

**Annual Departmental and Hospital-wide Policies and Procedures Review
Submitted to the Joint Conference Committee (JCC) for Approval on
September 11, 2018**

The annual Laguna Honda Hospital (LHH) policy and procedure review meeting was held on August 28, 2018 to review hospital-wide and departmental policies and procedures that were newly developed, revised or deleted over the past year. This includes policies and procedures that were previously submitted and approved by the JCC on 11/14/2017, 01/09/2018, 03/13/2018, 05/08/2018, and 07/10/2018.

Policy and Procedure changes that have not been previously submitted and approved by the JCC are listed and summarized below:

Hospital-wide Policies and Procedures

Revised Policies

<u>Policies</u>	<u>Comments</u>
LHHPP 22-01 Abuse and Neglect Prevention, Identification, Investigation, Protection, Reporting and Response	Revised to add a grid for quick reference of the new federal regulations for reporting crimes and/or allegations of abuse.
LHHPP 27-05 Tracheostomy Management	Revised to specify two resources available for assistance with tracheostomy management (Ear, Nose and Throat specialist (ENT) and/or Tracheostomy Team); revised to state that the ENT shall make recommendations for management instead of the Trach Team.
LHHPP 65-01 Procedures for Grant Application, Acceptance and Expenditure	Revised to provide clarity on the various levels of grant application and acceptance that require approval from the Board of Supervisors; revised to identify the information required for accept and expend documentation and details pertaining to the responsibilities of the grantee(s) and the Accounting Department.
LHHPP 70-01 A3 Emergency Resources and Maps	Revised to reflect updated resources and map.
LHHPP 70-01 B3 Resident Evacuation Plan	Revised to add new procedures for the decision to evacuate and for employee training; added Appendix A for Alternate Care Sites.
LHHPP 70-01 C4 Medical Surge Plan	Revised to reflect updated procedures.
LHHPP 70-01 C8 Water Service Disruption Response Plan	Revised to reflect updated procedures.
LHHPP 72-01 A7 Reportable Communicable Diseases	Revised to reflect updated contacts; updated Appendix A with the latest version of Reportable Diseases and Conditions for SFDPH.
LHHPP 72-01 A9 Contact/Exposure Investigation	Revised to pertain to residents only; employee aspects of contact and exposure investigation are referenced in a separate policy.
LHHPP 72-01 C1 Alphabetical List of Diseases/Conditions with Required Precautions	Updated list of diseases/conditions to include bed bugs, cyclosporiasis, MERS Co-V (Middle Eastern Respiratory Syndrome Coronavirus), and Zika virus.
LHHPP 72-01 C24 Employee Influenza Vaccination(s) Policy and Use of Surgical Masks When	Revised Employee Health Services hours to Monday – Friday 7:00 am to 4:30 pm.

Vaccination(s) is Declined	
LHHPP 72-01 C26 Guidelines for Prevention and Control of Tuberculosis	Revised to add description of positive induration.
LHHPP 72-01 E3 Barber and Beauticians	Revised to specify the types of disinfectant to be used; added a new procedure for cutting hair with lice infestation.
LHHPP 73-02 Asbestos and Lead Management Plan (re-titled)	Re-titled to include lead management; revised policy to conform to Cal OSHA, EPA, and Bay Area Air Quality Management District regulations.
LHHPP 73-05 Workplace Violence Prevention Program	Revised to add procedure for Campus Safety and Security (CSS) Committee; and clarified procedure on Education of the Workplace Violence Prevention Program.
LHHPP 76-02 Smoke and Tobacco Free Environment	Revised to change to a smoke free facility and designate a smoking area for residents on campus; staff, vendors, and visitors will need to go off campus to smoke.

Department: Admissions & Eligibility

No changes were made.

Department: Central Processing Department

No changes were made.

Department: Clinical Laboratory Services

No changes were made.

