Table of Contents

- Some items in the Table of Contents are indicated as "updated" or "new." This means that these policies and procedures (P&Ps) have been updated or created since the previous edition of *PolicySource*. These changes reflect updates in the Joint Commission standards and elements of performance for hospital and critical access hospital accreditation. **Note:** All P&Ps have been updated to improve accessibility.
- Those items with a paper clip icon ① are not P&Ps themselves but supplementary materials or attachments for a particular P&P. Not every P&P has such attachments, but that does not prohibit someone using *PolicySource* to create their own ancillary materials for any of their own P&Ps.

Introduction to PolicySource™	1
Sample Policies and Procedures for Hospital and Criticial Access Hosp	ital
Environment of Care (EC)	21
Environment of Care Plan	
Active Threat Response Procedures	
Workplace Violence Prevention Plan	
Smoke-Free Policy	
Hazardous Material Spill Response Procedures	
Fire Response Plan	
Fire Drill Procedures	
Fire Drill Scheduling Tool	
Fire Safety Equipment and Building Features Maintenance Policy	
Medical Equipment Failure Response Procedures	
<u>Utility System Disruption Response Procedures</u>	
Ventilation in Critical Care Areas Policy	
Critical Care Area Environmental Log	
Legionella and Other Waterborne Pathogens Management Plan	

Water Risk Management Plan

Legionella Sample Data Sheet

- Providing Emergency Power to Medication Dispensing Equipment Policy
- Emergency Backup for Medication Refrigeration Policy
- Emergency Lighting System, Exit Sign, and Emergency Generator Testing Procedures
- Piped Medical Gas and Vacuum System Management Policy
- Compressed Gas Cylinder Management Policy
- Infection Control During Construction Policy
 - Infection Control Measures Evaluation Checklist
- Environmental Safety Management Processes
- Environment of Care Management Plan Annual Evaluation Process

<u>Er</u>	nergency Management (EM)	25
•	Emergency Management Program Development Plan	
	© Compliance Assessment Checklist of Emergency Management Standards	
•	Unified and Integrated Emergency Management Plan	
•	Hazard Vulnerability Analysis Policy	
•	Emergency Operations Plan	
	After-Action Report	
•	1135 Waiver Request Procedures	
•	Emergency Communications Plan	
	Patient Emergency Tracking Log	
•	Emergency Response Staffing Plan	
•	Plan for Patient Care and Clinical Support During an Emergency	
	Application and Approval Form to Serve as an Emergency Volunteer	
•	Plan for Managing Safety and Security During an Emergency	
•	Plan for Managing Resources and Assets During an Emergency	
•	Plan for Managing Utilities During an Emergency	
•	Continuity of Operations Plan	
•	Disaster Recovery Plan	
•	Emergency Management Education and Training Policy	
<u>H</u>	uman Resources (HR)	28
•	Staff Orientation Plan	
<u>In</u>	fection Prevention and Control (IC)	29
•	UPDATED! Health Care-Associated Infections Management Policy	
	NEW! Compliance Assessment Checklist of IC Standards	
•	NEW! Policy for Cleaning, Disinfecting, and Sterilizing Reusable Medical and Surgical Devices and Equipment	
•	NEW! Protocols to Prepare for High-Consequence Infectious Diseases or Special Pathogens	
	NEW! Assessment Checklist for High-Consequence Infectious Diseases Preparedness	
•	UPDATED! Staff Vaccination Policy	
<u>In</u>	formation Management (IM)	30
•	Information Systems Interruption Management Plan	
	New Technology Decision Checklist	
•	Confidentiality and Security of Health Information Policy	
•	Remote Patient Monitoring Policy	
Le	eadership (LD)	31
•	Conflict of Interest Policy	
•	Code of Conduct Policy	
•	System or Process Failures Response Policy	
•	Ionizing Radiation Safety Policy	
•	Patient Flow Management Policy	

