



SVHCD QUALITY COMMITTEE

AGENDA

WEDNESDAY, JUNE 28, 2023

5:00 p.m. Regular Session

TO BE HELD VIA ZOOM VIDEOCONFERENCE

To Participate Via Zoom Videoconferencing
use the link below:

<https://sonomavalleyhospital-org.zoom.us/j/91601200156?pwd=cXYzdUs2MEZnS2xHVUJyL3phWWdGQT09.>

and Enter the **Meeting ID: 916 0120 0156**
Passcode: 891667

To Participate via Telephone only, dial:
1-669-900-9128 or 1-669-219-2599

AGENDA ITEM	RECOMMENDATION	
In compliance with the Americans with Disabilities Act, if you require special accommodations to attend a District meeting, please contact the District Clerk, Monique Crayton, at mcrayton@sonomavalleyhospital.org or 707.935.5005 at least 48 hours prior to the meeting.		
MISSION STATEMENT <i>The mission of the SVHCD is to maintain, improve, and restore the health of everyone in our community.</i>		
1. CALL TO ORDER/ANNOUNCEMENTS	<i>Kornblatt Idell</i>	
2. PUBLIC COMMENT SECTION <i>At this time, members of the public may comment on any item not appearing on the agenda. It is recommended that you keep your comments to three minutes or less. Under State Law, matters presented under this item cannot be discussed or acted upon by the Committee at this time. For items appearing on the agenda, the public will be invited to make comments at the time the item comes up for Committee consideration.</i>	<i>Kornblatt Idell</i>	
3. CONSENT CALENDAR • Minutes 05.24.23	<i>Kornblatt Idell</i>	Action
4. ED QA/PI	<i>Winkler</i>	Inform
5. QUALITY INDICATOR PERFORMANCE AND PLAN	<i>Cooper</i>	Inform
6. POLICIES AND PROCEDURES	<i>Cooper</i>	Inform
7. MEETING DATES FOR THE BALANCE OF 2023	<i>Kornblatt Idell</i>	Inform
8. CLOSED SESSION: a. Calif. Health & Safety Code §32155: Medical Staff Credentialing & Peer Review Report	<i>Kornblatt Idell</i>	Action
9. ADJOURN	<i>Kornblatt Idell</i>	



**SONOMA VALLEY HEALTH CARE DISTRICT
QUALITY COMMITTEE**

May 24, 2023, 5:00 PM

MINUTES

Via Zoom Teleconference

Members Present – Via Zoom	Members Present cont.	Excused	Public/Staff – Via Zoom
Susan Kornblatt Idell Carol Snyder Kathy Beebe, RN PhD Michael Mainardi, MD Howard Eisenstark, MD Ingrid Sheets, EdD, MS, RN Carl Speizer, MD Judith Bjorndal, MD			Jessica Winkler, DNP, RN, NEA-BC, CCRN-K, CNO Kylie Cooper, RN, BSN, CPHQ, MBA, Quality and Risk Mgmt. John Hennelly, CEO Sujatha Sankaran, MD, CMO Dave Young, Director of Diagnostic Services,

AGENDA ITEM	DISCUSSION	ACTION
1. CALL TO ORDER/ANNOUNCEMENTS	<i>Kornblatt Idell</i>	
	Meeting called to order at 5:02 p.m.	
2. PUBLIC COMMENT	<i>Kornblatt Idell</i>	
	None	
3. CONSENT CALENDAR	<i>Kornblatt Idell</i>	Action
<ul style="list-style-type: none"> QC Minutes 04.26.23 		MOTION: by Snyder to approve, 2 nd by Beebe. All in favor.
4. IMAGING QA/PI	<i>Young</i>	Inform
	Dave Young, Director of Diagnostic Services provided an update on Diagnostic Services which included an overview of the 2023 CIHQ Quality Measures and Stroke Program performance improvement.	
5. QUALITY INDICATOR PERFORMANCE PLAN	<i>Cooper</i>	Inform

	Ms. Cooper shared the quality indicator performance for the month of April 2023. She mentioned that there was an increase in re-admissions for the month. Staff will meet with nursing facilities to discuss an improvement plan.	
6. CENTER FOR IMPROVEMENT IN HEALTHCARE QUALITY CORRECTIVE ACTION PLAN	<i>Cooper</i>	Inform
	Ms. Cooper presented and discussed the recent CIHQ accreditation visit and corrective action plan. The corrective action plan to address the statement of deficiencies was submitted and had been formally accepted as of May 6 th . Board Quality will be presented monthly the progress of the corrective action plan. Ms. Cooper went on to enthusiastically announce that the hospital had been re-accredited by the Center for Improvement in Healthcare Quality for the next three years.	
7. POLICIES AND PROCEDURES	<i>Cooper</i>	Inform
	<p>Summaries of changes were reviewed for the following policies:</p> <p><u>NEW</u></p> <p>International Dysphagia Diet Standardization Initiative (IDDSI) Nutrition Orders Crosswalk MRI With Contrast - Containing Gadolinium</p> <p>AccuChek Inform II Glucose Monitoring System Amended Reports 7500-02 Approved Reference Labs 7500-06 Audibility of Clinical Monitoring Intervention Alarm Systems Automatic Stop Orders Care of Unassigned Unaffiliated Metabolic Bariatric Surgery Patients Code Grey - Aggressive Behavior Management Code Silver - Hostage-Active Shooter Damaged Equipment, Management of</p>	

	<p>Diet Manual Diet Office-Dietitian Availability Documentation in the Intensive Care Unit General Rules for the Safe Use of Radioactive Material new template 7630-151 Hot Lab Requirements 7630-153 Informed Consent Interpreter Services Line Draws Maggot Debridement Therapy Management of Patients in Corridor Locations PC8610-144 Nuclear Medicine Department Security Nuclear Medicine Equipment Calibrations Nuclear Medicine Procedures Nuclear Medicine Safety Measures Nuclear Medicine Studies 7630-187 Nutritional Products Patient's Own Medication Procedure 8390-07 Patient's Rights to Visitation Personnel Responsibility and Accountability 7500-42 Pulmonary Function Testing Recording Nutritional Information in the Medical Records Recording Thermometer Documentation, Failure and Back Up Scope of Services Surgical Case Review Use of Medication Not Procured by the Facility Utilization Review Plan Vapotherm High Flow System Visits, Admissions, Readmissions, Transfers Through the Emergency Department</p>	
<p>8. CLOSED SESSION/REPORT ON CLOSED SESSION</p>	<p><i>Kornblatt Idell</i></p>	<p>Action</p>
<p>a. Calif. Health & Safety Code §32155: Medical Staff Credentialing & Peer Review Report</p>	<p>Medical Staff Credentialing was reviewed and approved. In addition, there was a motion to approve Dr. Andrew Desruisseau as the Infectious Disease Medical Director.</p>	<p>MOTION: by Bjorndal to approve, 2nd by Mainardi. All in favor.</p>



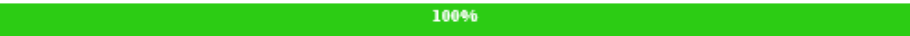













	Dr. Desruisseau will oversee the Infection Control Program and the Antimicrobial Stewardship Program.	
9. ADJOURN	<i>Kornblatt Idell</i>	
	Meeting adjourned at 6:19 p.m.	

Quality Indicator Performance & Plan







June Board Quality

Data for May 2023

Mortality

Mortality									
Indicator	Performance	Most Recent	Trend	Period	🕒	🔔	📊	☰	☰
Acute Care Mortality Rate (M)		Target Met	1.6%	📈 Improved	May 2023	15.3%	n/a	n/a	2.5%
History			1/62						
COPD Mortality Rate (M)		Target Met	0.0%	➡ No Change	May 2023	8.5%	n/a	n/a	0.0%
History			0/3						
Congestive Heart Failure Mortality Rate (M)		Target Met	0.0%	➡ No Change	Apr 2023	11.5%	n/a	n/a	2.0%
History			0/3						
Pneumonia Mortality Rate (M)		Target Met	0.0%	📈 Improved	May 2023	15.6%	n/a	n/a	4.5%
History			0/2						
Ischemic Stroke Mortality Rate (M)		Target Met	0.0%	➡ No Change	May 2023	13.8%	n/a	n/a	0.0%
History			0/4						
Hemorrhagic Stroke - Mortality Rate (M)		Target Met	0.0%	➡ No Change	Apr 2023	0.0%	1.0%	n/a	18.2%
History			0/1						
Indicator	Performance	Most Recent	Trend	Period	🕒	🔔	📊	☰	☰
Sepsis, Severe - Mortality Rate (M)		Target Met	0.0%	📈 Improved	May 2023	25.0%	n/a	n/a	2.4%
History			0/1						
Septic Shock - Mortality Rate (M)		Target Met	0.0%	➡ No Change	May 2023	25.0%	n/a	n/a	12.5%
History			0/0						

