

## LEADERSHIP FUNCTION

<b>STANDARD</b>	<b>LD.1.6</b>
<b>EVIDENCE OF COMPLIANCE</b>	<p>The Organizational Plan for the Provision of Patient Care and Services enables the organization to ensure uniform performance.</p> <p>The Organizational Performance Improvement Plan provides for the review and improvement of patient care processes across the continuum of health care services provided throughout the organization.</p> <p>Medical Staff Bylaws address uniform care.</p> <p>CQI activities involve significant number of key personnel, including small CQI teams to standardize processes - evidenced during PI interview, Leadership interview and through CQI activities.</p> <p>Implementation of the Organizational Policy and Procedure Manual and Individual Departmental Policy and Procedure Manuals allows for uniform performance of patient care processes throughout the organization and, as appropriate, intra/inter departmental.</p> <p>Patient Care Standards of Practice are in place and allow for provision of uniform care.</p> <p>Implementation of Clinical Pathways provide for diagnosis specific uniform care.</p> <p>Protocols and Clinical Guidelines provide for uniform care specific to a given disease entity/patient condition.</p>
<b>SUPPORTING DOCUMENTATION</b>	<p>Copy of the Organizational Plan for the Provision of Patient Care and Services - located under LD.1</p> <p>Copy of the Organizational Performance Improvement Plan - located under LD.1</p> <p>Copy of Medical Staff Bylaws</p> <p>Copy of CQI Storyboard</p> <p>Organizational Policy and Procedure manual available in Administration and in all departments</p> <p>Department specific policy and procedure manuals available in each department</p> <p>Copy of organizational "Standards of Patient Service" policy and procedure</p> <p>Copy of Patient Care Standards</p> <p>Copy of Clinical Pathways</p> <p>Sample of Clinical Protocols/Guidelines</p>

SUBJECT: COMMUNITY NEEDS ASSESSMENT	REFERENCE #1017
DEPARTMENT: HOSPITALWIDE	PAGE: 1
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APPROVED BY:	EFFECTIVE:
	REVISED:

DETERMINATION OF HOSPITAL POPULATION AND AREA PROFILE:

- Define area of “community”
  - A definition of the area surrounding the hospital that will be known as the “community” must be established to determine extend of needs
- Obtain demographic information related to age, sex, race, annual income and level of education through research and survey of the community:
  - Information obtained through research and database analysis
  - Information obtained through public contract census survey
  - Aggregation of information
  - Analysis of aggregated report
- Identification of other health care providers within the community

List all health care providers offering services to the community, including for profit and not for profit agencies. The following list includes, but is not limited to, those agencies that are commonly operational in the community:

- Acute care facilities
- Ambulatory care facilities
- Clinics (urgent care, “free” clinics, mental health, wellness, etc.)
- Reference laboratories
- Extended care and rehabilitation facilities
- Board and care and retirement facilities
- Psychiatric/Dependence inpatient facilities
- Hospice facilities
- Identification of related resources within the community

Identification of those resources within the community that provide health related services. The following list includes, but is not limited to, those agencies that commonly provide resources to the public:

- Crisis Hotline centers
- Homeless shelters
- Women’s/Children’s shelters

SUBJECT: THE SCOPE OF SERVICES FOR THE ICU/CCU	REFERENCE #1097
DEPARTMENT: ICU/CCU	PAGE: 1 OF: 2
APPROVED BY:	EFFECTIVE:
	REVISED:

The Intensive Care/Coronary Care Units of \_\_\_\_\_ Hospital provide for care of the critically ill patient.

PATIENT POPULATION:

The patient population served by the ICU/CCU consists of the pediatric through the geriatric patient community.

COMPLEXITY OF CARE:

Admission to the ICU/CCU is based upon the need for intensive services in the presence of real or potential life-threatening health care problems and by the requirements for continuous observation and intervention to prevent complications and promote a return to health.