Life Safety (LS)	32
Interim Life Safety Measures Policy	
Medication Management (MM)	33
Accessibility of Patient Information Policy	
High-Alert and Hazardous Medications Management Policy	
Medication Substitution Protocols	
Medication Control Policy	
Medication Orders Policy	
Medication Titration Orders Policy	
Sterile Compounding Policy for Nonhazardous and Hazardous Medications	
Sterile Compounding Staff Competency Procedures	
Medication Compounding Quality Assurance Program	
Recalled Medication Management Policy	
Medication Administration Procedures	
Self-Administered Medications Policy	
Investigational Medications Management Policy	
Medication Event Response Policy	
Medication Event Incident Report	
Automatic Dispensing Cabinets Override Review Policy	
Plan for Developing an Antibiotic Stewardship Program	
 Medical Staff (MS) Medical Staff Bylaws, Rules, and Regulations Policy Emergency Appraisal Treatment and Referral Policy Graduate Medical Education Supervision and Accountability Policy Clinical Privileges Application Processing Procedures Dissemination of Privileging Decisions Policy Temporary Privileges Policy Focused Professional Practice Evaluation Policy Ongoing Professional Practice Evaluation Policy Clinical Practice Investigations and Corrective Action Policy Adverse Decision Appeal Policy 	
National Patient Safety Goals (NPSG)	38
Critical Diagnostic Test Results Management Policy	
Anticoagulation Management Policy	
Medication Reconciliation Policy	
Clinical Alarm Management Policy	
UPDATED! <u>Hand Hygiene Policy</u>	
UPDATED! Suicide Risk Management Assessment and Prevention Policy	
Plan for Improving Health Care Equity	
Preprocedure Verification Procedures	
Preprocedure Verification Form	
Surgical Site Marking Alternative Procedures	
Surgical Time-Out Procedures	

<u>Nur</u>	rsing (NR)	40
•	Nurse Staffing Plan Development Policy	
•	Nursing Policies and Procedures Development Policy	
Pro	ovision of Care, Treatment, and Services (PC)	41
•	Initial Assessment Procedures	
	Fall Risk Assessment Form	
	Suicide Risk Assessment Form	
•	Fall Risk Assessment and Mitigation Policy	
•	Abuse and Neglect Assessment Procedures	
•	Individualized Care Plan Development Procedures	
•	UPDATED! Adult Electroconvulsive Therapy Policy	
•	Patient Behavior Management Policy	
•	Blood Transfusion Policy	
•	Resuscitation Services Policy	
•	Recognizing Early Warning Signs of Change or Deterioration in Patient Condition Policy	
•	Post-Resuscitation Care Procedures	
•	Anesthesia Services Policy	
•	Specimen Management Policy	
•	Restraint and Seclusion Policy	
	Restraint and Seclusion Decision Checklist	
•	Discharge Planning Policy	
•	Blood Handling Policy	
•	Maternal Hemorrhage Risk Assessment Policy	
•	Maternal Hemorrhage Management Procedures	
	Maternal Hemorrhage Cart Checklist	
•	Maternal Blood Pressure Measurement Procedures	
•	Procedures for the Management of Severe Maternal Hypertension/Preeclampsia	
	Severe Maternal Hypertension/Preeclampsia Debriefing Form	
<u>Per</u>	rformance Improvement (PI)	44
•	Performance Improvement Plan	
Rec	cord of Care, Treatment, and Services (RC)	45
•	Medical Record Entry Authentication Policy	
•	Medical Record Timeliness Policy	
•	Medical Record Retention Policy	
	thts and Responsibilities of the Individual (RI)	46
	Patient Rights Policy	
•	UPDATED! Visitor Policy During Infectious Disease Surge	
	© COVID-19 Visitor Prescreening Checklist	
	Patient Right to Decision-Making Policy	
•	Informed Consent Policy	

•	Mistreatment and Misappropriation Prohibition Policy
•	Patient Responsibilities Policy
Tr	ansplant Safety (TS)
•	Affiliated Organ Procurement Organization Policy
•	Identifying Opportunities for Asystolic Recovery of Organs for Donation Policy
•	Family Notification of Organ Donation Procedures
•	Tissue Adverse Events Investigation Procedures
w	/aived Testing (WT)
•	Waived Testing Policy
•	Waived Testing Quality Control Policy
•	Waived Testing Competency Assessment Policy
Re	esources 49
•	General Sources
•	<u>Plan Template</u>
•	Policy and Procedures Evaluation Checklist
•	Policy and Procedures Inventory Template
•	Policy Template
•	Procedures Template
•	UPDATED! Required Written Documentation Chapter for CAMCAH
•	UPDATED! Required Written Documentation Chapter for CAMH
•	Scoring Rubric to Assess P&Ps

Advance Directives Policy