

**List of Hospital-wide/Department Policies & Procedures
Submitted to JCC for Approval on July 12, 2016**

1. a. New Hospital-wide Policies and Procedures		
Policy Number	Title	Comments/Reason(s) for Policy & Procedure Development
LHHPP 20-10	Transfer and Discharge Notification	Created to provide residents with notice of transfer or community discharge as regulated by CMS.
LHHPP 20-11	Laguna Honda Hospital's Response to ZSFG Condition Yellow And Red Alerts	Created to provide a process for rapid, effective, and coordinated emergency response to ZSFG's condition yellow and red alerts.
LHHPP 21-16	Overdue Medical Records	Created to inform staff of procedure for retrieval of overdue medical records.
LHHPP 50-09	Capital Asset Administrative Policy	Created to maintain fiscal responsibility of the requesting, procurement, and maintaining of capital assets.
LHHPP 73-15	Ergonomics Programs	Created to provide ergonomic evaluation of tasks and workstations in an effort to prevent injury.
LHPP 75-11	Public Access and Defined Restricted Areas	Created to protect residents, volunteers, visitors and employees, as well as physical structure, supplies and equipment within the hospital and campus setting.
LHPP 75-12	Firearms, Dangerous Weapons and Contraband Policy	Created to provide protocol when encountering persons with a firearm, dangerous weapon and/or contraband.
LHPP 75-13	Forensic Residents/Patients	Created to ensure proper protocol is followed when a patient/resident is in custody.
LHPP 75-14	Safety Support for LHH Patient/Resident	Created to provide procedures when a patient/resident presents a danger to themselves and others, the contract security provider shall be called to provide safety support.
LHPP 75-15	Security Records Retention and Disclosure Policy	Created to establish guidelines for retaining security records.
b. New Department Policies and Procedures		
Department: Medicine		
Policy Number	Title	Comments/Reason(s) for Revision
MSPP D08-03	Access to Psychiatry Services	Created to provide a consistent, defined, and unified way to access Psychiatry services at LHH.
MSPP D08-06	LH Psychiatry Services	Created to describe the functions, procedures and standards for psychiatric services to LHH patients.

Department: Respiratory Services		
Policy Number	Title	Comments/Reason(s) for Revision
RSPP A 17.0	EZ PAP Therapy	Created to safely and effectively administer EZ PAP therapy.
<u>2. a. Revised Hospital-wide Policies and Procedures</u>		
Policy Number	Title	Comments/Reason(s) for Revision
LHHPP 20-05	Discharge Appeal Process	Revised to add the Director of Social Services or designee to be a responsible party for coordinating the discharge appeal process.
LHHPP 20-09	Short Stay	Revised to include the focused discharge planning procedures for short stay residents during the first 100 days of stay.
LHHPP 21-07	Handling Misfiled Electronic Health Records	Deletion of monthly reports by QM staff to HIS Committee of misfiled EHR.
LHHPP 22-06	Residents' Council	Revised to clarify the role of Residents' Council.
LHHPP 24-18	Resident Locator	Revised to update the functions of the resident locator device.
LHHPP 24-22	Code Green Protocol	Revised to reflect missing person procedures in LHHPP 75-10 Security Services Standard Operating Procedures.
LHHPP 60-01	Performance Improvement Program	Revised to reflect the LHH Quality Assurance Performance Improvement program structure.
LHHPP 60-12	Review of Sentinel Events	Revised to list sentinel events specific to LHH.
LHHPP 70-03	Emergency Response Plan Appendix H5 – Medical Surge	Revised to reflect current procedure in the event of a medical surge.
LHHPP 70-04	Code Silver	Revised to reflect active shooter procedures in LHHPP 75-10 Security Services Standard Operating Procedures.
LHHPP 72-01 B6	Intravascular Device Guidelines	Revised to incorporate latest guidelines for intravascular devices. Reference list was update to refer to nursing and medicine policies.
LHHPP 72-01 B11	Respiratory Care Guidelines	Revised to update procedures to reflect CDC guidelines. References list was updated to reflect all relevant policies.
LHHPP 72-01 B13	Urinary Catheterization Guidelines	Revised to incorporate current CDC guidelines.
LHHPP 72-01 C17	Pediculosis Management	Revised to update procedures for residents or personnel who are infected or exposed to lice.
LHHPP 72-01 C18	Clostridium Difficile Guidelines	Revised to reflect current Clostridium Difficile guidelines.
LHHPP 72-01 C26	Guidelines for Prevention and Control of Tuberculosis	Revised to reflect current Tuberculosis skin test guidelines for health care workers.

