

**HACKETTSTOWN REGIONAL MEDICAL CENTER
ADMINISTRATIVE POLICY MANUAL**

MEDICAL CENTER PLAN FOR SCOPE OF PATIENT SERVICES

Effective Date:	March, 1996	Policy No:	AD081
Cross Referenced:		Origin:	Administration
Reviewed Date:	February, 2013	Authority:	Executive Director
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PURPOSE

To establish a plan for the scope of patient care, treatment and services addressing:

- The needs and expectations of patients and, as appropriate, families and referral sources
- Determination of the essential services necessary to meet the needs of its patient population
- Patient/customer needs, expectations and satisfaction
- Patient requirement and their implications for staffing
- Resources (financial and human) for providing patient care and support services
- Recruitment, retention, development, and continuing education needs of all staff
- Data for measuring the performance of processes and outcomes of care
- Planning for the provision of the essential services, either directly, or through referral or contract
- Opportunities to improve processes in the design and delivery of patient care

MISSION

We demonstrate God's care by improving the health of people and communities through a ministry of physical, mental and spiritual healing.

VISION

A leading resource for innovative patient-centered healthcare.

VALUE STATEMENT

In our healthcare ministry, HRMC adheres to the following values:

- Respect** We recognize the infinite worth of the individual and care for each one as a whole person.
- Integrity** We are above reproach in everything we do.
- Service** We provide compassionate and attentive care in a manner that inspires confidence.
- Excellence** We provide world class clinical outcomes in an environment that is safe for both our patients and care givers.
- Stewardship** We take personal responsibility for the efficient and effective accomplishment of our mission.

CORPORATE STRUCTURE AND GOVERNANCE

Hackettstown Regional Medical Center is one of two acute care hospitals in Warren County, New Jersey. The Medical Center is a non-for-profit religious corporation and is recognized as tax-exempt pursuant to Section 501c(3) of the Internal Revenue Code. Hackettstown Regional Medical Center is a member of the Adventist Healthcare system, whose corporate offices are located in Rockville, Maryland. The Medical Center is a separate Medicare and Medicaid provider within the system.

PHILOSOPHY OF PATIENT CARE SERVICES

As a Christian Medical Center it is dedicated to continue the healing ministry of Christ. The Medical Center's philosophy is to provide care that is reflective of God's love, which is the basis of the healthcare philosophy of the Seventh-day Adventist Church. This philosophy emphasizes care of the whole person--mental, physical and spiritual. All persons are treated without regard to race, color, creed, religion or ethnic origin or ability to pay. All services and facilities are available to each member of the community.

ORGANIZATIONAL STRUCTURE

The structure of the Medical Center organization supports the philosophy and mission of HRMC. It was developed to provide optimal, achievable quality of patient care and to maintain a high-level of professional conduct and practices of the members. The departments, including the Medical Center-based ambulatory facilities and services participate in the development and implementation of the

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Medical Center's short-term and long-range organizational goals. The administrative team of the Medical Center include: the President, Chief Operating Officer, Chief Financial Officer, Chief Medical Officer, Chief Nursing Officer, Executive Director of Business Development, Administrative Director, and Director of Human Resources. The members of the administrative team are called the Presidents' Council. Each member is responsible for product lines and/or services provided within the organization.

All departments have managers/directors who report to a member of the Presidents' Council. During normal working hours, one member of Administration is on site. The President is the highest administrative officer; in his absence, the Chief Operating Officer acts in his stead. During off-hours, there is always a member of the Presidents' Council on-call via telephone or long range beeper.

Each member of the Presidents' Council is empowered to create an environment within their area of responsibility that reflects the mission, vision and values of HRMC in the most efficient and effective manner. The COO, CMO, CNO, CFO, Administrative Director, Quality, Director of Human Resources and Executive Director report directly to the President. Each member is responsible also for creating multi-disciplinary teams within their clusters to provide input and feedback to all administrative decisions. The Council meets weekly.

The President is the Chairperson of the Leadership Council, and each manager/director/administrative director member has an equal vote on all decisions. Each member is responsible for representing and reflecting issues and concerns of all areas within their area of responsibility on this Council as well as implementing and following through all decisions that are passed. The Leadership Council meets bi-weekly and includes all members of President's Council, directors, and managers of all departments of the Medical Center, including, off-site departments.