AHRQ Patient Safety Indicators

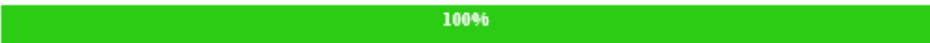


Indicator	Performance	Most Recent	Trend	Period	⊙	🔔	📊	⌘	
PSI 90 (v2021) Midas Patient Safety Indicators Composite, ACA (M)	 History 	 Target Met	0.00 0/0.005	— No Change	May 2023	0.00	n/a	n/a	0.00
PSI 90 (v2021) Patient Safety Indicators Composite, ACA - Volume (M)	 History 	 Target Met	0	— No Change	May 2023	0	n/a	n/a	0

The Patient Safety Indicators 90 (PSIs)

- PSI 03 Pressure Ulcer
- PSI 06 Iatrogenic Pneumothorax Rate
- PSI 08 In Hospital Fall with Hip Fracture
- PSI 09 Perioperative Hemorrhage or Hematoma
- PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis
- PSI 11 Postoperative Respiratory Failure
- PSI 12 Perioperative Pulmonary Embolism or DVT
- PSI 13 Postoperative Sepsis
- PSI 14a Postoperative Wound Dehiscence, Open
- PSI 14b Postoperative Wound Dehiscence, Non-Open
- PSI 15 Accidental Puncture or Laceration

Adverse Events Reporting

- Zero Adverse events including Pre-Op/Post Op discrepancies, adverse events from Anesthesia or operative adverse events

Indicator	Performance	Most Recent	Trend	Period	📍	🔔	📊	📄	
Adverse Event SE (M) volume	 100%	 Target Met	0	— No Change	May 2023	0	1	n/a	0
History									

Blood Products

Lab | Transfusion Effectiveness (M)



100.0%
6/6

No Change

May 2023

100.0%

99.0%

n/a

98.1%

Lab | Transfusion Reaction (M)



0.0%
0/31

No Change

May 2023

0.0%







1.0%

n/a

0.3%

Significant Medication Errors and Adverse Drug Reactions

■ No Adverse Drug Reactions

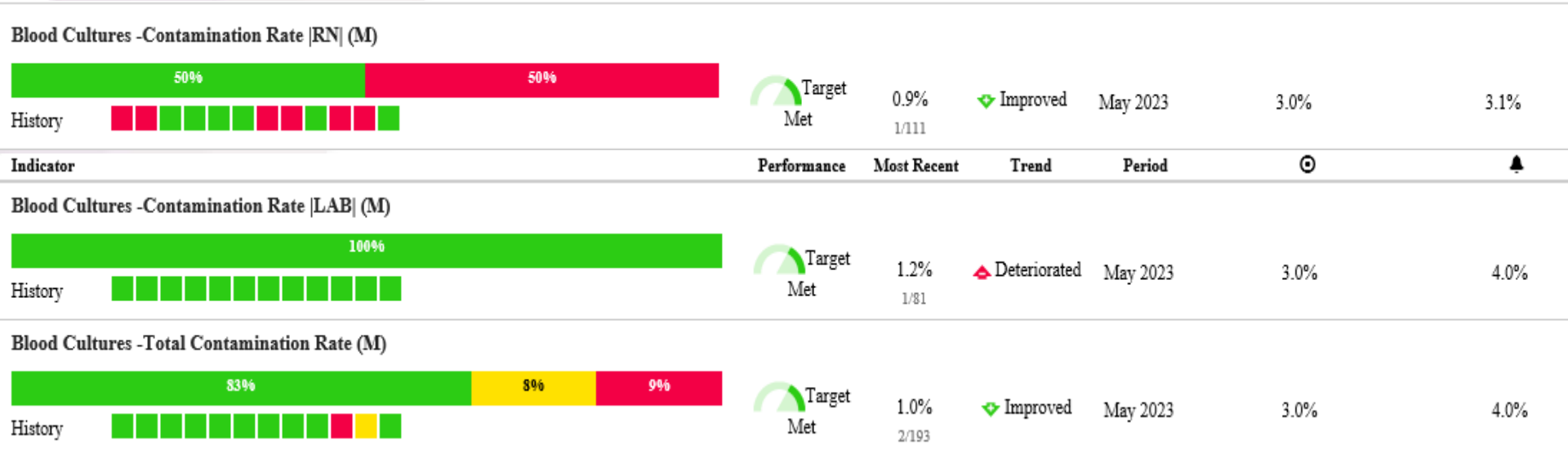
Indicator	Performance	Most Recent	Trend	Period	⊙	▲	▒	⌘
Rx-ADEs-High Risk Med Errors Per 10,000 Doses (M)		0.17 1/58401	▲ Deteriorated	May 2023	1.13	2.00	n/a	0.13
History								
Rx-Administration Errors Per 10,000 Doses Dispensed		0.00 0/58401	▬ No Change	May 2023	1.00	3.00	n/a	0.32
History								

Patient Falls

Preventable Harm

Indicator	Performance	Most Recent	Trend	Period	🕒	🔔	📊	☰
RM ACUTE FALL- All (M) per 1000 patient days	 History	Target Met 0.00 0/280	Improved 	May 2023	3.75	4.00	n/a	2.15
RM ACUTE FALL- WITH INJURY (M) per 1000 patient days	 History	Target Met 0.00 0/280	No Change 	May 2023	3.75	4.00	n/a	0.00




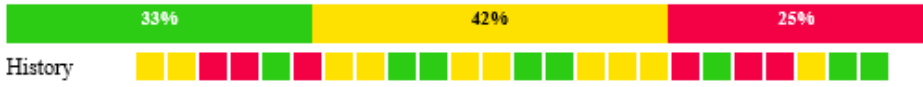
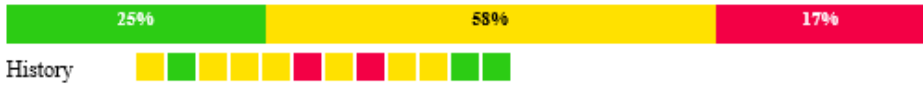
Blood Culture Contamination



Month	RN-Contaminated Culture Reports (num)	Blood Cultures Drawn by RN (den)	Percent
May 2023	1	111	0.9%
Apr 2023	7	104	6.7%
Mar 2023	6	103	5.8%
Feb 2023	2	95	2.1%
Jan 2023	4	88	4.5%
Dec 2022	4	109	3.7%
Nov 2022	3	124	2.4%
Oct 2022	2	74	2.7%
Sep 2022	0	78	0.0%
Aug 2022	2	88	2.3%
Jul 2022	4	89	4.5%
Jun 2022	3	82	3.7%

Utilization Management

Utilization Management

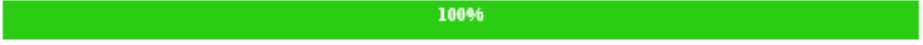











Indicator	Performance	Most Recent	Trend	Period	Target	Alert	Info	Avg
1 Day Stay Rate Medi-Cal [M] 	Target Met	0.00% 0/13	No Change	May 2023	2.61%	5.00%	n/a	3.95%
1 Day Stay Rate-Medicare [M] 	Target Met	0.00% 0/45	No Change	May 2023	8.10%	10.00%	n/a	3.72%
Acute Care - Geometric Mean Length of Stay [M] 	Breaches Alarm	3.60 36.0485/10	Deteriorated	May 2023	2.75	3.23	n/a	3.31
Acute Care Age over 64 - MS-DRG Case Mix Index [M] 	Target Met	1.69 55.8104/33	Improved	May 2023	1.56	1.40	n/a	1.48
Acute Care- MS-DRG Case Mix Index [M] 	Target Met	1.60 75.1456/47	Improved	May 2023	1.55	1.40	n/a	1.48

Geometric mean is a statistical/mathematical term that is applied in many other areas outside of health care. This is calculated by multiplying all of the lengths of stay and then taking the nth root of that number (where n=number of patients). (Minimizes the impact of outliers)

The Case Mix Index (CMI) is the average relative DRG weight of a hospital's inpatient discharges, calculated by summing the Medicare Severity-Diagnosis Related Group (MS-DRG) weight for each discharge and dividing the total by the number of discharges.






