

STAFFING SERVICES POLICY AND PROCEDURE MANUAL

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SUBJECT: ANNUAL AGENCY EVALUATION	REFERENCE #1006
DEPARTMENT: STAFFING SERVICES	PAGE: 1 OF: 1
APPROVED BY:	EFFECTIVE: REVISED:

PURPOSE:

To analyze the effectiveness of the organization’s administrative practices, policies and procedures including personnel, financial and program administration policies.

POLICY:

- _____ Agency conducts an annual comprehensive evaluation of the agency's functioning and performance relative to its written mission, philosophy and goals.
- The annual evaluation shall include objective and documented analysis of _____ Agency's compliance with any federal and state regulations, accreditation guidelines and/or compliance with any applicable third party payer requirements.

PROCEDURE:

- The CEO with input from the Board of Directors shall develop/select a comprehensive agency-wide evaluation tool that will provide for the collection of both subjective and objective data.
- A committee composed of managers/department heads and supervisors should evaluate agency compliance with written policies and procedures in the last fiscal quarter.
- Services and care will be evaluated for adequacy, effectiveness, efficiency and appropriateness.
- At least one (1) component of the evaluation process will be an objective and documented analysis of the agency’s compliance with regulatory agencies and/or applicable accrediting organizations.
- A written report shall be completed and submitted to the CEO at least one (1) month prior to the end of the fiscal year.

SUBJECT: CONTRACTED SERVICES	REFERENCE #1252
DEPARTMENT: STAFFING SERVICES	PAGE: 1 OF: 1
APPROVED BY:	EFFECTIVE: REVISED:

PURPOSE:

- To assure staffing services are provided in an efficient, consistent and competent manner to Agency clients.
- To verify compliance with laws and regulatory standards applicable to the care and/or services provided by _____ Agency through contractual arrangements.

POLICY:

- All contractual arrangements are reviewed and approved by the organization’s legal counsel before being signed by the appropriate individuals.
- Contracted care and services are monitored, evaluated and audited by _____ Agency to ensure that the care and services are in compliance with the terms of the contract and with the Joint Commission standards.
- The written agreement/contractual arrangements are defined in writing and include the following components:
 - The nature, scope and type of care and services to be provided.
 - The role and responsibilities of the Agency in establishing and assuring staff competencies.
 - The “floating” of personnel after assignment.
 - Responsibility of staff to comply with applicable organization policies, procedures, business practices and personnel qualifications.
 - The process by which the client may register a complaint with the Agency.
- The original contract for care and/or services provided through a contractual arrangement is retained in Administration, with a copy to the contracting facility.

SUBJECT: LICENSURE AND CERTIFICATION, VERIFICATION AND CONTROL SYSTEMS	REFERENCE #2003
	PAGE: 1 OF: 1
DEPARTMENT: STAFFING SERVICES	EFFECTIVE:
APPROVED BY:	REVISED:

POLICY:

- It is the policy of this Agency to employ only those individuals who have proper licensure, certification or registration by the appropriate agency in those jobs requiring such status.
- Furthermore, this status shall be maintained current by those individuals. The prospective staff member will furnish proof of this status before employment begins and will provide a photocopy of the document to the Agency, which will be placed on permanent record in the personnel file. At each time the status required updating and/or renewal, the staff member will provide further photocopies to the Agency Human Resources Department as proof of update and/or renewal.
- Failure on the part of the staff member to provide such documentation or proof of current status will result in one or more of the following actions on the part of the Agency:
 - Demotion to an available position closest to that normally held which does not require licensure, certification or registration
 - Suspension without pay until such documentation is received
 - Disciplinary action as deemed appropriate by the Clinical Care Manager

PROCEDURE:

- At the Time of Employment:
 - All newly hired staff members whose job requires licensure by the state or other proof of registry or certification. will provide a photocopy of such document to Administration/Human Resources. Verification is due upon demand by the Agency before the staff member may assume duties associated with such a license.
- Failure on the part of the staff member to provide this document will relieve the Agency of any employment obligations. The staff member will be considered unable to perform duties of the job requiring the document, or the date of hire will be adjusted to reflect the date the document is received.

SUBJECT: STAFF COMPETENCY	REFERENCE #2052
DEPARTMENT: STAFFING SERVICES	PAGE: 1 OF: 1
APPROVED BY:	EFFECTIVE: REVISED:

POLICY:

It is the policy of this organization to demonstrate, assess, maintain and improve staff competence on an ongoing basis. Additionally, a system for assuring the licensure, registration and certification required for patient care staff is continually maintained.

PROCEDURE:

- Competence assessment for staff providing care, treatment and services is based on the following:
 - Populations served:
 - Staff members must successfully complete competency assessments specific to the age ranges, cultural, ethnic and clinical conditions associated with the population serviced by the department staff as assigned.
 - The specific competencies required by the services provided and departmental scope in the department or unit in which the staff member works (i.e., treatment provided, infection control issues, medications, equipment).
 - The competencies that are to be assessed during orientation per the New Employee Orientation Policy.
 - The specified competencies that need to be assessed and reassessed on an ongoing basis, based on techniques, procedures, technology, equipment or skills needed to provide care, treatment and services within the given department to the specific patient population served by that department.
 - A successful completion of orientation and an annual competency assessment on a annual and as needed basis thereafter.

RESTRAINT APPLICATION/REMOVAL COMPETENCY CHECKLIST

ACUTE MEDICAL SURGICAL SETTING

Employee Name: _____ Department: _____

Date of Evaluation: _____ Evaluator: _____

Competency Issue	Yes	No	Comments
<ul style="list-style-type: none"> • Physically applies restraint appropriately: 			
<ul style="list-style-type: none"> • Soft wrist restraint 			
<ul style="list-style-type: none"> • Vest restraint 			
<ul style="list-style-type: none"> • Hard wrist restraint 			
<ul style="list-style-type: none"> • Hard leg restraint 			
<ul style="list-style-type: none"> • Chair restraint 			
<ul style="list-style-type: none"> • Physically releases restraint appropriately: 			
<ul style="list-style-type: none"> • Soft wrist restraint 			
<ul style="list-style-type: none"> • Vest restraint 			
<ul style="list-style-type: none"> • Hard wrist restraint 			
<ul style="list-style-type: none"> • Hard leg restraint 			
<ul style="list-style-type: none"> • Chair restraint 			
<ul style="list-style-type: none"> • Attempts appropriate alternatives to restraint 			
<ul style="list-style-type: none"> • Demonstrates understanding of: 			
<ul style="list-style-type: none"> • Appropriate restraint orders, including time-frames per hospital policy 			
<ul style="list-style-type: none"> • Underlying causes of threatening behaviors exhibited by patients 			
<ul style="list-style-type: none"> • Threatening behavior exhibited due to medical conditions, can cite examples of disease processes causing this behavior 			
<ul style="list-style-type: none"> • How employee's own behavior can affect the behavior of the patient 			