The Chief Nursing Officer has the accountability and responsibility for the provision of nursing care within the Medical Center and at off-site Medical Center-based ambulatory care facilities (Center for Healthier Living and Emergency Medical Transport Services). This person is also charged with the responsibility of ensuring integration of patient care is provided throughout the Medical Center system. Nursing Councils guided by a Coordinating Council have been established to empower the RN staff with the authority, autonomy and control that is consistent with a professionally based practice model.

The President reports directly to the President and CEO of Adventist HealthCare and to the HRMC Board of Directors. The President provides direction to the administrative team of HRMC that assures the fulfillment of the mission of Adventist HealthCare and Hackettstown Regional Medical Center. While the President retains ultimate decision-making authority, it is the President's Council that provides a broad-based foundation for planning, decision-making and policy-making. The President serves on a number of boards and committees that represent the interest of the Medical Center. Some of these organizations include the Warren County Regional Chamber of Commerce and the Rotary Club of Hackettstown.

RESPONSIBILITY OF THE BOARD OF DIRECTORS

The Board of Directors are entrusted by the community and the Adventist HealthCare Board with the responsibility of providing high quality, cost effective healthcare for the members of the community. The services provided by the Medical Center are guided by the mission, philosophy and vision of the Medical Center. The ultimate goal of the services provided is to reach 100% customer satisfaction while meeting and exceeding all state and federal quality indicators. HRMC is licensed by the State of New Jersey and accredited by the Joint Commission (JC) to provide a valued and necessary service to the community. The Board maintains the mission and vision of the Medical Center through the following:

- Participates in the Strategic Planning process to determine the continuum of services to be provided on and off campus;
- Approves annual financial objectives of the organization;
- Approves annual strategic plan, master facility/site plan and capital budget;

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- Ensures that the provision of services is appropriate to the scope and level approved by licensing and accreditation standards;
- Approves the provision of services through affiliation and referral agreements to complete the continuum of care for services needed for patients;
- Reviews and approves all quality indicators for hospital and physician performance;
- Reviews and approves the Quality Performance Improvement Plan;
- Review and approves all physicians recommended for admitting and consulting privileges;
- Appoints the members of the Medical Staff every two years;
- Reviews at least quarterly reports on risk management, safety, quality, patient satisfaction and infection control.
- Approves the development of all new services and or the removal of services, including but not limited to the number of licensed beds, new departments, and Medical Center-based ambulatory care facilities.

The Chairperson of the Board is the President and CEO of the Adventist Healthcare System. The Secretary of the Board is the President of HRMC. Standing committees of the Board include Finance, Professional Practice and Strategic Planning. The membership, authority and responsibilities of each committee are defined in the HRMC Corporate Bylaws. Special committees may also be appointed upon authorization of the Board.

LEADERSHIP

The leadership of Hackettstown Regional Medical Center takes responsibility for providing the foundation and support for planning, directing, coordinating, providing and improving health care services. These services are based on assessed and identified needs and are designed to improve patient health outcomes and protect patient safety. The services are also designed to be in accordance with the organization's mission, vision, values and strategic plan. The Chief Nursing Officer represents Nursing Services in the functional and strategic planning process.

MEDICAL STAFF

The Hackettstown Regional Medical Center includes physicians, dentists, podiatrists and licensed clinical providers who are privileged to attend to patients in the Hospital. The Medical Staff conducts itself according to Bylaws, Rules and Regulations and policies of the medical staff that set forth its organization and governance. Medical Staff Bylaws and Rules & Regulations are subject to approval by the Board of Trustees, which retains ultimate authority and responsibility for the conduct of the Hospital and the quality of patient care rendered therein. The Medical Staff elects officers of President, Vice President, Secretary and Treasurer and also approves appointments for Directors of Clinical Departments.