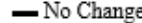











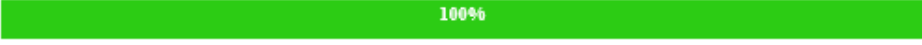

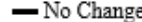



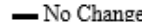





Core Measures

Indicator	Performance	Most Recent	Trend	Period	⊙	🔔	📊	⌘
Core OP29/ASC9 - Colonoscopy:F/U for Avg Risk Pts (M)								
 History 	 Target Met	100.0% 8/8	— No Change	May 2023	88.0%	50.0%	n/a	100.0%
Core OP 18b Median Time ED Arrival to ED Departure - Reporting Measure (M)								
 History 	 Breaches Alarm	153.00	↘ Improved	May 2023	132.00	140.00	n/a	155.00
Core OP 22 ED LWBS Emergency Dept Left Without Being Seen (M)								
 History 	 Target Met	0.7% 6/813	↗ Deteriorated	May 2023	2.0%	2.5%	n/a	1.6%
Core OP-23 - Head CT/MRI Results for STK Pts w/in 45 Min of Arrival (M)								
 History 	 Target Met	100.0% 1/1	— No Change	May 2023	72.0%	70.0%	n/a	66.7%





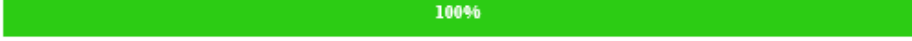




Core Measures Sepsis

Indicator	Performance	Most Recent	Trend	Period	🕒	📌	📊	⚡	📈
SEP-1 Early Management Bundle, Severe Sepsis/Septic Shock (M)									
		Target Met	83.3%	📉 Deteriorated	May 2023	81.0%	80.0%	n/a	63.1%
History			5/6						
SEPa - Severe Sepsis 3 Hour Bundle (M)									
		Breaches Alarm	83.3%	📉 Deteriorated	May 2023	94.0%	90.0%	n/a	84.7%
History			5/6						
SEPB - Severe Sepsis 6 Hour Bundle (M)									
		Target Met	100.0%	➡ No Change	May 2023	100.0%	90.0%	n/a	90.6%
History			4/4						

Infection Prevention

Indicator	Performance	Most Recent	Trend	Period	📍	🔔	📊	☰		
IC-Surveillance HAI-C.DIFF Inpatient infections per 10k pt days [M]	 91%	 9%	 Target Met	0	 No Change	May 2023	1	1	n/a	0
History										
IC-Surveillance HAI-CAUTI Inpatient infections per 10k patient days [M]	 91%	 9%	 Target Met	0	 No Change	May 2023	1	1	n/a	0
History										
IC-Surveillance HAI-CLABSI Inpatient infections per 10k patient days [M]	 95%	 5%	 Target Met	0	 No Change	May 2023	1	1	n/a	0
History										
IC-Surveillance HAI-MRSA Inpatient infections per 10k patient days [M]	 100%		 Target Met	0	 No Change	May 2023	1	1	n/a	0
History										
IC-Surveillance HAI-SSI infections per 10k pt days [M]	 100%		 Target Met	0	 No Change	May 2023	1	1	n/a	0
History										
QA-02 Hand Hygiene Practices Monitored [M]	 9%	 91%	 Breaches Alarm	67%		May 2023	90%	85%	n/a	67%
History										

CIHQ Corrective Action Plan Monthly Compliance Condition Level Findings

GL-04 Condition Level Findings Reported to BQC [M]				Target Met	100% 4/4	May 2023	100%	95%	n/a	100%
History										
IC-03 Hair Clippers and Base Clean [M]				Target Met	97% 56/58	May 2023	90%	85%	n/a	97%
History										
MM-24 Pill Crushers Clean [M]				Target Met	100% 9/9	May 2023	100%	95%	n/a	100%
History										
QS-10 Documentation: Continuous Observation of High Risk Pts [M]				Breaches Alarm	56% 5/9	May 2023	100%	95%	n/a	56%
History										

Patient Satisfaction

- HCAHPS reported Quarterly

Rate My Hospital

Scale 1-5

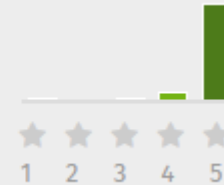
May Data

Sonoma Valley Hospital / Emergency Department

110

4.703

95% CI:
4.653—4.753

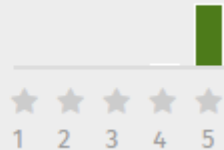


Sonoma Valley Hospital / Inpatient Care

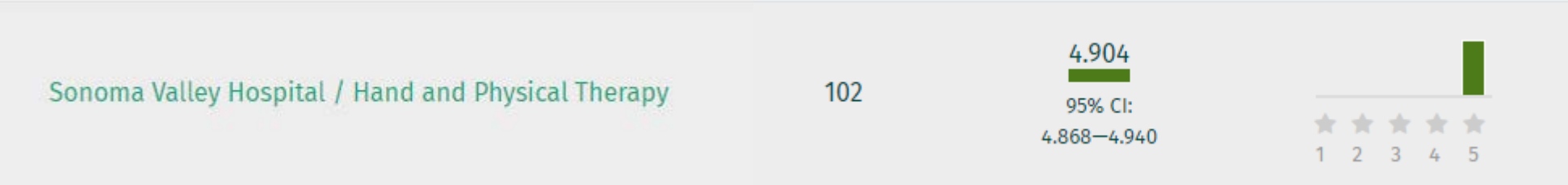
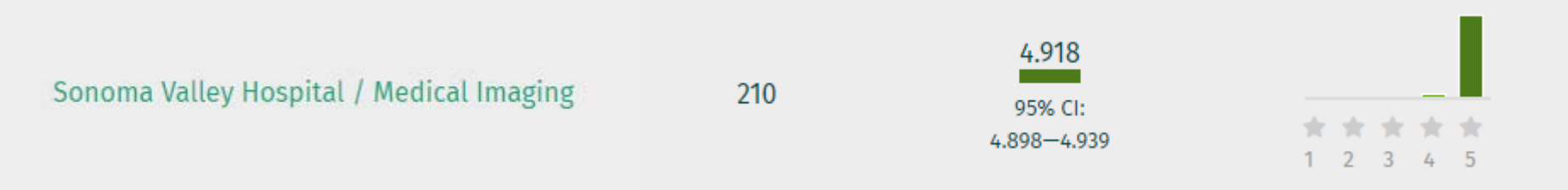
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4.929

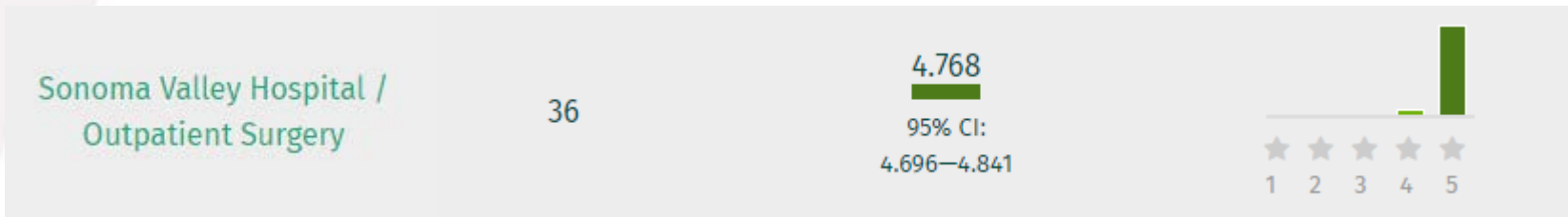
95% CI:
Not enough samples



Rate My Hospital Scale 1-5



Rate My Hospital Scale 1-5



Document Tasks By Committee

Listing of currently pending and/or upcoming document tasks grouped by committee.

Sonoma Valley Hospital

Run by: Newman, Cindi (cnewman)

Run date: 06/20/2023 9:26 PM

Report Parameters

Filtered by: Document Set: - All Available Document Sets -
Committee: 07 BOD-Quality (P&P Review)
Include Current Tasks: Yes
Include Upcoming Tasks: No

Grouped by: Committee

Sorted by: Document Title

Report Statistics

Total Documents: 72

Committee: 07 BOD-Quality (P&P Review)

Committee Members: Crayton, Monique (mcrayton), Finn, Stacey (sfinn), Newman, Cindi (cnewman)

Current Approval Tasks (due now)

Document	Task/Status	Pending Since	Days Pending
Authorized Access to Medication Storage Areas <i>Medication Management Policies (MM)</i>	Pending Approval	6/15/2023	5
<p>Summary Of Changes: Added verbiage to better define role of radiology and ultrasound techs.</p> <ul style="list-style-type: none"> Radiology, Ultrasound, and Interventional Radiology Technologists (Includes retrieval of contrast and other non-controlled medications for the purpose of administration by practitioners licensed to do so) <p>Moderators: Newman, Cindi (cnewman)</p> <p>Lead Authors: Kutza, Chris (ckutza)</p> <p>Approvers: 01 P&P Committee -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)</p>			
Carbohydrate Consistent Diet NU8340-176 NEW <i>Food & Nutrition Services Dept Policies</i>	Pending Approval	6/15/2023	5
<p>Summary Of Changes: RETIRE:: Policy not needed, all information in policy is included in diet manual and diet manual policy refers to diet manual for therapeutic diet guidelines. Propose retiring policy</p> <p>Moderators: Newman, Cindi (cnewman)</p> <p>Lead Authors: Finn, Bridget (bfinn)</p> <p>Approvers: Drummond, Kimberly (kdrummond) -> 01 P&P Committee - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)</p>			
Code Blue-Broselow Carts and Emergency Medications <i>Emergency Code Alerts Policies</i>	Pending Approval	6/15/2023	5
<p>Summary Of Changes: Added Dextrose 10% 250ml bag to contents list for drawers 2, 3, & 4 to comply with CMS survey finding.</p> <p>Moderators: Newman, Cindi (cnewman)</p> <p>Lead Authors: Kutza, Chris (ckutza), Winkler, Jessica (jwinkler)</p> <p>ExpertReviewers: Kutza, Chris (ckutza), Safety Committee</p> <p>Approvers: 01 P&P Committee -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)</p>			

Document Tasks by Committee

Sonoma Valley Hospital

Run by: Newman, Cindi (cnewman)

Run date: 06/20/2023 9:26 PM

Listing of currently pending and/or upcoming document tasks grouped by committee.