Department: Clinical Nutrition Services & Diet ManualRevised Policies

<u>Policies</u>	<u>Comments</u>
Diet Manual	<p>Major changes made:</p> <ul style="list-style-type: none"> •The Clinical Nutrition neighborhood assignments and phone/pager list updated. •Language added to the introduction page that helps support our nutritional analysis. It helps to provide supporting language that explains why we are unable to provide adequate analysis of some nutrients. •The front page of each diet includes the basic principles, indication, adequacy/ approximate composition of calories, protein, carbohydrate & fat with suggested meal plan. Every diet's nutritional composition has been updated with the current nutritional analysis that was completed for our 28 day menu cycle. •The following diets have been eliminated because they are obsolete. All protein restricted diets (40 gm, 50gm, 60 gm) are eliminated and we will keep only the Renal 60 (60 gm protein, 2gm sodium & 2-3gm potassium restricted). And the 100 gram fat

	test diet. •Added a description for the 7 major food allergies/intolerances with reference to the Academy of Nutrition and Dietetics Nutrition Care Manual.
1.11 Nutritionally Adequate Meals	Revised to add language related to adequacy of nutrients & diet manual
1.12 Registration of Dietitians	Updated it to include the CDR website referenced and the CMS guideline reference for “qualified dietitian” and “sufficient staffing”

Deleted Policies

<u>Policies</u>	<u>Comments</u>
1.14 Charging for Enteral Feedings	Delete
1.20 Charting Deficiencies	Delete
1.26 Test Routines	Delete

Department: Environmental Services

No changes were made.

Department: Facility ServicesRevised Policies

<u>Policies</u>	<u>Comments</u>
DP-01 Format of Manual	Revised to reflect updated procedures.
DP-02 Organizational Chart	Revised to reflect updated procedures.
DP-03 Watch Engineer Responsibility and Response Time	Revised to reflect updated procedures.
DP-04 Facility Services Employee Cellular Phone and Pagers	Revised to reflect updated procedures.
DP-07 Work Clothes	Revised to reflect updated procedures.
DP-08 Stationary Engineers Assigned Areas	Revised to reflect updated procedures.
DP-13 Work Site orientation for New Employees	Revised to reflect updated procedures.
DP-14 In-Service Training	Revised to reflect updated procedures.
DP-17 Patient’s Smoking Precautions	Revised to reflect updated procedures.
DP-26 Request for Housekeeping Services	Revised to reflect updated procedures.
DP-27 Employee Health/Sick Leave Policy/Call-In Sick Log	Revised to reflect updated procedures.
DP-29 Keys, Key Security, and Security	Revised to reflect updated procedures.
DP-30 Responding to Locked Wards	Revised to reflect updated procedures.
DP-31 Body Substance Isolation Policy	Revised to reflect updated procedures.

Deleted Policies

<u>Policies</u>	<u>Comments</u>
DP-6 Resetting Time Clocks	Obsolete
DP-11 Reporting Vehicle Accidents	Duplicate of LHHPP 75-09
DP-15 Unusual Occurrence Reporting	Duplicate of LHHPP 60-04
DP-18 Smoking Policy	Duplicate of LHHPP 76-02
DP-19 Building Lock-up Procedure	Duplicate of LHHPP 75-02
DP-20 Patients Found Off Grounds	Duplicate of LHHPP 24-04
DP-21 Public Access	Included in LHHPP 75-02
DP-22 Major Medical Emergencies	Duplicate of LHHPP 73-01
DP-23 Resident Abuse	Duplicate of LHHPP 22-01
DP-24 Interaction with the Media	Duplicate of LHHPP 01-08
DP-25 Distribution of Literature	Duplicate of LHHPP 01-05
DP-28 Parking Restriction	Duplicate of LHHPP 90-04

Department: Food ServicesRevised Policies

<u>Policies</u>	<u>Comments</u>
1.1 Food from Home or Outside Sources Served Directly to Residents	Revised to reflect updated procedures.
1.4 Quality Assurance	Revised to reflect updated procedures.

Deleted Policies

<u>Policies</u>	<u>Comments</u>
1.120 Isolation Trays	No longer relevant.
1.125 Communication with Nutrition Services Department	No longer relevant.
1.85 Congregated Meals for Residents, Social Dining Program	No longer relevant.