SCOPE OF SERVICES:

- The scope of services provided in the ICU/CCU includes invasive and non-invasive hemodynamic/cardiac/neurological monitoring.
- Cardiac invasive procedures do not include angiography/angioplasty.
- All patients are evaluated by a physician to determine the type and extent of care to be provided to the patient. In the event that the patient requires care that the ICU/CCU is unable to provide, the patient shall be transferred to a facility able to provide the required care. The physician shall make the necessary arrangements for transfer. Transfer processes are addressed in the departmental policy procedures.
- The ICU/CCU does not provide for psychiatric care; those patients admitted to ICU/CCU with a medical emergency related to an underlying psychiatric diagnosis shall be treated in the ICU/CCU until they are medically stable and evaluated by a psychiatric professional at which time they may be transferred to a psychiatric facility.

STAFFING:

(Example: Increase appropriately as required by your facility.)

- ICU/CCU maintains a fixed amount of four staff nurses to provide for patient care. The ratio of registered nurses to licensed vocational/licensed practical nurses shall be maintained at 1:1 or greater.

SUBJECT: ORGANIZATIONAL EDUCATION PLAN	REFERENCE #1113
DEPARTMENT: HOSPITALWIDE	PAGE: 1
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	REVISED:

POLICY:

It is the policy of \_\_\_\_\_ Hospital to plan for, support and coordinate a systematic approach to patient and family education throughout the Hospital. It is our belief that educating the patient and their family improves health care outcomes by enabling the patient or family to:

- Increase understanding of the patient’s health status;
- Increase compliance with the health care plan;
- More actively participate in the decision making process concerning health care options;
- Increase the family care skills and coping mechanisms along the continuum of care;
- Promote an overall healthy patient lifestyle; and
- Increase understanding of financial implications for treatment and other health care choices.

PROCEDURE:

All patients shall be assessed for learning needs at the time of admission to the hospital or service and reassessed throughout their stay with subsequent follow-up as appropriate. Each discipline providing care to the patient shall participate in the education of the patient.

- Multidisciplinary Educational Record

The Multidisciplinary Educational Record shall be used by all disciplines as a means to document teaching provided to the patient and family. The Educational Record shall be completed as follows:

- Date: The date that teaching occurred
- Learning Factors (culture, religion, readiness, barriers): These factors should be assessed and considered at the time of teaching. Documentation is required if one of these factors will interfere with the learning process, or if felt to enhance in terms of learning preference, the educational experience. The term “barriers” includes, but is not limited to: emotional barriers, desire and motivation to learn, physical or cognitive limitations, financial implications for health care choices and language and/or communication barriers.
- Identified Learning Need: The learning need shall be reassessed prior to each teaching/educational session. If a learning need is not met at the initial teaching session, it shall be identified and further teaching provided.

SUBJECT: HOSPITAL PERSONNEL RETENTION AND RECRUITMENT PLAN	REFERENCE #1122
DEPARTMENT: HOSPITALWIDE	PAGE: 1
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	REVISED:

- In keeping with the mission, vision and values of \_\_\_\_\_ Hospital, it is felt that optimum patient care and services can best be provided by personnel who are competent, adequately trained and qualified to perform health care related duties. To this end, it is understood that personnel members who maintain a high level of job satisfaction and embrace the philosophy of the organization will help foster the organization's mission. It is the belief of \_\_\_\_\_ Hospital that the patient's and family's perceptions of quality is generated by their interactions with the personnel. Therefore, every effort is made to recruit and retain personnel of the highest merit as representatives of this facility.
- Retention and recruitment planning is an ongoing process which is constantly evolving in tandem with the health care arena. Planning consists of the basic tenants of analyzing and considering information related to:
  - The patient population to be served and the scope and complexity of services required to meet the needs of this population.
  - Known or desired satisfaction and expectation levels of the patient, family and other consumers of health care provided by the organization.
  - Resources, support and current technology available throughout the organization to provide health care services.
  - The educational, training and learning needs of the personnel.
  - Information communicated from personnel to administrative representatives that influences decisions toward continued employment and/or job dissatisfaction.
- \_\_\_\_\_ Hospital is proud of the personnel who have chosen to associate themselves with the organization, and recognizes the difficulties presented to all members of the health care profession as they meet the complex needs of health service consumers. A focal point of the organization's retention and recruitment planning process is to identify and recognize, either financially and/or publicly within the organization, those individuals who have demonstrated an exemplary level of expertise, professional growth and advancement, achieved patient and/or peer satisfaction and improvement in job performance.
- It is also the philosophy of the organization that support, direction and education are more effective means of achieving personnel competency and promoting retention than measures that result in a punitive outcome.