

POLICY & PROCEDURE



TITLE: Standing Orders – Clinical Care Delivery				
Scope/Purpose: To permit each clinical employee to act at his/her highest level of training and licensure in order to achieve the highest quality care and efficient patient flow in a team environment. To assure preventive and diagnostic services are provided in a timely manner to effectively identify and monitor medications use, disease states, and health maintenance efforts of the patient. To facilitate the population management goals set forth by the Health Resources Services Administration.				
Division/Department: All HealthPOiNT Clinics			Policy/Procedure #:	
Original Date: September 13, 2013			<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement for:	
Date Reviewed:	Date Revised:	Implementation:	CPIC Approved:	Board Approved:
	12/05/2013	12/17/2013	12/17/2013	
Responsible Party: Chief Medical Officer, Director of Clinical Quality				

DEFINITIONS:

Licensure: Certain clinical staff member are licensed by the State of Texas or accredited by national organizations, to perform defined patient-care activities under the direction of a Physician, Nurse Practitioner, or Physician Assistant.

Standing order: An order for a specific patient-care activity that may be applied to any patient meeting criteria during a defined time period.

POLICY:

- I. HealthPOiNT will permit appropriately skilled clinical staff to execute standing orders when the order addresses a specific patient-care activity that can be applied to any patient meeting criteria during a defined time period.
- II. The standing order is documented in the medical record by the individual making the order, and the requisitions to laboratory, x-ray, or other providers are made under the name of the treating or primary clinician.
- III. All staff will be oriented to the Standing Orders protocol prior to generating orders for the patients.
- IV. HealthPOiNT Quality Improvement Committee will monitor the Standing Order protocol to assess safety, cost, and quality measures. In addition, the committee will revise the standing orders periodically to reflect practices in care delivery.

PROCEDURE:

- I. The Medical Director, in conjunction with Providers, will draft and recommend standing orders to the medical team through the Quality Improvement Committee. Standing orders will align with the Clinical Guidelines established by the Medical Director.
- II. HealthPOiNT medical staff will authorize routine standing orders to enhance and streamline medical care.
- III. Staff is prompted to use standing orders by referring to disease management templates in the EMR and will soon use the Health Maintenance reminder system to prompt orders.

REFERENCES:

NCQA's Patient-Centered Medical Home, 2011

REQUIRED BY:

2011PCMH STANDARD 1ELEMENT G/FACTOR 3

POLICY/PROCEDURE TRACKING FORM (to be added as last page of each P&P for documentation of changes)

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Date of Revision		Description of Changes		
12/05/2013		Included PCMH standard/ updated format		