LHHPP 72-01 D1	Pre-Employment and Annual Screening of Employees	Revised to combine LHHPP 72-01 D1 and LHHPP 72-01 D2 into one comprehensive policy.
LHHPP 72-01 F1	Construction/Renovation	Revised to reflect the role of Infection Control in renovation/construction projects.
LHHPP 73-01	Injury and Illness Prevention Program (IIPP)	Revised to reflect new department and department manager title, as well as new attachments.
LHHPP 73-09	Respiratory Protection Program (RPP)	Revised to update appendices and reflect Cal-OSHA standards.
LHHPP 75-01	Security Management Plan	Revised to incorporate security management plan process.
LHHPP 75-10	Security Services Standard Operating Procedures	Revised to incorporate 15 new security operating procedure appendices.
<i>b. Revised Department Policies and Procedures</i>		
<i>Department: Nursing</i>		
Policy Number	Title	Comments/Reason(s) for Revision
NPP D1 2.0	Resident Activities of Daily Living	<ul style="list-style-type: none"> • Under policy #2, clarified that HHA can assist with feeding • Purpose simplified to "promote resident comfort and hygiene" • "Equipment" section removed • "Hygiene & Grooming" title changed to "Personal Hygiene" <ul style="list-style-type: none"> ○ Section simplified since we do have an alternative bathing policy • Included cross referencing to NPP on Elimination, Documentation, and bathing • Simplified "Linen and other personal care items" section to refer to HWPP 72-01 F4 Linen Handling F4 • Removed "Range of Motion" from the section titled "Transfer, Ambulation and Range of Motion)
NPP D1 2.1	Nurse & Resident Call System	<ul style="list-style-type: none"> • Added the following policy to reflect not changing the call light system settings: <ul style="list-style-type: none"> ○ "Prior authorization is required from administration to turn off the System or change any settings that can impact resident safety."
NPP D2 3.0	Shower Tilt Chairs	<ul style="list-style-type: none"> • Title changed to "Shower Tilt Chairs (Combi Tilt Chairs). • Operating Guidelines #2 made into "Background."

		<ul style="list-style-type: none"> • Reworded Operating Guidelines #1 to state that "As part of orientation, all bedside nursing staff will be trained on how to effectively use the shower chair commode and will be reviewed as needed." • Removed from criteria for use of shower chair commode. <ul style="list-style-type: none"> ○ "Has good trunk control and does not lean sideways or forward." ○ "Does not exhibit involuntary movements." • "Resident care plan states that the resident prefers and may use the shower chair commode for bathing."
NPP D5 2.0	Stump Care	<ul style="list-style-type: none"> • Removed definition. • Generalized turning and repositioning of resident to per physicians order and as tolerated. • Under procedure, added to keep residual limb flat and extended. • Removed section on limb wrapping as this is no longer done. • Clarified to not apply moisturizers or shave limb while in the process of shrinking.
NPP D5 5.0	Leg Braces	<ul style="list-style-type: none"> • Changed title to "Application and Management of Braces" • Added policy #3 <ul style="list-style-type: none"> ○ "Obtain Physical Therapy or Occupational Therapy consultation for residents who used a brace prior to admission. • Changed purpose to: <ul style="list-style-type: none"> ○ "To support proper application and management of braces." • Generalized policy to all types of braces (not just leg brace) • Included consultation with Wound Care Specialist for skin conditions and Rehabilitation Services/ZSFG/or LH Clinic for replacement brace • Included under documentation section for TAR • Added under DNCR: <ul style="list-style-type: none"> ○ "Monitor and document any redness, irritation, or breakdown and report skin changes to Licensed Nurse."

