

HealthTech

Nurse Leader

March Issue

Nursing Policies and Procedures

Editors:

Carolyn St.Charles

RN, BSN, MBA

Chief Clinical Officer

Carolyn.stcharles@health-tech.us

Cheri Benander

RN, MSN, CHC, C-NHCE

Director of Clinical Services

Cheri.benander@health-tech.us

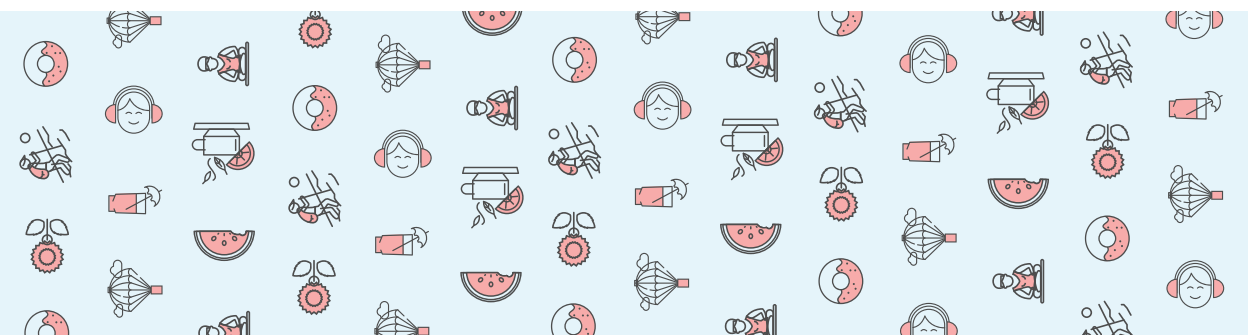
Faith Jones

RN, MSN, NEA-BC

Director, Care Coordination & Lean Consulting

Faith.jones@health-tech.us

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Review and Approval of Nursing Policies and Procedures (P&Ps)

C-1006 §485.635(a) and C-1008 §485.635(a)(2)(a)(4) requires that P&Ps must be reviewed every two years (or more frequently for new policies or revisions of current policies) by an advisory group that includes at a minimum:

- At least one MD or DO; and,
- One or more physician assistants, nurse practitioners, or clinical nurse specialists, if these professionals are included in the CAH's healthcare staff.

The P&Ps must be approved by the governing board based on the recommendations of the advisory group.

Given the number of P&Ps in a typical hospital, this can be a daunting process.

Consider the following strategies for managing the review and approval of P&Ps.

1. Use a policy management system. This can help keep track when a policy is due for review and track the review and approval process.
2. Don't duplicate nursing policies in each department. Identify policies that apply to all nursing units. This prevents conflicting policies when regulatory requirements or evidence-based care changes.
3. If at all possible, review policies for all nursing departments at the same time. By reviewing policies together, it allows the opportunity to reduce redundancy and conflicts between policies.
4. Consider using a nursing text for procedures. However, if you do use a nursing text it is important to:
 - Write a policy with the name of the nursing text you will be using
 - Instead of a specific edition date for the nursing text, cite the "most recent"
 - List the specific procedures that will be followed in the text
 - Keep a hard copy on each nursing unit
5. For physician and mid-level review develop a list of P&Ps by name with information for each policy like the example on the next page. Although it may be time consuming the first year, it will be much easier in subsequent years since you will already have a list of P&Ps.

The same grid can be used for approval by the governing board with the addition of recommendations from the physician and mid-level review.

Name of Policy Policy Number	Last Review	Changes in Regulatory Standards or Evidence-Based Care since last review	Recommended Revisions	Reviewed and approved by:
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> None <input type="checkbox"/> Grammar and Formatting <input type="checkbox"/> Major Revisions	<input type="checkbox"/> CNO <input type="checkbox"/> Manager of Dept <input type="checkbox"/> Medical Director <input type="checkbox"/> Other

- Utilize Medical Directors, if they are not a member of the P&P Committee, to review and make recommendations for approval of P&Ps. This is especially important for specialty departments such as surgical services and obstetrics.

Compliance with P&Ps

C-1006 §485.635(a) states that the CAH’s health care services are furnished in accordance with appropriate written policies that are consistent with applicable State law.

It is critical that there are not only P&Ps in place that are current, but that the P&Ps are followed. When P&Ps are reviewed and compared to current practice, unfortunately, they don’t always match. This can occur when P&Ps are not revised when there are changes to EMR documentation templates, or there are changes in equipment or supplies, or there are new evidence-based practices implemented.

To help ensure that policies are followed they must be current and written in a way that makes them easy to find, easy to read and easy to implement. Consider the following strategies:

- Use consistent formatting.
 - Name: Easy to find name that is searchable
 - Header: Effective date/ revision date/ dept.
 - Policy: Statement of what is intended
 - Definitions: CRITICAL – allows reader to understand terms
 - Procedure: How to implement the policy – step-by-step guide
 - References: Source documents (must be current)
 - Cross-Reference: Other P&Ps referenced
- Reduce redundancy and conflicts.
 - Before writing a new policy review to see if there are other policies that cover the same topic with similar content. Don’t write a new policy if a current policy can be revised.
 - Before revising a current policy, take the opportunity to see if the policy can be combined with another policy.
 - Before writing a new policy or revising a current policy, take the opportunity to see if there are conflicts with other policies

3. Use simple and concise language.
 - Don't use a complex word if a simple word will do
 - Write clear concise sentences – one sentence - one thought
 - Don't write compound sentences with multiple commas and semi-colons
 - After you write the policy – ask the end-user to read the policy to see if it is clear, accurate, and can be followed
4. Ensure P&Ps reflect evidence based care.

Although there are specific references in the CoPs for required P&Ps, there are numerous references to evidence-based care or standards of practice.

For example, C-0880 states,

“Acceptable standards of practice include maintaining compliance with applicable Federal and State laws, regulations, and guidelines governing all services provided in the CAH’S emergency department, as well as any standards and recommendations promoted by or established by nationally recognized professional organizations such as:

- *American Medical Association (<https://www.ama-assn.org>)*
- *American Association for Respiratory Care (<https://www.aarc.org>)*
- *American Society of Emergency Medicine (<https://www.aaem.org>)*
- *American College of Surgeons (<https://www.facs.org>)*
- *American Nursing Association (<https://www.nursingworld.org/ana>)”*

Assigning a content leader to stay up-to-date with evidence-based care in their area or department, facilitates timely revisions to P&Ps when needed.

5. Educate nursing staff.

Whenever a P&P is revised or a new policy is developed, education for nursing staff must occur before the P&P is implemented. The type of education should be tailored to the type of policy and its criticality. For a simple change, having each nurse sign the policy to attest they have read the policy may be sufficient. For a new policy or for a significant changes in an existing policy, didactic education as well as competency may be required.

Moving Forward

We hope that these tips help you on your journey to make developing and approving P&Ps more functional and streamlined. Please contact us if you have any questions.



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HealthTech

Your hospital transformation
starts with a conversation.

carolyn.stcharles@health-tech.us
Phone: 360.584.9868

www.health-tech.us
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