AFFILIATIONS

- Clinical Services
 - Morristown Memorial Hospital, a tertiary care facility in Morris County is the closest to HRMC and is a Level I Trauma Center. HRMC has agreements to provide specialized services for obstetric patients and newborns, and is the designated comprehensive stroke center services for stroke patients requiring a higher level of services and is the designated pediatric hospital for the service area. This hospital provides all tertiary services for residents of our service area.
 - Hackensack University Medical Center provides back-up tertiary level of care.
 - St Luke's Warren Hospital is the designated hospital in the county to provide inpatient psychiatric care for patients admitted under volunteer status

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- o Newton Memorial Hospital is the designated hospital to provide inpatient psychiatric care for patients admitted under involuntary status. This inpatient psychiatric unit admits both voluntary and involuntary patients from both Warren and Sussex counties.

Clinical Student Affiliations:

- o Adventist University of Health Sciences – Physical / Occupational/SpeechTherapy
- o Andrews University - Therapy
- o Centenary College – Counseling & Addiction
- o College of St. Elizabeth’s – Nutrition
- o County College of Morris – Radiography & Nursing
- o Cure Center for Ultrasound Research - Sonography
- o Delaware County Community College - RNFA
- o Dover Business College - Nursing
- o Eastwick College – Cardiology tech
- o Independence University – Respiratory Therapy
- o Montclair State University – Respiratory Therapy
- o Seton Hall University – Counseling & Physical /Occupational/Speech Therapy
- o Shenandoah University - Nutrition
- o Warren County Community College – Unit Coordinator, Nursing, Phlebotomy
- o Warren County Vocation-Technical School - Nursing
- o Wicks Education – Wound Healing

PROVISION OF PATIENT CARE

SCOPE OF SERVICES

Hackettstown Regional Medical Center (HRMC) is a 111-bed, not-for-profit, acute care, medical and surgical hospital serving the communities of Warren County (Hackettstown, Independence, Mansfield, Washington, and Oxford Townships), Morris County (Mt Olive and Washington Townships), and Sussex County (Stanhope, Netcong). HRMC is licensed by the New Jersey Department of Health and Senior Services and the Division of Mental Health and Substance Abuse Services. HRMC is accredited by the Joint Commission and the College of American Pathologists, American College of Radiology HRMC is a designated Primary Stroke Center accredited by the Joint Commission.

HRMC has 111 licensed beds and 99 staffed beds. Planned inpatient services offered to the community include the following essential services:

<u>Inpatient Services</u>	<u>Licensed Beds</u>	<u>Operating Beds</u>
Medical Surgical Beds	53	51
Progressive Care Unit	21	21
ICU/CCU	8	8
Obstetrical Unit (Childbirth Family Center	10	10
Postpartum and Recovery	19	15
Total	111	105

Patient Services include:

- * Acute Renal Dialysis
- Bariatric Program
- Cardiopulmonary Services
- Care Management – Discharge Planners, Case Managers and Social Workers
- * Counseling & Addiction Center – Outpatient only
- Diagnostic Imaging Services – Fluoroscopy, CT – 16 Ultrasound, Nuclear Medicine, Mammography
- * Emergency Department
- Emergency Medical Transport Services – BLS, SCT and 911
- * Health Start Clinic
- Hospitalists – contracted service
- Joint Replacement Center – knee, hip and spine

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- * Lithotripsy – contracted service
- * Outpatient Chemo and Infusion Therapy Services
- * MRI – Joint Venture with Radiology Physician Group
- Re-admission program – CHF
- * Radiation Oncology Center – PET/CT within the Joan Knechel Cancer Center
- * Surgical Services (Ambulatory, Inpatient and Minor Procedures)
- Therapy Center – Physical Therapy, Occupational Therapy, Speech Therapy, Cardiac Rehabilitation
- Sleep Disorders Center
- * Wound Healing Center – two hyperbaric chambers

Ancillary patient care services are those areas that have direct contact with inpatient and outpatients for care, testing, and other services. Along with patient care services, ancillary patient care services require specialized knowledge, judgment, and skill derived from the principles of biological, physical, behavioral, psychosocial, and medical sciences. The staff of ancillary patient care services are licensed and/or certified in their specialty. Ancillary patient care services include:

- ** Infection Control
- * Laboratory/Pathology Services
- * Nutritional Care Services
- * Pastoral Care
- * Pharmacy

Patient support services include individuals and departments who support direct patient care providers. Support services ensure that patient care and ancillary patient care services are maintained in an uninterrupted and continuous manner, by coordinating identified organizational functions. The following services support the comfort and safety of the patient and the efficiency of services available.

