

**List of Hospital-wide/Department Policies and Procedures
Submitted to the Joint Conference Committee (JCC) for Approval on
November 12, 2019**

Hospital-wide Policies and Procedures

Revised Policies

<u>Policies</u>	<u>Comments</u>
22-01 Abuse and Neglect Prevention, Identification, Investigation, Protection, Reporting and Response	Revised to clarify the role of the mandated reporter and notification requirements; and updated Appendix A Investigation of Alleged Abuse Form.
22-07 Physical Restraints	Revised to add definition for chemical restraint.
24-06 Resident and Visitor Complaints/Grievances (re-titled)	Revised to include visitors in the policy; the Grievance Official was changed from Risk Management Nurses to the Assistant Hospital Administrator; contents from Suggestion boxes shall be picked up by a designee from Administration and routed to the Grievance Official; and complaints/grievances shall have a final resolution in 30 business days. Attachments C and D have been updated with new templates for Grievance Acknowledgement and Response.
24-08 Off Campus Appointments or Activities	Revised to add new procedure for patients eligible for Veterans Affairs transportation services.
25-05 Hazardous Drugs Management	Revised to be consistent with ZSFG practice and personal protective equipment recommendations that are built into the electronic health record (EHR) Medication Administration Record (MAR) – only one pair of chemotherapy gloves is required to handle solid tablet and capsule dosage forms.
60-04 Unusual Occurrences (UO)	Revised to align with procedures in LHHPP 22-01; and revised policy statement to state that any LHH employee may complete a UO report.
70-01 C9 Heat Emergency Plan	Revised to align with Public Health Emergency Preparedness and Response (PHEPR); and establish procedures for alerting the Nursing Office and monitoring high risk residents when the interior temperature in a care area reaches 80°F or higher.

Deleted Policies

<u>Policies</u>	<u>Comments</u>
50-01 Accounting Financial Standards	Delete from hospital-wide policy and convert to Accounting department policy.
50-05 Signature Card for Expense Payments	Delete from hospital-wide policy and convert to Accounting department policy.

Department: Nursing Services

Revised Policies

<u>Policies</u>	<u>Comments</u>
J 1.0 Medication Administration	Revised to reflect EHR workflow and clarify procedures for disposition of medications.

Department: Pharmacy Services

Revised Policies

<u>Policies</u>	<u>Comments</u>
02.01.02 Disposition of Medications	Revised to specify that “Pharmaceutical Waste Containers shall be used to dispose of any medications that are opened but not administered, including partially used medications and any remaining crushed, dissolved or disguised medications that are not hazardous.”

*The following policies and procedures have been reviewed by LHH and ZSFG Committees.

San Francisco Department of Public Health (SFPDH)

Revised Policies

<u>Policies</u>	<u>Comments</u>
Order Entry	Revised to incorporate medication ordering verbiage to outline the process for pharmacists when refusing to verify a medication order that has already been given by a nurse; and removed Nutrition from the list of non-providers who may write orders.