

**SUBJECT: POLICIES****EFFECTIVE DATE:** April 1, 1998**REVISION DATES:** March 23, 1998; August 13, 2001; October 8, 2002; January 13, 2004; January 14, 2005; February 6, 2007; March 6, 2008; May 29, 2009; September 12, 2011, January 27, 2012, January 31, 2013; June 6, 2014**REVIEW DATES:** April 8, 2008; May 29, 2009; December 2010; September 12, 2011; January 27, 2012; January 31, 2013; June 6, 2014; May 21, 2015; May 9, 2016**POLICY STATEMENT:**

Cabarrus Health Alliance Board will approve policies to address personnel, administrative, fiscal operations and all other programs and procedures provided by the agency. Policies/procedures will be developed prior to beginning new programs or operations, when changes occur, and/or when required by law or legislation.

The purpose is to provide guidance and direction for development of policies and procedures governing the operation of the Cabarrus Health Alliance. Policies, procedures, and standing orders will be developed in a systematic manner:

- to ensure that standards of care are upheld
- to translate the mission into practical terms
- to provide a standard of practice with legal protection
- to establish staff expectations of self and others
- to provide a framework for consistency in methods of practice, personnel, fiscal operations, management and public health programs
- to establish guidelines in accordance with state statutes and applicable rules and regulations

**DEFINITIONS:**

Board Policies:

- Personnel and fiscal policies/procedures
- Local Rules
- Policies affecting the operation of the Board

Administrative and/or Agency Policies:

- A broad general statement describing management's decisions and expectations for actions. A policy may be written with or without an accompanying procedure.
- A course of action adopted by and pursued by an agency that guides and determines present and future decisions and actions.
- Indicate the general course or direction of an organization within which the activities of the personnel must operate.
- A tool that helps employees attain agency goals: the "what" and "why" of the goals or intent of the agency.

- Include the objectives, rules, and regulations which guide organizational activities and direct allocation of resources.
- Consistent with the agency mission statement.

Program Policies:

- Includes the objectives and rules, which direct a specific program focus and activities.
- Consistent with state and/or federal guidelines/rules and overall agency goals.

Procedures:

- The detailed and sequential actions that must be executed to ensure that a policy is implemented.
- The method of performing an operation or a manner of proceeding on a course of action.
- Directs actions required to perform a specific task within the guidelines of the policy.
- Describes the “how, who, when or where” through which policies are carried out.
- Consistent with policy statements and standard of practice as appropriate.

Standing Orders:

- The signed instructions of a physician which outline the medical assessment, appropriate testing, treatment, and referrals that a clinician may perform or deliver on behalf of a physician.
- Serve to standardize the care provided by all clinicians.
- Provide the framework to assess and treat disease while practicing at the Cabarrus Health Alliance.
- Allow appropriate clinicians to determine, based on parameters identified in the standing order, whether a specified condition exists, thus indicating the need to execute the order.
- Standing orders may not call for the Public Health Nurse to assess beyond the level of normal vs. abnormal.

**PROCEDURE:**

1. Define the issue, problem or task, and need for a policy or need for policy revision.
2. Determine who has the responsibility for writing the policy/procedure.
3. Program and/or Management staff are responsible for policy oversight.
4. All disciplines of the program/department staff involved in carrying out or affected by the policy/procedure should be included in the policy review and/or development.
5. The Medical Director will be involved when developing policies, standing orders and procedures related to clinical services.
6. The State consultants may be involved when developing policies related to state mandated programs.
7. Appropriate rules, regulations and/or standards of practice will be referred to as needed. Legal review by the Cabarrus Health Alliance attorney may be requested by the Health Director/CEO or Cabarrus Health Alliance Board.
8. When policies that affect community-at-large are developed, steps will be taken to obtain community input prior to the final adoption of the policy.
9. The templates provided in *Attachment A* will be used when beginning with new policies,

procedures, or standing orders and updating earlier policies to the current templates when revised.