- ** Center for Healthier Living – community education, screening, health fairs and corporate health & school health
- Central Sterile Processing
- Clinical Informatics
- Diabetes Education
- * Employee Health
- * Environmental Services
- * Finance – Accounting, Budget Reimbursement, Patient Business
- * Human Resources
- * Information Systems – IT
- Life Safety
- * Maintenance/Security and Facilities Management
- * Materials Management
- * Medical Records
- * Medical Staff Office/Library
- Nursing Administrative Services
- Outcomes Management
- * Patient Education
- * Patient Registration and Admission
- * Patient Relations
- Patient Safety
- Pre-admission Testing
- Organizational Development – including staff development, patient education and LEAN
- Quality Management
- Risk Management

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- * Staff Development
- * Strategic Planning/Marketing/Public Relations
- * Volunteer Services

PATIENT CARE PROVIDERS

Patient services and patient care are provided primarily by licensed personnel. Unlicensed assistive personnel may perform patient care activities as determined by the treatment plan and as delegated by a professional.

The medical staff is responsible for the medical plan of care and has the responsibility to assess and improve patient care services and processes within the institution. The medical staff's role in policy development and performance improvement is pivotal within the organization. Practitioners with clinical privileges provide medical services in accordance with the Bylaws and the Rules and Regulations of the medical staff.

The following grid identifies key members of the Health Care Team and their areas of responsibility:

Staff	Assessment	Planning	Intervention/Treatment	Invasive Procedures	Patient Rights	Discharge Planning	Nutritional Care	Patient Education
Chaplains	X	X	X		X	X		X
Clinical Nurse Specialists	X	X	X		X	X	X	X
Nurse Practitioners	X	X	X	X	X	X	X	X
Pharmacists	X	X	X		X	X	X	X
Physical Therapy OT/PT/ST	X	X	X		X	X		X
Physician	X	X	X	X	X	X	X	X
Registered Dieticians	X	X	X		X	X	X	X
Registered Nurses	X	X	X		X	X	X	X
Respiratory Therapists	X	X	X		X	X		X
Social Workers	X	X	X		X	X		X

PERFORMANCE IMPROVEMENT

The Performance Improvement Plan serves as the foundation for establishing a collaborative interdisciplinary approach which takes into account the unique knowledge, judgment and skills of a variety of disciplines in achieving desired patient outcomes. Open lines of communication exist between all departments providing patient services and support services within the Medical Center, and as appropriate, with community agencies to ensure efficient, effective and competent patient care. All service areas (departments) are responsible for participating in and following the Performance Improvement Plan and for ensuring integration of patient care processes. Each department is responsible for a PI program that includes Quality Control, Quality Assessment/Improvement and Performance Improvement.

To facilitate effective interdepartmental relationships, problem solving is encouraged at all levels within the organization. Staff is supported to be open to addressing issues, concerns and seeking mutually acceptable solutions. Directors and managers have the authority to mutually solve problems and seek solutions through positive interdepartmental communications within their span of responsibility.

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When opportunities to improve processes are identified and they involve two or more key service areas, a team may be chartered through the Performance Improvement Steering Committee. Other options for seeking solutions to both inter and intra departmental issues include establishing committees, task forces or informal departmental teams. The Performance Improvement Department facilitates hospital-wide performance improvement as outlined in the Performance Improvement Plan. Hackettstown Regional Medical Center utilizes the Plan-Do-Check-Act (P.D.C.A.) methodology in problem solving.

SCOPE OF SERVICES PROVIDED

A. Scope of Care

The population utilizing healthcare services at HRMC consists of the newborn to the geriatric patient. Community based healthcare is provided in a non-tertiary setting, with all patients requiring high-risk care and services are referred or transferred to a healthcare facility where there needs can be met.