Department: Health Information Services

No changes were made.

Department: Medical Staff

No changes were made.

Department: Nursing ServicesRevised Policies

<u>Policies</u>	<u>Comments</u>
D2 2.0 Bathing Alternatives/Bed Bath	<ul style="list-style-type: none"> Added Policy #1 Laguna Honda Hospital shall recognize and integrate resident's past experiences in all aspects of resident's care Included "frequency" as an example for individualizing bath preferences Added "licensed nurse" for whom to report change in resident preferences Attachment reviewed with no changes

Department: Outpatient Clinics

No changes were made.

Department: Pharmacy ServicesRevised Policies

<u>Policies</u>	<u>Comments</u>
01.05.00 Request for Time Off	Revised policy statement to allow for no more than one clinical pharmacist to take scheduled time-off during the same period.
02.02.00 Controlled Substances	Revised to include quarterly inventory reconciliation required for schedule II medications in compliance with new California Board of Pharmacy requirement.
03.01.00 Pharmacy Quality Assessment and Improvement	Revised to reflect which committees the pharmacy QA is reported to; corrected the name of PIPS.
03.01.02 Med Pass Observation	Revised to reflect Pharmacy Supervisor role replacing clinical pharmacist in this process.
03.03.00 Infection Control	Revised Compounding Section to include references to specific compounding policies for details.

Department: Radiology

No changes were made.

Department: Rehabilitation ServicesRevised Policies

<u>Policies</u>	<u>Comments</u>
20-01 Responsibility and Accountability of the Rehabilitation Services	Removed redundancies re: role of Chief of Rehabilitation and psychiatrists that are present in other P&Ps. Clarified the relationship of Rehabilitation Services and psychiatrists with general skilled nursing units.
30-01 Scope of Rehabilitation Services to Be Provided	Minor wording changes.
30-02 Physical Medicine and Rehabilitation Services	Minor wording changes.
30-05 Neuropsychology Services	Clarified that Neuropsychology services are available by referral (as opposed to be at all of the PCT meetings). Minor wording

	changes.
30-07 Scope of Rehab Services: Activity Therapy Services	Minor wording changes.
40-01 Rehabilitation Services for Rehabilitation Unit Patients	Minor wording changes.
40-02 Rehabilitation Services for General SNF Unit Patients	Minor wording changes.
40-04 Rehabilitation Services and Medical Record	Removed redundancies, minor wording changes.
40-08 Rehabilitation Assessment and Interdisciplinary Care Planning	Minor wording changes.
50-02 Admission and Eligibility Criteria for SNF-Level Rehabilitation	Minor wording changes.
50-03 Verbal Orders	Minor wording changes.
50-04 Sources and Forms Used for Referral of Patients	Minor wording changes.
70-02 Occupational Therapy Staff	Added information about healthworkers since this is newly added classification in our department
70-06 Custom Wheelchairs	Wording changes; added information to include a funding source for custom wheelchairs
70-08 Connectivity Clinic	Changed "Connectivity Clinic" to "Psychosocial Occupational Therapy Groups" to reflect current title of groups. Also, added information that documentation is now in the medical record (LHH GetCare, not LCR).
80-02 Physical Therapy Staff	Added information about healthworkers since this is newly added classification in our department
90-07 Establishment and Treatment Programs and Documentation: Audiology	Procedure #4: added "Primary Care Physician. Change impacted cerumen to be removed by ENT to "If impacted cerumen is noted, removal prior to the assessment for a hearing aid will be recommended."
90-08 Hearing Aid Evaluation and Dispensing	Procedure #4: Change "ENT" to primary care and/or ENT physician . . ."
100-01 Electrodiagnostic Studies	Minor word changes
Appendix A Guidelines for Completion of MR505	Clarified that this form can no longer be used for physiatry referrals; physiatry referrals must be made electronically
Appendix B Chief of Rehabilitation Services	Minor wording changes.
Appendix B Internist	Clarified that physician may either be an Internist or Family Practitioner
Appendix B Staff Physiatrist	Removed "performing electrodiagnostics studies" as not all physiatrists perform these studies (privileging issue); minor wording changes.