Competency Assessment 7500-08	Pending Approval	6/15/2023	5
<i>Clinical Lab Dept</i>			
Summary Of Changes: Posted 42CFR493.1489(b)2 Testing Personnel qualification reference			
Moderators: Newman, Cindi (cnewman)			
Lead Authors: Ramos, Karen (kramos)			
Approvers: Kuwahara, Dawn (dkuwahara) -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 03 MS-Surgery Department - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)			
Creutzfeldt-Jakob Disease Human Prion Disease	Pending Approval	6/15/2023	5
<i>Infection Prevention & Control Policies (IC)</i>			
Summary Of Changes: Added current revised date, deleted any employee names in IP section, updated reviewers.			
Moderators: Newman, Cindi (cnewman)			
Lead Authors: Montecino, Stephanie (smontecino)			
ExpertReviewers: Sankaran, Sujatha (ssankaran)			
Approvers: Cooper, Kylie (kcooper) -> 01 P&P Committee - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)			
Critical Value Reporting 7500-12	Pending Approval	6/15/2023	5
<i>Clinical Lab Dept</i>			
Summary Of Changes: Updated Documentation log to reflect Comm Log used in Epic Removed Dr. Cohen and associated phone numbers			
Moderators: Newman, Cindi (cnewman)			
Lead Authors: Ramos, Karen (kramos)			
Approvers: Kuwahara, Dawn (dkuwahara) -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 03 MS-Surgery Department - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)			
Diet Manual Policy	Pending Approval	6/15/2023	5
<i>Food & Nutrition Services Dept Policies</i>			
Summary Of Changes: Reviewed, no changes needed.			
Moderators: Newman, Cindi (cnewman)			
Lead Authors: Finn, Bridget (bfinn)			
Approvers: Drummond, Kimberly (kdrummond) -> 01 P&P Committee - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)			
Drug-Nutrient Interactions	Pending Approval	6/15/2023	5
<i>Food & Nutrition Services Dept Policies</i>			
Summary Of Changes: Removed reference to brochure that is no longer being utilized for patient education. Included that education and teaching on drug and nutrient interactions will be provided as deemed necessary by physician, nursing, pharmacy or registered dietitian. Removed specific location source for information to be provided to patients.			
Moderators: Newman, Cindi (cnewman)			
Lead Authors: Finn, Bridget (bfinn)			
Approvers: Drummond, Kimberly (kdrummond) -> 01 P&P Committee - (Committee) -> 04 MS-Performance Improvement/Pharmacy &			

Document Tasks by Committee

Sonoma Valley Hospital

Run by: Newman, Cindi (cnewman)

Run date: 06/20/2023 9:26 PM

Listing of currently pending and/or upcoming document tasks grouped by committee.

Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)

Dry Storage	Pending Approval	6/15/2023	5
<i>Food & Nutrition Services Dept Policies</i>			
Summary Of Changes:	Removed that all items expiring within 3 months will be placed in separate area,		
Moderators:	Newman, Cindi (cnewman)		
Lead Authors:	Finn, Bridget (bfinn)		
Approvers:	Drummond, Kimberly (kdrummond) -> 01 P&P Committee - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)		
Emergency Release of Blood Products 7500-17	Pending Approval	6/15/2023	5
<i>Clinical Lab Dept</i>			
Summary Of Changes:	Removed GANN form information- not required for ER patient. Removed Blood Bank Worksheet review- not necessary during emergency release of blood product Correction of Abbreviations Correction of Staff Title		
Moderators:	Newman, Cindi (cnewman)		
Lead Authors:	Ramos, Karen (kramos)		
Approvers:	Kuwahara, Dawn (dkuwahara) -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 03 MS-Surgery Department - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)		
Food Nutrition Disaster Plan 8340-109	Pending Approval	6/15/2023	5
<i>Food & Nutrition Services Dept Policies</i>			
Summary Of Changes:	Updated policy to reflect use of Meals for All Emergency food. This is a dehydrated product that has taken the place of our previous emergency meal plan. Removed previous emergency menu plan, instructions on therapeutic diet preparations and inventory as this is no longer applicable. Removed name of thickener stored in emergency supply and updated to reflect commercial thickener will be stored with emergency food supply for use for patients on diets with thickened liquids. Included that instructions for reconstitution of Meals for All emergency food will be stored with emergency food supply in room C-1227, added inventory of Meals for All products on hand.		
Moderators:	Newman, Cindi (cnewman)		
Lead Authors:	Finn, Bridget (bfinn)		
Approvers:	Drummond, Kimberly (kdrummond) -> 01 P&P Committee - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)		
Food Preparation and Service	Pending Approval	6/15/2023	5
<i>Food & Nutrition Services Dept Policies</i>			
Summary Of Changes:	Removed that raw fruits and vegetable will be sanitized after washing. The CDC and the FDA recommend that soap, detergent or commercial produce wash not be used.		
Moderators:	Newman, Cindi (cnewman)		
Lead Authors:	Finn, Bridget (bfinn)		
Approvers:	Drummond, Kimberly (kdrummond) -> 01 P&P Committee - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)		

Document Tasks by Committee

Sonoma Valley Hospital

Run by: Newman, Cindi (cnewman)

Run date: 06/20/2023 9:26 PM

Listing of currently pending and/or upcoming document tasks grouped by committee.

Food Safety, Hand washing, and Sanitation Standards <i>Food & Nutrition Services Dept Policies</i>	Pending Approval	6/15/2023	5
<p>Summary Of Changes: Added that food may be thawed under cold running water (appropriate method per food code), changed responsibility for direct oversight of safe food handling practices from Clinical Nutrition Manager to Registered Dietitian, included that cloth towel must not be used to dry hands after washing.</p> <p>Moderators: Newman, Cindi (cnewman)</p> <p>Lead Authors: Finn, Bridget (bfinn)</p> <p>Approvers: Drummond, Kimberly (kdrummond) -> 01 P&P Committee - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)</p>			
Laboratory Fax 7500-26 <i>Clinical Lab Dept</i>	Pending Approval	6/15/2023	5
<p>Summary Of Changes: Correction of process, clarification of abbreviation</p> <p>Moderators: Newman, Cindi (cnewman)</p> <p>Lead Authors: Ramos, Karen (kramos)</p> <p>Approvers: Kuwahara, Dawn (dkuwahara) -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 03 MS-Surgery Department - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)</p>			
Laboratory Specific Disaster Plan 7500-28 <i>Clinical Lab Dept</i>	Pending Approval	6/15/2023	5
<p>Summary Of Changes: Correction of Title Changes and notification of events.</p> <p>Moderators: Newman, Cindi (cnewman)</p> <p>Lead Authors: Ramos, Karen (kramos)</p> <p>Approvers: Kuwahara, Dawn (dkuwahara) -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 03 MS-Surgery Department - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)</p>			
Manual Entry Review 7500-30 <i>Clinical Lab Dept</i>	Pending Approval	6/15/2023	5
<p>Summary Of Changes: Removed Manual Entry Test report printing procedure. Moved to internal lab policy. expanded abbreviations Corrected Staff Title</p> <p>Moderators: Newman, Cindi (cnewman)</p> <p>Lead Authors: Ramos, Karen (kramos)</p> <p>Approvers: Kuwahara, Dawn (dkuwahara) -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 03 MS-Surgery Department - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)</p>			
Menu Analysis <i>Food & Nutrition Services Dept Policies</i>	Pending Approval	6/15/2023	5
<p>Summary Of Changes: Removed address of Food and Nutrition Board of the National Research Council, National Academy of Sciences, removed specific source for nutrient information to allow for information from multiple sources, removed that standardized tray will be selected for patients who have not chosen their menu (choice menu not currently in use)</p>			

Document Tasks by Committee

Sonoma Valley Hospital

Run by: Newman, Cindi (cnewman)

Run date: 06/20/2023 9:26 PM

Listing of currently pending and/or upcoming document tasks grouped by committee.