10. Write draft of policy/procedure/standing order, allow for appropriate review and revision as necessary prior to final review.
11. Adopt policy/procedure/standing order according to the level of decision-making outlined in *Attachment B*.
12. Distribute and provide education regarding the policy/procedure/standing order. Distribution can be by one of the following: staff meeting, supervisor, division conference, employee mail boxes, email, Leadership Team meeting minutes, or Cabarrus Health Alliance Board meeting minutes.
13. All staff will receive training on policies upon hire, during orientation or by supervisor, and as new policies are developed or existing policies are revised.
14. Policies will be reviewed and signed at least annually or whenever changes occur. Administrative, personnel, and multiple departmental policies will be reviewed by the responsible personnel. Program specific policies will be reviewed by the program coordinator or the supervisor that developed and signed the policy initially. Standing orders will also be reviewed and signed annually by the Medical Director.
15. Policies and procedures can be reviewed /revised more often as required by changing technology, rule or law changes, changes in standard of practice, etc.
16. Revision will be documented as such and distributed to all individuals who are impacted by the policy/procedure.
17. Original policies will be placed in the Cabarrus Health Alliance Policy and Procedure Manual, the CHA Standing Orders Manual or departmental specific filing system.
18. Most current policies, procedures, and standing orders are also accessible to the staff via the Cabarrus Health Alliance Intranet.
19. Upon revision, the out-dated original policies/procedures will be archived within the agency for future reference.

---

Date

---

CEO/Public Health Director

**ATTACHMENT A**

I. The following format is to be used for all written policies.

<p><b>SUBJECT:</b></p> <p><b>EFFECTIVE DATE:</b></p> <p><b>REVISION DATE:</b></p> <p><b>REVIEW DATE:</b></p> <p><b>POLICY STATEMENT:</b> (Concise statement of the “rule”, definitions as applicable, role identification if applicable, and any exceptions to the policy)</p> <p><b>REFERENCES:</b> (If applicable)</p> <p><b>SIGNATURES WITH DATES:</b></p>
---

II. The following format will be used for written procedures:

<p><b>SUBJECT:</b> (Title of procedure)</p> <p><b>EFFECTIVE DATE:</b></p> <p><b>REVISION DATE:</b></p> <p><b>REVIEW DATE:</b></p> <p><b>POLICY STATEMENT:</b> (Rationale for the procedure, expected outcome, who is involved, etc.)</p> <p><b>PROCEDURE TO BE FOLLOWED:</b> (Steps to take, location of equipment, education to be given, referral to be made, documentation, etc.)</p> <ol style="list-style-type: none"><li>1.</li><li>2.</li><li>3.</li></ol> <p><b>REFERENCES:</b> (If indicated)</p> <p><b>DATE/SIGNATURES</b></p>
--

III. The following format is to be used for all standing orders:

STANDING ORDER FOR (general statement of the situation or condition for which the Standing order is to be used)

EFFECTIVE DATE:

REVISION DATE:

REVIEW DATE:

ASSESSMENT:

1. Subjective findings - (list those complaints for clients which are consistent with the identified health care problem)
2. Objective findings - (list those findings which support the presence of the identified health care problem)

PLAN OF CARE:

1. Implementation: State the medical treatment/pharmaceutical or lab testing procedures to be carried out based on the subjective and objective findings listed above. List any known contraindications to the treatment or procedure.
2. Nursing Actions: State intervention which focuses on the client's self-care regarding response to illness, potential illness and/or treatment. Teaching may include awareness of side effects of treatment and criteria for contacting the physician.
3. Criteria for Calling the Physician: Include a statement such as "if there is any question about whether to carry out any treatment, lab, or other provisions of the standing order contact the physician". May list any known situations or conditions for which the physician should be contacted prior to carrying out the standing order.
4. Follow up Requirements: State any follow up testing, rescreening or referral which is routinely required.

Legal authority: Nurse Practice Act, G.S. 90-171.20 (7) (f) & (8) (c)

DATE / SIGNATURE of Medical Director

**ATTACHMENT B**

**Levels of Authority for Approval of Policies/Procedures:**

Cabarrus Health Alliance Board	Personnel and fiscal policies/procedures, Local Rules, Board policies
Public Health Director/CEO	Administrative and department-wide policies
Medical Director	Standing orders and clinical medical policies
Leadership Team, Program Coordinators and/or Supervisors	Program specific policies/procedures