<p>NPP E 5.0</p>	<p>Enteral Tube Feeding Management</p>	<ul style="list-style-type: none"> • Included the following policies: <ul style="list-style-type: none"> ○ “Simple balloon gastrostomy tubes will be changed at least every 3 months, and as needed, unless physician order’s otherwise.” ○ “A Registered Nurse (RN), who has demonstrated knowledge and skill, may replace a simple dislodged or clogged G-tube (not PEG), unless the physician orders otherwise. • Changed purpose to: <ul style="list-style-type: none"> ○ “All enteral tubes (nasogastric, gastrostomy, & jejunostomy) will be managed in a standardized manner by physicians and nurses to promote patient safety and to reduce the risk of adverse events.”
<p>NPP H 4.0</p>	<p>Gastric Specimens</p>	<ul style="list-style-type: none"> • Added a new section for “Equipment.” • Under Procedure: “Obtaining a gastric sample directly from the stomach.” <ul style="list-style-type: none"> ○ Changed from 60 ml to a 35 ml syringe for withdrawing gastric contents. ○ Removed “If multiple specimens are required, be certain that N/H tube is taped in place, if it is new.” ○ Cross referenced to Laboratory policy and procedure for “Disposition of Specimen.” • Simplified the Documentation section.
<p>NPP I 5.0</p>	<p>Oxygen Administration</p>	<ul style="list-style-type: none"> • New attachment added on oxygen devices and max flow rates. • Simplified policies to generalize emergent situations. • Included oxygen tank security to the policy. • Generalized Purpose: <ul style="list-style-type: none"> ○ “To safely administer oxygen therapy.” • Specified max flow rate for oxygen concentrators to 5 lpm. • Updated “Safety Measures” to reflect current practice of storing oxygen cylinders with valve protection devices in the oxygen cabinet. • Removed under “Preparation of the Resident and Visitors” the section that stated “Residents are to smoke only in designated areas. Remove matches and cigarettes from unsafe smokers.”

		<ul style="list-style-type: none"> • Under "Documentation" section, added "Electronic Health Record."
NPP J 8.0	Blood Product Administration	<ul style="list-style-type: none"> • Added a new section for "Equipment" • Policy section reduced to 3 policies. • Purpose of the policy changed. • In the Procedure section under "Request for Blood from SFGH Blood Bank," RN was included for drawing the blood sample. • Blood transfusion scheduling was changed from 0900-1800 to anytime following type & cross match. • The policy was also changed to refer to the new building (old policy still referred to the old building). • Kathleen working on updating the appendix and adverse reactions to blood transfusions (still pending).
Department: Volunteer Services		
A 1.0	Volunteer Recruitment Process Life Cycle	Revised to include recognition of an individual or group for the "Special Awards."
VS A3.0	Volunteer Orientation	Revised to include phone and email contact information.
VS A4.0	Volunteer Infection Prevention	Revised to reflect new Tuberculosis skin test guidelines for volunteers.
3. a. Hospital-wide Policies and Procedures for Deletion		
Policy Number	Title	Comments/Reason(s) for Deletion
LHHPP 72-01 C15	Residents with Generalized Rashes	This policy and procedures are not necessary per Infection Control Committee
LHHPP 72-01 D2	Annual/Periodic Health Assessment	Incorporated into LHHPP 72-01 D1.
LHHPP 73-12	Annual Employee PPD Testing	Incorporated into the revised LHHPP 72-01 D1 Pre-Employment and Annual Screening of Employees.
b. Department Policies and Procedures for Deletion		
Department: Health Information Services		
Policy Number	Title	Comments/Reason(s) for Revision
HIS 12.03	Overdue Medical Records	Revised to become a hospital-wide policy.