2/22/23: Modified to include mention of both patients and residents and to include that meals will be provided in accordance with physician's order

Moderators: Newman, Cindi (cnewman)

Lead Authors: Finn, Bridget (bfinn)

Approvers: Drummond, Kimberly (kdrummond) -> 01 P&P Committee - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)

Menu Identification, Tray Service, and Preparation

Pending Approval

6/15/2023

5

Food & Nutrition Services Dept Policies

Summary Of Changes: **Removed verbiage regarding select menu. Patient select menus are not currently being utilized. Removed that unit secretary transmits diet order to Food and Nutrition services, updated to indicate that it is transmitted via electronic medical record system**

Moderators: Newman, Cindi (cnewman)

Lead Authors: Finn, Bridget (bfinn)

Approvers: Drummond, Kimberly (kdrummond) -> 01 P&P Committee - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)

Method Validation of Analytical Procedures 7500-32

Pending Approval

6/15/2023

5

Clinical Lab Dept

Summary Of Changes: **Calibration steps defined, Clarification of Abbreviations**

Moderators: Newman, Cindi (cnewman)

Lead Authors: Ramos, Karen (kramos)

Approvers: Kuwahara, Dawn (dkuwahara) -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 03 MS-Surgery Department - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)

Mission Statement

Pending Approval

6/15/2023

5

Food & Nutrition Services Dept Policies

Summary Of Changes: **Removed use of "stop light" program to identify foods as green, yellow, red. This is not a current practice**

Moderators: Newman, Cindi (cnewman)

Lead Authors: Finn, Bridget (bfinn)

Approvers: Drummond, Kimberly (kdrummond) -> 01 P&P Committee - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)

Mops, Proper Use of

Pending Approval

6/15/2023

5

Food & Nutrition Services Dept Policies

Summary Of Changes: **Reviewed, no changes needed**

Moderators: Newman, Cindi (cnewman)

Lead Authors: Finn, Bridget (bfinn)

Approvers: Drummond, Kimberly (kdrummond) -> 01 P&P Committee - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)

NEW:: Transfusion Transmitted Infectious Disease Notification

Pending Approval

6/15/2023

5

Laboratory Services Policies (LB)

Document Tasks by Committee

Sonoma Valley Hospital

Run by: Newman, Cindi (cnewman)

Run date: 06/20/2023 9:26 PM

Listing of currently pending and/or upcoming document tasks grouped by committee.

Summary Of Changes: **New to the portal. Policy was found in the department policies and is required for survey and CLIA. Approved by Medical Director in 2020.**

Moderators: **Newman, Cindi (cnewman)**

Lead Authors: **Kuwahara, Dawn (dkuwahara), Ramos, Karen (kramos)**

ExpertReviewers: **Medical Director-Lab**

Approvers: **Kuwahara, Dawn (dkuwahara) -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 03 MS-Surgery Department - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)**

Nutritional Assessment Practice Guidelines Pediatric Pending Approval 6/15/2023 5
Food & Nutrition Services Dept Policies

Summary Of Changes: **Renamed policy, previously was named in error and did not address nutritional assessment practice guidelines for pediatric patients. Policy is for Nutrition Care Process and Model use. Updated to include currently utilized documents, removed reference to attachments that are not present, removed specific location of documentation in EMR, removed reference to communication in patient's paper chart and specific means of communication of recommendations to physician**

Moderators: **Newman, Cindi (cnewman)**

Lead Authors: **Finn, Bridget (bfinn)**

Approvers: **Drummond, Kimberly (kdrummond) -> 01 P&P Committee - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)**

Nutritional Assessment Practice Guidelines Adult Geriatric Pending Approval 6/15/2023 5
Food & Nutrition Services Dept Policies

Summary Of Changes: **Updated nutritional risk screening criteria to reflect current guidelines being used, updated title of screening tool, new screening tool included, updated timeframes for screenings to reflect current guidelines. Renamed Policy to Nutritional Assess Practice Guidelines Adult Geriatric Pediatric (policy is referenced by this title in other policies). Included explanation of acronyms used.**

Moderators: **Newman, Cindi (cnewman)**

Lead Authors: **Finn, Bridget (bfinn)**

Approvers: **Drummond, Kimberly (kdrummond) -> 01 P&P Committee - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)**

Nutritional Plan of Care Pending Approval 6/15/2023 5
Food & Nutrition Services Dept Policies

Summary Of Changes: **Reviewed, no changes**

Moderators: **Newman, Cindi (cnewman)**

Lead Authors: **Finn, Bridget (bfinn)**

Approvers: **Drummond, Kimberly (kdrummond) -> 01 P&P Committee - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)**

Nutritional Risk Levels Pending Approval 6/15/2023 5
Food & Nutrition Services Dept Policies

Summary Of Changes: **Removed reference to specific tool for determining nutritional risk level and replaced with statement that risk levels will be determined following evidence based criteria for determining nutritional risk levels.**

Moderators: **Newman, Cindi (cnewman)**

Lead Authors: **Finn, Bridget (bfinn)**

Approvers: **Drummond, Kimberly (kdrummond) -> 01 P&P Committee - (Committee) -> 04 MS-Performance Improvement/Pharmacy &**

Document Tasks by Committee

Sonoma Valley Hospital

Run by: Newman, Cindi (cnewman)

Run date: 06/20/2023 9:26 PM

Listing of currently pending and/or upcoming document tasks grouped by committee.

Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)

Outpatient Service Laboratory 7500-40 <i>Clinical Lab Dept</i>	Pending Approval	6/15/2023	5
Summary Of Changes:	Removed lab result delivery by courier. Added process for critical values, Correct staff title and replaced auxillary with staff member.		
Moderators:	Newman, Cindi (cnewman)		
Lead Authors:	Ramos, Karen (kramos)		
Approvers:	Kuwahara, Dawn (dkuwahara) -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 03 MS-Surgery Department - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)		
Pathology Specimen Handling <i>Laboratory Services Policies (LB)</i>	Pending Approval	6/15/2023	5
Summary Of Changes:	Reviewed, no content change, added policy reference and changed staff assignment		
Moderators:	Newman, Cindi (cnewman)		
Lead Authors:	Kuwahara, Dawn (dkuwahara), Ramos, Karen (kramos)		
ExpertReviewers:	Kuwahara, Dawn (dkuwahara), Medical Director-Lab		
Approvers:	Winkler, Jessica (jwinkler) -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 03 MS-Surgery Department - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)		
Patient Education <i>Food & Nutrition Services Dept Policies</i>	Pending Approval	6/15/2023	5
Summary Of Changes:	Reviewed, no changes needed		
Moderators:	Newman, Cindi (cnewman)		
Lead Authors:	Finn, Bridget (bfinn)		
Approvers:	Drummond, Kimberly (kdrummond) -> 01 P&P Committee - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)		
Personnel Inservice and Continuing Education <i>Food & Nutrition Services Dept Policies</i>	Pending Approval	6/15/2023	5
Summary Of Changes:	Reviewed, no changes needed		
Moderators:	Newman, Cindi (cnewman)		
Lead Authors:	Finn, Bridget (bfinn)		
Approvers:	Drummond, Kimberly (kdrummond) -> 01 P&P Committee - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)		
Personnel Orientation <i>Food & Nutrition Services Dept Policies</i>	Pending Approval	6/15/2023	5
Summary Of Changes:	No changes needed at this time.		
Moderators:	Newman, Cindi (cnewman)		
Lead Authors:	Finn, Bridget (bfinn)		

Document Tasks by Committee

Sonoma Valley Hospital

Run by: Newman, Cindi (cnewman)

Run date: 06/20/2023 9:26 PM

Listing of currently pending and/or upcoming document tasks grouped by committee.

Approvers: **Drummond, Kimberly (kdrummond) -> 01 P&P Committee - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)**

Personnel Staff Competencies	Pending Approval	6/15/2023	5
<i>Food & Nutrition Services Dept Policies</i>			

Summary Of Changes: **Broadened who will provide education to staff to "supervisory Food and Nutrition Services staff," included what abbreviated titles mean, removed time frame for competency review to reflect they will be reviewed as needed. Removed specific competencies, specified that competencies of clinical dietitian and FNS director will be completed by a registered dietitian designated by SVH. Combined policy on ongoing inservice education to streamline departmental policies.**

Moderators: **Newman, Cindi (cnewman)**

Lead Authors: **Finn, Bridget (bfinn)**

Approvers: **Drummond, Kimberly (kdrummond) -> 01 P&P Committee - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)**

Personnel Staff Performance	Pending Approval	6/15/2023	5
<i>Food & Nutrition Services Dept Policies</i>			

Summary Of Changes: **Reviewed, no changes needed**

Moderators: **Newman, Cindi (cnewman)**

Lead Authors: **Finn, Bridget (bfinn)**

Approvers: **Drummond, Kimberly (kdrummond) -> 01 P&P Committee - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)**

Policy or Procedure Changes 7500-46	Pending Approval	6/15/2023	5
<i>Clinical Lab Dept</i>			

Summary Of Changes: **Corrected titles.**

Moderators: **Newman, Cindi (cnewman)**

Lead Authors: **Ramos, Karen (kramos)**

Approvers: **Kuwahara, Dawn (dkuwahara) -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 03 MS-Surgery Department - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)**

Portion Control	Pending Approval	6/15/2023	5
<i>Food & Nutrition Services Dept Policies</i>			

Summary Of Changes: **Removed listing of available scoop and ladle sizes, policy includes that standard sizes are used. Removed list of specific food items and portion sizes, not needed as portion sizes are listed on production sheets. Added that food scales are available for weighing products as appropriate.**

Moderators: **Newman, Cindi (cnewman)**

Lead Authors: **Finn, Bridget (bfinn)**

Approvers: **Drummond, Kimberly (kdrummond) -> 01 P&P Committee - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)**

Pre-Operative Laboratory Testing 7500-48	Pending Approval	6/15/2023	5
<i>Clinical Lab Dept</i>			

Summary Of Changes: **Replaced lab result release from fax to EPIC
Added reference**

Document Tasks by Committee

Sonoma Valley Hospital

Run by: Newman, Cindi (cnewman)

Run date: 06/20/2023 9:26 PM

Listing of currently pending and/or upcoming document tasks grouped by committee.