Department: Respiratory ServicesDeleted Policies

<u>Policies</u>	<u>Comments</u>
A.01 Mission Statement and Goals	Duplicate of LHHPP 01-00 Value, Mission and Vision Statements

of Laguna Honda Hospital

Department: Social ServicesRevised Policies

<u>Policies</u>	<u>Comments</u>
7.4 Recording	<p>Added sentence to Procedure 1: "If resident is coded as short stay resident, the assessment must be in the record within two (2) working days of admission.</p> <p>Added sentence to Procedure 3: "If resident is coded as a short stay resident, the Discharge Assessment (MR 711) must be completed within seven (7) days of admission.</p>
7.7 Discharge Planning and Implementation	<p>Added additional wording to Procedure 1: "... (two working days for short stay residents)... (seven days for short stay residents)"</p> <p>Added a new Procedure #3: "A Resident Discharge Information sheet including projected discharge date and equipment needed will be placed in resident's room with resident's permission and updated as needed."</p> <p>Number order changed due to new procedures.</p> <p>Added 3 sentences to Procedure 7: "Coordinate home evaluation with resident/caregiver, OT and PT. Email the Rehab team and A&E via "DPH-LHH Discharge Address" list when discharge date and location is established to start DME ordering process. Hospital beds and hoyer lifts require a minimum one month notification."</p> <p>Added 1 sentence to Procedure 8: "A copy will be faxed to the Ombudsman program at 415-751-9789 and if any changes are made to the notice, all recipients will be updated.</p> <p>Added a new Procedure 9: "A Discharge Checklist will be placed in left side of medical record for all team members to review and initial to ensure resident is ready to go."</p> <p>Added a few words and one sentence to Procedure 10: "...a finalized version..." "A copy of the written discharge instructions (MR 313A Post-Discharge Plan of Care/Home Instructions) will be given to the resident and/or resident representative and box will be checked off on the MR 705.</p>
7.18 Discharge Database Information	<p>Added additional wording to Policy: "(7 days for short stay residents)"</p>

	Added additional wording to Procedure 2: “(7 days for short stay residents)”
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Department: Spiritual CareRevised Policies

<u>Policies</u>	<u>Comments</u>
A 3.0 Roman Catholic Program	Updated to show current Mass schedule.
B 3.0 SCD NODA Volunteer Program	Updated language to show current program.
C 3.0 SCD Spiritual Care Referrals	Updated to show current contacts.

Department: Vocational RehabilitationRevised Policies

<u>Policies</u>	<u>Comments</u>
VR 2.0 Scope of Services	Removed from section 1: assistance with career exploration, assistance with job search Removed from section 2: volunteer opportunities in the community, Updated from section 3: Position of escort/guide Change: documentation in SFGetCare progress notes
VR 3.0 Referral and Assessment	Updated to reflect SFGetCare documentation
VR 4.0 Documentation	Updated to reflect SFGetCare documentation

Department: Volunteer Services

No changes were made.

Department: Wellness & Activity TherapyRevised Policies

<u>Policies</u>	<u>Comments</u>
A2 Scope of Services	Updated references.
A3 Staffing Plan	Updated references.
A5 Continuing Education	Deleted one procedure.
A6 Overtime Utilization and Monitoring	Departmental overtime process update.
A8 Equipment & Program Supplies	Revised procedures.
A9 Call-in procedures	Revised grammar.
A11 Assignment Bidding Process	Revised grammar.
A12 Emergency Response Plan	Updated procedures.
D1 Medical Record Documentation	Updated references.
D2 Tracking of Resident	Updated references.

Participation	
D4 Quarterly Progress Note Format	Updated references.
P4 Special Events Coordinator	Updated procedures and references.
P5 Animal Assisted Therapy	Updated procedures and references.
P7 Community Outings	Updated procedures and references.

Deleted Policies

<u>Policies</u>	<u>Comments</u>
A7 Neighborhood and Shoptime	No longer applicable.