Each department and service providing patient care delineates the *scope of care* to patients. The scope of care includes:

- the types (such as most frequent diagnosis) and ages of patient populations
- the types of services provided
- the hours of operation and method used for ensuring that hours of operations meeting the needs of the patients to be served

B. Definition of Age Classification

Neonate	Up to 3 months
Infant	3 months - 2 years
Child	3 years - 12 years
Adolescent	13-18 years
Adult	19-69 years
Older Adult	70+ years

STAFFING PLANS

Each department and service providing patient care delineates a basic staffing plan based on the level and scope of care that needs to be provided and the frequency of the care to be provided that ensures appropriate and safe patient care. This includes the skill level of staff. Each department has a staffing plan which is reviewed based on the following: utilization review, employee turnover, performance assessment and improvement activities, program/technology changes, and changes in customer satisfaction/needs/expectations.

CONSULTATIONS AND REFERRALS FOR PATIENT SERVICES

A full range of medical and professional services are available to meet the needs of our patients. Physician Consulting Services for assessments and services are ordered by the patient's attending physician or by the patient's emergency room physician. Professional consultative services are also ordered by the attending physician, but may be ordered in specific circumstances by other healthcare professionals. All medical staff consultants are credentialed and approved by the Medical Staff and the Board of Directors.

STAFF EDUCATION

All employees receive a formal Medical Center and unit/department orientation consistent with the scope of responsibilities defined by their job description and the patient population that they will be assigned to provide care. In addition, systems are in place to provide mandatory ongoing in-services to employees. Unit in-servicing is accomplished by each department. Staff Development also coordinates regular education programs based on the learning needs of staff. Continuing education seminars and workshops are planned and presented several times each year for all patient care personnel. The Staff Development

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Coordinator is responsible for overseeing education activities for all patient care employees, taking into consideration staff competency. Select departments offer specialized educational programs respective to their discipline and/or as identified to meet competency requirements.

MEDICAL EDUCATION

Medical Staff participate in a variety of formal and informal educational programs. The programs are coordinated by the Medical Staff Office and are based on areas of interest and/or identified patient care needs. A Medical Staff Library houses current journals and books, and the Medical Staff Office can assist with obtaining articles not available in the library.

CLINICAL FACILITIES

Clinical facilities are provided for students to support HRMC's commitment to community, patient care education and recruitment of staff. Formal written agreements are in place for each School with regular affiliations. These agreements stipulate that HRMC retains ultimate responsibility for the care of the patient.

PATIENT SATISFACTION

Patients demand and deserve not only care that is clinically competent but also caregivers who always provide the most compassionate care and courteous services to each and every patient as expected within the Values of HRMC. To insure excellence in patient satisfaction, HRMC participate along with many hospitals across the country in the HCAHPS survey that measures and benchmarks performance on standard questions in each of four survey areas: Inpatient, Outpatient, Emergency Department and Ambulatory Surgery.

The survey results are shared with the staff and the physicians. Under the leadership of the CNO, task forces have been established to focus on specific areas that require attention and improvement. The areas include: noise on the medical/surgical units, pain management, cleanliness, medication education, communication,

Department managers are also required to submit specific action plans related to the items that impact their departments. Patient satisfaction is one of the major components of employee orientation where employees learn about telephone etiquette, service recovery, scripting and behavioral "We Care" standards from line managers at the Hospital. New staff are also introduced to the Lean philosophy and processes to insure patient safety and patient satisfaction.

PATIENT SAFETY

HRMC has developed an organization-wide philosophy that has patient safety as our number one goal in providing patient care. The Medical Center recognizes that to be effective in improving patient safety there must be an integrated and coordinated approach to reducing errors. To achieve this goal, HRMC has a patient safety program that includes, but is not limited to, the following:

- An integrated safety program that includes medical staff, clinical leaders, staff, patients and visitors;
- An environment that fosters blame-free reporting of errors;
- Procedures for immediate response to medical/health care errors;
- Mechanisms for intensive analysis of various types of occurrences;
- Mechanisms for proactive risk-reduction activities

REVISION OF PLAN

HRMC's plan for providing patient care will be reviewed at least annually, and as necessary, revised. Significant changes in patient care needs or the findings from performance improvement activities may necessitate review and revision of the plan. The plan will be integrated with the organization's business development and budget processes.