Expanded abbreviation				
Moderators:	Newman, Cindi (cnewman)			
Lead Authors:	Ramos, Karen (kramos)			
Approvers:	Kuwahara, Dawn (dkuwahara) -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 03 MS-Surgery Department - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)			
Priority Lab Work 7500-50		Pending Approval	6/15/2023	5
<i>Clinical Lab Dept</i>				
Summary Of Changes:	Title Change, Removal of Nursery formatting and grammatical edits.			
Moderators:	Newman, Cindi (cnewman)			
Lead Authors:	Ramos, Karen (kramos)			
Approvers:	Kuwahara, Dawn (dkuwahara) -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 03 MS-Surgery Department - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)			
Production Sheets		Pending Approval	6/15/2023	5
<i>Food & Nutrition Services Dept Policies</i>				
Summary Of Changes:	Reviewed, no changes needed			
Moderators:	Newman, Cindi (cnewman)			
Lead Authors:	Finn, Bridget (bfinn)			
Approvers:	Drummond, Kimberly (kdrummond) -> 01 P&P Committee - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)			
Proficiency Testing 7500-52		Pending Approval	6/15/2023	5
<i>Clinical Lab Dept</i>				
Summary Of Changes:	Removed Nonregulated analytes section- All laboratory tests have proficiency testing available. Position Title Changes, editing for grammar.			
Moderators:	Newman, Cindi (cnewman)			
Lead Authors:	Ramos, Karen (kramos)			
Approvers:	Kuwahara, Dawn (dkuwahara) -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 03 MS-Surgery Department - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)			
QAPI Program Policies and Procedures		Pending Approval	6/15/2023	5
<i>Food & Nutrition Services Dept Policies</i>				
Summary Of Changes:	Changed Clinical Nutrition Coordinator to Clinical Dietitian, provided what acronyms EOC and QAPI stand for			
Moderators:	Newman, Cindi (cnewman)			
Lead Authors:	Finn, Bridget (bfinn)			
Approvers:	Drummond, Kimberly (kdrummond) -> 01 P&P Committee - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)			
Reagent and Supply Handling—Dating and Visual Inspection 7500-56		Pending Approval	6/15/2023	5
<i>Clinical Lab Dept</i>				

Document Tasks by Committee

Sonoma Valley Hospital

Run by: Newman, Cindi (cnewman)

Run date: 06/20/2023 9:26 PM

Listing of currently pending and/or upcoming document tasks grouped by committee.

Summary Of Changes: **Reviewed.Correction of Staff Title**

Moderators: **Newman, Cindi (cnewman)**

Lead Authors: **Ramos, Karen (kramos)**

Approvers: **Kuwahara, Dawn (dkuwahara) -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 03 MS-Surgery Department - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)**

Receiving of Foods and Supplies

Pending Approval

6/15/2023

5

Food & Nutrition Services Dept Policies

Summary Of Changes: **Removed that temperatures of 5% of delivered items are recorded on a delivery log. This is not required and not a current practice**

Moderators: **Newman, Cindi (cnewman)**

Lead Authors: **Finn, Bridget (bfinn)**

Approvers: **Drummond, Kimberly (kdrummond) -> 01 P&P Committee - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)**

Record Retention

Pending Approval

6/15/2023

5

Food & Nutrition Services Dept Policies

Summary Of Changes: **Reviewed, no changes needed**

Moderators: **Newman, Cindi (cnewman)**

Lead Authors: **Finn, Bridget (bfinn)**

Approvers: **Drummond, Kimberly (kdrummond) -> 01 P&P Committee - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)**

Reflex Testing Policy 7500-58

Pending Approval

6/15/2023

5

Clinical Lab Dept

Summary Of Changes: **Reflex testing Table Corrections based on current process, correction of staff title.**

Moderators: **Newman, Cindi (cnewman)**

Lead Authors: **Ramos, Karen (kramos)**

Approvers: **Kuwahara, Dawn (dkuwahara) -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 03 MS-Surgery Department - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)**

Refrigerator Freezer Storage 8340-174

Pending Approval

6/15/2023

5

Food & Nutrition Services Dept Policies

Summary Of Changes: **Updated to reflect use by dates will be determined using USDA guidelines rather than USDA Foodkeeper app.**

Moderators: **Newman, Cindi (cnewman)**

Lead Authors: **Finn, Bridget (bfinn)**

Approvers: **Drummond, Kimberly (kdrummond) -> 01 P&P Committee - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)**

Release of Information 7500-60

Pending Approval

6/15/2023

5

Clinical Lab Dept

Document Tasks by Committee

Sonoma Valley Hospital

Run by: Newman, Cindi (cnewman)

Run date: 06/20/2023 9:26 PM

Listing of currently pending and/or upcoming document tasks grouped by committee.

Summary Of Changes: **Reviewed. Staff Title Change**

Moderators: **Newman, Cindi (cnewman)**

Lead Authors: **Ramos, Karen (kramos)**

Approvers: **Kuwahara, Dawn (dkuwahara) -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 03 MS-Surgery Department - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)**

Requests for Laboratory Tests 7500-62	Pending Approval	6/15/2023	5
<i>Clinical Lab Dept</i>			

Summary Of Changes: **Removed call-in lab orders
Updated hospital system to EPIC, Lab system to EPIC BEAKER
Expanded abbreviations**

Moderators: **Newman, Cindi (cnewman)**

Lead Authors: **Ramos, Karen (kramos)**

Approvers: **Kuwahara, Dawn (dkuwahara) -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 03 MS-Surgery Department - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)**

Responsibilities of the Dietitian	Pending Approval	6/15/2023	5
<i>Food & Nutrition Services Dept Policies</i>			

Summary Of Changes: **Removed reference to specific policy numbers, removed specific that registered dietitian will participate in department huddles, replaced "acute care and SNF patients" with "medical center patients" to allow oversight of either SNF or acute patients.**

2/22/23: Now reflects tracked changes

Moderators: **Newman, Cindi (cnewman)**

Lead Authors: **Finn, Bridget (bfinn)**

Approvers: **Drummond, Kimberly (kdrummond) -> 01 P&P Committee - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)**

Results Reporting 7500-64	Pending Approval	6/15/2023	5
<i>Clinical Lab Dept</i>			

Summary Of Changes: **Removed duplicate "Critical Value and called results" section
Updated Physician Daily Summary procedure
Updated hospital/lab system to EPIC
Added Reference**

Moderators: **Newman, Cindi (cnewman)**

Lead Authors: **Ramos, Karen (kramos)**

Approvers: **Kuwahara, Dawn (dkuwahara) -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 03 MS-Surgery Department - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)**

Retention of Clinical Laboratory Records 7500-66	Pending Approval	6/15/2023	5
<i>Clinical Lab Dept</i>			

Summary Of Changes: **Reviewed. Staff Title Corrected.**

Document Tasks by Committee

Sonoma Valley Hospital

Run by: Newman, Cindi (cnewman)

Run date: 06/20/2023 9:26 PM

Listing of currently pending and/or upcoming document tasks grouped by committee.

Moderators: Newman, Cindi (cnewman)

Lead Authors: Ramos, Karen (kramos)

Approvers: Kuwahara, Dawn (dkuwahara) -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 03 MS-Surgery Department - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)

Retention of Clinical Laboratory Specimens 7500-68

Pending Approval

6/15/2023

5

Clinical Lab Dept

Summary Of Changes: Added purpose
Expanded abbreviation
Corrected Title

Moderators: Newman, Cindi (cnewman)

Lead Authors: Ramos, Karen (kramos)

Approvers: Kuwahara, Dawn (dkuwahara) -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 03 MS-Surgery Department - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)

Retention of Pathology Records 7500-70

Pending Approval

6/15/2023

5

Clinical Lab Dept

Summary Of Changes: Reviewed. Staff Title Change

Moderators: Newman, Cindi (cnewman)

Lead Authors: Ramos, Karen (kramos)

Approvers: Kuwahara, Dawn (dkuwahara) -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 03 MS-Surgery Department - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)

Retention of Records Cease of Operation 7500-72

Pending Approval

6/15/2023

5

Clinical Lab Dept

Summary Of Changes: Correction of staff titles

Moderators: Newman, Cindi (cnewman)

Lead Authors: Ramos, Karen (kramos)

Approvers: Kuwahara, Dawn (dkuwahara) -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 03 MS-Surgery Department - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)

RETIRE:: Calorie Counts

Pending Approval

6/15/2023

5

Food & Nutrition Services Dept Policies

Summary Of Changes: RETIRE:: Policy no longer applicable, propose retiring policy.

Moderators: Newman, Cindi (cnewman)

Lead Authors: Finn, Bridget (bfinn)

Approvers: Drummond, Kimberly (kdrummond) -> 01 P&P Committee - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)

RETIRE:: Discontinue Orders 7500-16

Pending Approval

6/15/2023

5

Clinical Lab Dept

Document Tasks by Committee

Sonoma Valley Hospital

Run by: Newman, Cindi (cnewman)

Run date: 06/20/2023 9:26 PM

Listing of currently pending and/or upcoming document tasks grouped by committee.

