical and Administrative Nursing policies.

Guiding Principles

1. Policies and procedures for the Department of Nursing describe and guide nursing practice as well as the methods of operation within the Department. Policies and procedures shall be based on current standards of nursing practice and shall be consistent with the nursing process which includes: Assessment, Diagnosis, Planning, Intervention, and Evaluation and, as circumstances require, patient advocacy as well as managerial principles and regulatory guidelines. They provide the basis of the monitoring and evaluation activities for quality assurance/improvement.
2. Policies and procedures that are interdisciplinary in nature describe and guide the practice of multiple clinical disciplines, including nursing. These policies and procedures are developed with the input/assistance of the Nursing Department. Policies and procedures of other departments that contain requirements for the Nursing Department shall be reviewed and approved by the appropriate nursing councils and nursing leadership staff prior to implementation.
3. Policies and procedures developed by the Nursing Department that involve the medical staff shall be reviewed and approved by the medical staff prior to implementation.

Policy Statements

1. The Nursing Department maintains both Administrative and Clinical Nursing Policies
2. All content development and review, of policies/procedures are done through the Nursing Operations Council, Clinical Professional Development Department, Nursing councils, and their committees/task forces. The councils and the Department are responsible for collecting all appropriate input, researching the information, and gathering support for the proposed policy/procedure.
3. The Nursing Executive Council is responsible for validating the development process, approving the policies/procedures and coordinating the review and distribution. All policies/procedures within the Nursing Department will be reviewed at a minimum of every three years. This review will consider the councils and individuals most appropriate to review the content, relevant ethical and legal concerns, scientific and nursing research knowledge, and any quality assurance findings related to the content.
4. The current Nursing Policies are accessible on the hospital's intranet.
5. All hospital and interdisciplinary policies and procedures requiring nursing review will be delegated via the Nursing Executive Council to the appropriate council/committee/task force/expert. The Nursing Executive Council will also review for submission any proposed policies for inclusion in the hospital policies and procedures.

Procedural Steps:

- I. Development of a New Policy & Procedure
 - A. The need for a new Clinical or Administrative Nursing policy/procedure is identified. The Clinical Professional Development Department oversees all Clinical Nursing Policies and the Nursing Operations Council oversees all Administrative Nursing policies.
 - B. Approved reference texts (e.g. Lippincott Manual) are consulted for available information and are referenced at the end of each policy.
 - C. When appropriate, the Council requests input from the Nursing Executive Council regarding:
 - 1. Philosophy and strategic direction
 - 2. Appropriate expert/interdepartmental and DHS resources to consult
 - 3. Similar or adjunctive policies/procedures being worked on in other councils/groups or DHS-wide.
 - 4. Appropriateness of referring Council taking accountability for the policy/procedure development or the need for inter-council activity
 - D. The Council/Department Lead identifies author(s).
 - E. The author seeks input from a variety of sources and develops the proposed policy/procedure utilizing the "Policy/Procedure Format Guidelines."
 - F. Once developed, the policy/procedure is submitted to the appropriate Council/Committee for content review and proposed implementation plan.
 - G. When the policy/procedure has been reviewed by the Council/Committee for clarity, process, and content, it will either be approved or returned to the author(s) with recommendations.
KEY POINT: It is the responsibility of the author(s) to determine that all input has been gathered and incorporated from the appropriate nursing and facility personnel.
 - H. Once the final recommendations have been incorporated and Council/Committee approval has been obtained, the policy/procedure is sent to the assigned Designee for final labeling and numbering, printing and distribution arrangements, and incorporation into the policy/procedure manuals, local and county intranet sites.
- II. Procedural Steps for Review/Revision of Existing Policies and Procedures
 - A. Based upon the review schedule, the Council/Department Lead assigns existing policies and procedures for review/revision by a council member or group.
 - B. The reviewer:
 - 1. Consults references to establish relevance of the information or practice.
 - 2. Makes necessary revisions/recommendations, obtains approval from appropriate departments, councils, or committees and returns to Council/Department Lead.
 - 3. The Council/ Department Lead obtains approval from Nursing Executive Council.
 - C. The Nursing Executive Council:
 - 1. Reviews the recommended policy for format, clarity, process, and content.
 - 2. Ensures appropriate references and input have been gathered.
 - 3. Approves or returns the policy to the author with additional recommendations.
 - D. Once the final recommendations have been incorporated, the council/Department Lead sends the policy to assigned designee for printing and distribution arrangements and to ensure incorporation into the policy/procedures manuals, local and county intranet sites.

Revised by: Bincy Matthew, MSN, RN, CMSRN
Angelica Lopez, MSN, RN, AGCNS-BC, CRRN, CCRN, CNRN
Leala Cabuay, MN, RN, CRRN

References:

California Code of Regulations. (2020). Title 22. Section 70213 – *Nursing Service Policies and Procedures*.
[https://govt.westlaw.com/calregs/Document/IE9B3EF70D4BB11DE8879F88E8B0DAAAE?viewType=FullText&originationContext=documenttoc&transitionType=CategoryPageItem&contextData=\(sc.Default\)](https://govt.westlaw.com/calregs/Document/IE9B3EF70D4BB11DE8879F88E8B0DAAAE?viewType=FullText&originationContext=documenttoc&transitionType=CategoryPageItem&contextData=(sc.Default))

The Joint Commission. (2019). – *Comprehensive Accreditation Manual for Hospitals*. Elements of Performance Standards

A138, Policy Adoption. Rancho Los Amigos National Rehabilitation Center, Administrative Policy and Procedure

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