Summary Of Changes: **RETIRE, obsolete. This is not relevant to EPIC.**

Moderators: **Newman, Cindi (cnewman)**

Lead Authors: **Ramos, Karen (kramos)**

Approvers: **Kuwahara, Dawn (dkuwahara) -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 03 MS-Surgery Department - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)**

RETIRE:: Nutrition Services Neutropenic Precautions <i>Food & Nutrition Services Dept Policies</i>	Pending Approval	6/15/2023	5
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Summary Of Changes: **RETIRE:: Policy is no longer applicable, propose retiring policy.**

Moderators: **Newman, Cindi (cnewman)**

Lead Authors: **Finn, Bridget (bfinn)**

Approvers: **Drummond, Kimberly (kdrummond) -> 01 P&P Committee - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)**

Review of Patient Results and Quality Control 7500-74 <i>Clinical Lab Dept</i>	Pending Approval	6/15/2023	5
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Summary Of Changes: **Added Purpose of the policy. Edited format.
Explained Abbreviations
Changed Paragon to EPIC
Grammar changes**

Moderators: **Newman, Cindi (cnewman)**

Lead Authors: **Ramos, Karen (kramos)**

Approvers: **Kuwahara, Dawn (dkuwahara) -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 03 MS-Surgery Department - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)**

Scheduling <i>Food & Nutrition Services Dept Policies</i>	Pending Approval	6/15/2023	5
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Summary Of Changes: **Updated to reflect time off request forms are available in the diet clerk's office rather than the manager's office. Updated to reflect holiday requests off will be approved based upon staffing availability**

Moderators: **Newman, Cindi (cnewman)**

Lead Authors: **Finn, Bridget (bfinn)**

Approvers: **Drummond, Kimberly (kdrummond) -> 01 P&P Committee - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)**

Scope of Service <i>Food & Nutrition Services Dept Policies</i>	Pending Approval	6/15/2023	5
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Summary Of Changes: **Removed Nutritional services department responsibility for food for staff and visitors, removed FTE counts for department, removed specific location of registered dietitian charting to reflect documentation appears in electronic medical record.**

2/22/23: Document now shows tracked changes

Moderators: **Newman, Cindi (cnewman)**

Lead Authors: **Finn, Bridget (bfinn)**

Approvers: **Drummond, Kimberly (kdrummond) -> 01 P&P Committee - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee)**

Document Tasks by Committee

Sonoma Valley Hospital

Run by: Newman, Cindi (cnewman)

Run date: 06/20/2023 9:26 PM

Listing of currently pending and/or upcoming document tasks grouped by committee.

(Committee) -> 09 BOD-Board of Directors - (Committee)

Self Referral Testing 7500-78 <i>Clinical Lab Dept</i>	Pending Approval	6/15/2023	5
Summary Of Changes:	Reviewed. No changes.		
Moderators:	Newman, Cindi (cnewman)		
Lead Authors:	Ramos, Karen (kramos)		
Approvers:	Kuwahara, Dawn (dkuwahara) -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 03 MS-Surgery Department - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)		
Special Functions Catering Requests <i>Food & Nutrition Services Dept Policies</i>	Pending Approval	6/15/2023	5
Summary Of Changes:	Included that Food and Nutrition Services Department is responsible for set up and break down of on site events only		
Moderators:	Newman, Cindi (cnewman)		
Lead Authors:	Finn, Bridget (bfinn)		
Approvers:	Drummond, Kimberly (kdrummond) -> 01 P&P Committee - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)		
Specimen Rejection 7500-86 <i>Clinical Lab Dept</i>	Pending Approval	6/15/2023	5
Summary Of Changes:	Reviewed. Correction of Staff Title		
Moderators:	Newman, Cindi (cnewman)		
Lead Authors:	Ramos, Karen (kramos)		
Approvers:	Kuwahara, Dawn (dkuwahara) -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 03 MS-Surgery Department - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)		
Specimens Collected at Outside Sites 7500-88 <i>Clinical Lab Dept</i>	Pending Approval	6/15/2023	5
Summary Of Changes:	Reviewed. Correction of staff title.		
Moderators:	Newman, Cindi (cnewman)		
Lead Authors:	Ramos, Karen (kramos)		
Approvers:	Kuwahara, Dawn (dkuwahara) -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 03 MS-Surgery Department - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)		
Staffing and Service Availability 7500-90 <i>Clinical Lab Dept</i>	Pending Approval	6/15/2023	5
Summary Of Changes:	New blood bank service indicated, title change.		
Moderators:	Newman, Cindi (cnewman)		
Lead Authors:	Ramos, Karen (kramos)		
Approvers:	Kuwahara, Dawn (dkuwahara) -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 03 MS-Surgery Department - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee -		

Document Tasks by Committee

Sonoma Valley Hospital

Run by: Newman, Cindi (cnewman)

Run date: 06/20/2023 9:26 PM

Listing of currently pending and/or upcoming document tasks grouped by committee.

(Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)

Standardized Recipes <i>Food & Nutrition Services Dept Policies</i>	Pending Approval	6/15/2023	5
Summary Of Changes:	Reviewed policy. No changes were made.		
Moderators:	Newman, Cindi (cnewman)		
Lead Authors:	Finn, Bridget (bfinn)		
Approvers:	Drummond, Kimberly (kdrummond) -> 01 P&P Committee - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)		
Storage of Medications <i>Medication Management Policies (MM)</i>	Pending Approval	6/15/2023	5
Summary Of Changes:	Reviewed, no changes		
Moderators:	Newman, Cindi (cnewman)		
Lead Authors:	Kutza, Chris (ckutza)		
Approvers:	01 P&P Committee -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)		
Temperature Control in the Laboratory 7500-94 <i>Clinical Lab Dept</i>	Pending Approval	6/15/2023	5
Summary Of Changes:	Reviewed. No changes.		
Moderators:	Newman, Cindi (cnewman)		
Lead Authors:	Ramos, Karen (kramos)		
Approvers:	Kuwahara, Dawn (dkuwahara) -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 03 MS-Surgery Department - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)		
Temperature Daily Checks 7500-96 <i>Clinical Lab Dept</i>	Pending Approval	6/15/2023	5
Summary Of Changes:	Added PURPOSE Format corrected Title Corrected Grammar errors corrected		
Moderators:	Newman, Cindi (cnewman)		
Lead Authors:	Ramos, Karen (kramos)		
Approvers:	Kuwahara, Dawn (dkuwahara) -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 03 MS-Surgery Department - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)		
Thawing of Food 8340-104 <i>Food & Nutrition Services Dept Policies</i>	Pending Approval	6/15/2023	5
Summary Of Changes:	Updated to reflect that food may be thawed in an airtight bag under cold running water.		
Moderators:	Newman, Cindi (cnewman)		
Lead Authors:	Finn, Bridget (bfinn)		

Document Tasks by Committee

Sonoma Valley Hospital

Run by: Newman, Cindi (cnewman)

Run date: 06/20/2023 9:26 PM

Listing of currently pending and/or upcoming document tasks grouped by committee.

Approvers: **Drummond, Kimberly (kdrummond) -> 01 P&P Committee - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)**

Thickened Liquids	Pending Approval	6/15/2023	5
<i>Food & Nutrition Services Dept Policies</i>			

Summary Of Changes: **Reference to specific thickening products removed. Replaced with "commercially purchased thickening products"**

Moderators: **Newman, Cindi (cnewman)**

Lead Authors: **Finn, Bridget (bfinn)**

Approvers: **Drummond, Kimberly (kdrummond) -> 01 P&P Committee - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)**

Venipuncture 7500-98	Pending Approval	6/15/2023	5
<i>Clinical Lab Dept</i>			

Summary Of Changes: **Removed Joint Commission and added CIHQ
Added California Department of Health Services for safety concerns
expanded abbreviations
Corrected staff title**

Moderators: **Newman, Cindi (cnewman)**

Lead Authors: **Ramos, Karen (kramos)**

Approvers: **Kuwahara, Dawn (dkuwahara) -> 01 P&P Committee - (Committee) -> 02 MS-Medicine Department - (Committee) -> 03 MS-Surgery Department - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)**

Ware Washing	Pending Approval	6/15/2023	5
<i>Food & Nutrition Services Dept Policies</i>			

Summary Of Changes: **Reviewed, no changes needed at this time.**

Moderators: **Newman, Cindi (cnewman)**

Lead Authors: **Finn, Bridget (bfinn)**

Approvers: **Drummond, Kimberly (kdrummond) -> 01 P&P Committee - (Committee) -> 04 MS-Performance Improvement/Pharmacy & Therapeutics Committee - (Committee) -> 05 MS-Medical Executive - (Committee) -> 07 BOD-Quality (P&P Review) - (Committee) -> 09 BOD-Board of Directors - (Committee)**



SUBJECT:
Transfusion Transmitted Infectious Disease Notification

POLICY: LB#8610-138

DEPARTMENT: Organizational

Page 1 of 5

EFFECTIVE: 03/2020

REVISED: 02/2023

NEW POLICY

policy was filed under the Laboratory's department policies and is not in the policy portal. It should be an organizational policy.

WHY:

Policy is required for accreditation and CLIA

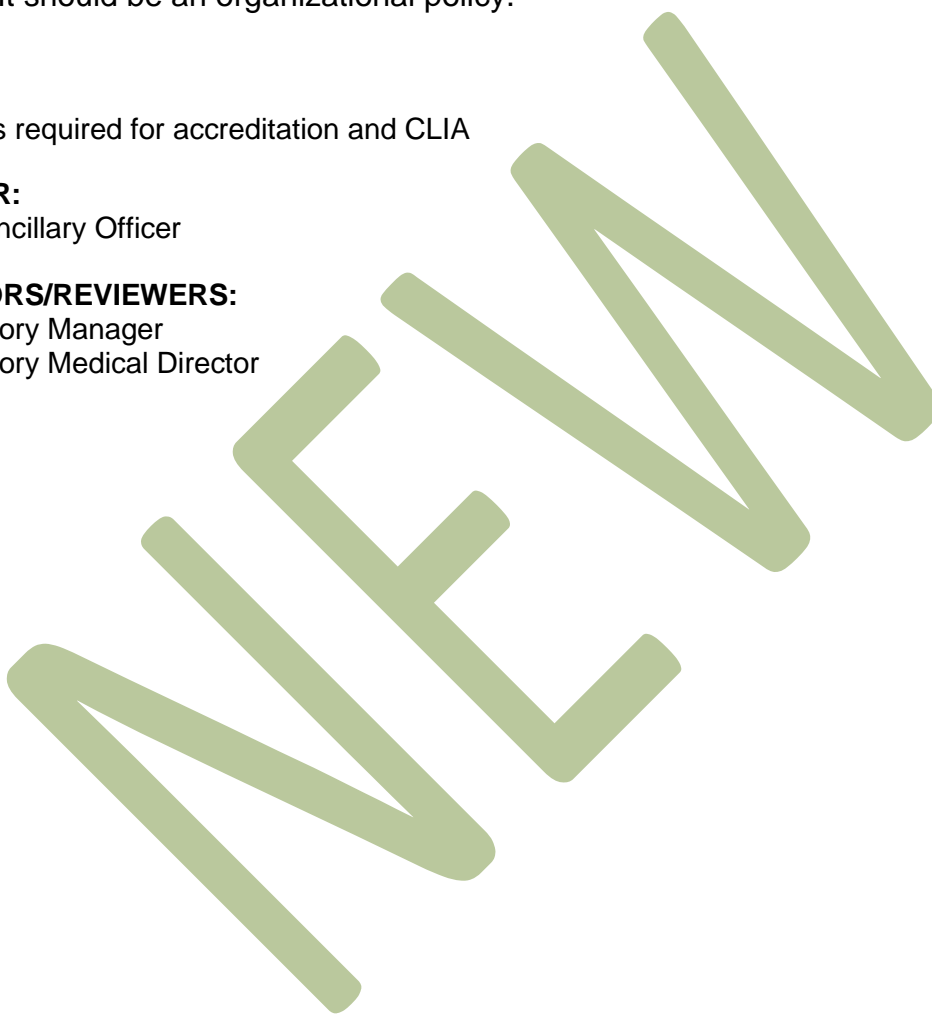
OWNER:

Chief Ancillary Officer

AUTHORS/REVIEWERS:

Laboratory Manager

Laboratory Medical Director





SUBJECT:
Transfusion Transmitted Infectious Disease Notification

POLICY: LB#8610-138

Page 2 of 5

DEPARTMENT: Organizational

EFFECTIVE: 03/2020

REVISED: 02/2023

PURPOSE:

This policy describes the process for investigating transfusion transmitted infectious disease when information is received after the time of donation that may affect the safety to any donor blood or recipient. Transmission-transmitted infections are predominantly acquired by the transfusion of a virus or parasite, in which a delay generally occurs between transfusion and manifestation of symptoms and signs of infection.

POLICY:

All transfusion transmitted infectious diseases will be investigated and notification is made to recipients who may have been exposed to a transfusion transmissible disease from a blood transfusion.

PROCEDURE:

Blood Productions may be quarantined, returned, or destroyed upon notification by the blood supplier for a variety of reasons. A biological recall indicates the product was incorrectly collected or processed. A market withdrawal is associated with a product that has been delivered to the consignee but now additional information on the donor makes the product unsuitable for transfusion. A traceback is initiated when the supplier finds a donor to have a transfusion transmissible disease and contacts the consignees to determine the disposition of past donations from this donor, possibly going back years. Once the process is initiated the response is similar in all cases.

Traceback/Lookback involves:

- Tracking and identification of the location and disposition of blood component products that were manufactured from donations by a particular donor.
- The steps taken to track and quarantine unsuitable blood or blood components.
- The notification of consignees when a previous donor subsequently tests positive for the most infectious disease markers.

Recipient Traceback Notifications

Investigation is conducted to notify recipients who may have been exposed to a transfusion transmissible disease from a blood transfusion. Most commonly, confirmatory test is positive for one of the following:



SUBJECT:
Transfusion Transmitted Infectious Disease Notification

POLICY: LB#8610-138

Page 3 of 5

DEPARTMENT: Organizational

EFFECTIVE: 03/2020

REVISED: 02/2023

1. Anti-Human Immunodeficiency Virus (HIV)-1
2. Anti-HIV 2
3. HIV Nucleic Testing (NAT)
4. Anti-Hepatitis C Virus (HCV)
5. HCV NAT

HIV TRACEBACK (“LOOKBACK”)

When the supplemental (additional, more specific) test for HIV is positive or when the screening test is reactive and there is no available supplemental test that is approved for such use by FDA, the blood bank must notify transfusion recipients of previous collections of blood and blood components at increased risk of transmitting HIV infection, or the recipient’s physician of record, of the need for recipient HIV testing and counseling. The blood bank must also notify the recipient’s physician of record, or a legal representative or relative if the recipient is a minor, deceased, judged incompetent by a State Court, or if the recipient is competent but State Law permits a legal representative or relative to receive information on behalf of the recipient. Reasonable attempts must be made to perform the notification within 12 weeks after receiving the supplemental test evidence of HIV infection from VITALANT BLOOD SERVICES. (Blood Bank Service).

HCV Traceback (“Lookback”)

Requirements are similar for notification for HCV with the exception that notification is not required for patients who are deceased.

- A. Recipient Traceback (“Lookback”) Notification is received from VITALANT BLOOD SERVICES when:
 - Subsequent to market withdrawal for one of the markers specified above now with a confirmatory test of positive.
 - Donor of a distributed product has an infection requiring traceback.
- B. The Blood Bank Clinical Lab Scientist assigned at the time will look up the following and log in Transfusion Transmitted Infectious Disease Investigation Log:
 - Date
 - Donor Identification Number and Component
 - Patient Name
 - Patient Medical Record Number
 - Physician taking care of the patient
- C. Quarantine in date blood and blood components as directed on bottom shelf in refrigerator if available



SUBJECT:
Transfusion Transmitted Infectious Disease Notification

POLICY: LB#8610-138

Page 4 of 5

DEPARTMENT: Organizational

EFFECTIVE: 03/2020

REVISED: 02/2023

- D. If confirmatory results are pending, the letter is filed under pending confirmation. If all testing is complete, go to step F.
- E. If test is negative, no further action is required. If test is positive, continue to step F.
- F. File screen and confirmation together under “Confirmed”
- G. Send HIV/HCV Lookback Notification Form to the physician. Reasonable attempts will be made to contact the recipient with 12 weeks. Document date/time for all attempts made to contact appropriate party.
- H. When form is returned, note date responded on log.
- I. Make a copy for our records and send original Lookback Notification form to Medical Records for patient’s chart.
- J. File form in “Returned Forms” area of binder.
- K. Complete Traceback Recipient Status form with as much information as possible. This form needs to be returned within 60 days. Make a copy for our files, send original to Donor and Client Support Center. If VITALANT BLOOD SERVICES does not received the form back within 60 days, they will send a second (and FINAL) notice for which a response is required in 30 days.

NOTE:

In the event the provider refuses or otherwise fails to notify recipient or is no longer at the facility, the lab will notify the patient. For non-HIV and non-HCV notification letters from VITALANT BLOOD SERVICES, refer the letter to the pathologist who will determine if notification is necessary.

REFERENCES:

Standards for Blood Banks and Transfusion Services 33rd Edition. April 2022
Code of Federal Regulations (CFR) Requirements for HIV/HCV Lookback Requirements

OWNER:

Chief Ancillary Officer

AUTHORS/REVIEWERS:

Laboratory Manager
Board Quality Committee



SUBJECT:
Transfusion Transmitted Infectious Disease Notification

POLICY: LB#8610-138

DEPARTMENT: Organizational

Page 5 of 5

EFFECTIVE: 03/2020

REVISED: 02/2023

APPROVALS:

Policy & Procedure Team:

Medicine Committee:

Surgery Committee:

Performance Improvement/

Pharmacy & Therapeutics Committee

Medical Executive Committee:

The Board of Directors:

DRAFT