CHAPTER 11

Office Policies and Procedures

LEARNING OBJECTIVES

Upon completion of this chapter, you should be able to:

- Spell and define the key terms in this chapter.
- Create a patient education pamphlet.
- List the steps for creating a personnel manual.
- Create a policy and procedure manual for the medical office.
- Describe the different types of procedures (clinical, administrative, infection control, and quality improvement and risk management) in the medical office.

brochure
chain of command
mission statement

organizational chart
personnel manual
policy

procedure

Case Study

Take note of the following scenario and answer the case study questions that appear at the end of this chapter.

Steve Croffut has recently obtained his first job as a medical office manager. On Steve's first day, he asks one of the physicians if there is a manual that outlines office procedures. The physician tells Steve that the previous office manager never took the time to compose a procedure manual. She asks Steve if he would be willing to take on such a task.

Introduction

Every business needs written policies and procedures to ensure that employees know how to perform their jobs correctly, and healthcare is no exception. Policies and procedures are perhaps even more important in the medical field than in other fields because they may contribute to patient safety and risk reduction. A **policy** is a statement of guidelines or rules on a given topic. A **procedure** describes the steps used to perform a given task or project.

The policy and procedure manual in the medical office allows management to set up standards for how work is to be performed and to monitor the employees' performance based on those standards. New employees will find a policy and procedure manual to be extremely helpful while training for their new job. By using the manual for training, the medical office manager ensures that all new employees understand the expectations for performance.

policy
a statement of guidelines or rules on a given topic

procedure
steps used to perform a given task or project

Creating Patient Education Pamphlets

Every member of the healthcare team is responsible for educating patients. Much of the information that patients receive may be in written form. Many medical offices buy educational **brochures** to give to patients. These documents are available on a multitude of topics, including back pain, child immunizations, and menopause (Figure ■ 11-1). Educational brochures and pamphlets do not take the place of face-to-face education of the patient; they are a supplement to the education given in verbal form. These brochures allow the patient to review material after the visit or to give information to a spouse after the medical visit.

brochure
a document containing information about a topic

FIGURE ■ 11-1 Having educational materials available to the patients in the reception area is very common.
Source: Leticia Wilson/Fotolia

Critical Thinking 11.1 ?

Why would giving educational brochures to patients be helpful to the physician treating those patients?

Typically, medical offices will have a supply of brochures or pamphlets that pertain to the type of care or type of patient seen in that practice. For example, a pediatrics practice might have educational pamphlets with information on preventing accidental injuries. An OB/GYN practice might have educational brochures with information about pregnancy or other women's health conditions. Depending on the cultural makeup of an office's patients, brochures may be printed in various languages.

Brochures may be purchased from vendors, or physicians may want to create their own brochures. Brochures can provide patients with more details about how a certain physician treats a certain condition or list a particular physician's recommendations regarding medications or care. These types of brochures can be created with the help of in-house staff or a professional printing company. Regardless of how the office chooses to create patient education pamphlets, those pamphlets must be professional. Any educational material given to the patient should be printed using layman's terms; the material should be easily understood by any person with an education level no higher than the 10th grade. All printed material must be accurate, up to date, and free of typographical errors.

Critical Thinking 11.2 ❓

Why do you think brochures should be printed using layman's terms only? Do you think there is any problem with giving a patient an educational pamphlet that is far above that patient's level of medical understanding? Why or why not?

Creating a Personnel Manual

A **personnel manual**, also called an employee handbook, lists the rules and regulations that apply to all staff in the medical office (Figure ■ 11-2). This manual also thoroughly explains the office's benefits for health, life, and disability insurance, among others. Many offices give all new employees copies of their personnel manuals upon hire. Other offices keep single copies in central locations. In many healthcare facilities, personnel manuals are kept electronically on the organization's intranet. This allows employees to search the manual for a desired policy, and for policies to be updated as needed without having to reprint manuals for employees.

personnel manual
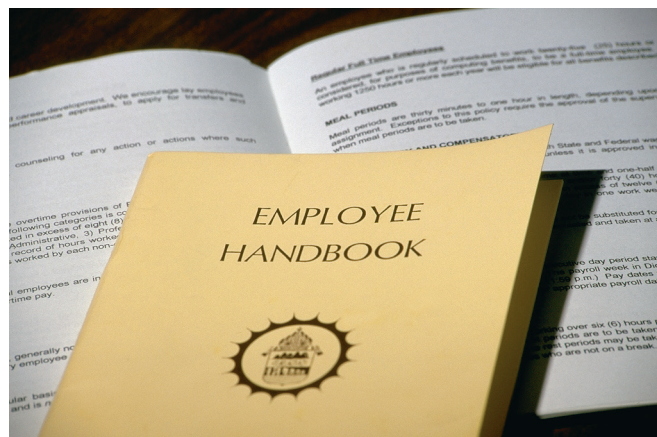a compilation of employment policies for an office; also called an employee handbook

FIGURE ■ 11-2   The employee handbook should be updated on a regular basis and made available to each new employee.
Source: Tony Freeman/PhotoEdit

Critical Thinking 11.3 ❓

Why might a new employee find the office personnel manual helpful? What are some policies you think a new employee would want to review first?

To create a personnel manual, the office manager and/or physician should start by listing the topics they would like to see included. The personnel manual should have a section for all events or occurrences that might conceivably happen in the office. One way to start this process is to create a list of all policies or procedures for which a new employee will need training. Each of these items should be included in the personnel manual. For ideas, a medical office manager might consult the personnel manuals of other medical offices. It is important to keep federal and state laws in mind for all content included in the manual to ensure all policies are within legal boundaries. The following items are commonly found in personnel manuals:

- **Evaluation process**—How often will employee evaluations occur? What information are employees required to provide before evaluations? Are pay raises associated with evaluations?
- **Absentee policies**—Whom should employees call in the event they must miss work? Are employees responsible for finding replacements when they must miss work? Are doctors' notes required in the event of illness?
- **Confidentiality policy**—What are the penalties for violating patient confidentiality? What constitutes a violation of patient confidentiality? How does the office require certain situations be handled, such as calling out the patient's name in the reception room?
- **Continuing education requirements**—Does the office require written verification of attendance or completion of continuing education? Does the office require more hours of continuing education than the employee needs for recertification/relicensure? Does the office require certain types of continuing education, such as clinical or administrative? Are all members of the staff required to have basic life support training?
- **Grievance procedures**—How should employees handle situations in which they disagree with their supervisors?
- **Orientation process**—What are employees responsible for during orientation? Who do employees answer to during orientation? How long does orientation last?
- **Parking**—Are employees required to park in certain areas? Are employees required to pay for their own parking? Are there incentives for employees who carpool or take public transportation?
- **Pay**—What is the starting rate of pay? At what point are pay increases possible?
- **Health and dental benefits**—Are health and dental benefits available? At what point are employees eligible for these plans? Are employees able to add coverage for their spouses/children? Where can employees find information on benefits?
- **Staff meetings**—How often are staff meetings held? Are staff meetings compulsory? Where are staff meetings held? What type of information should employees bring to staff meetings?
- **Paid time off**—Are employees eligible for paid time off? How should time off requests be handled? How far in advance should requests for time off be submitted?
- **Holiday compensation**—Are employees paid extra for working on holidays? If the office is closed on holidays, are employees compensated? How does the office manager determine which employees to schedule for holiday work?
- **Sexual harassment**—What constitutes sexual harassment? How should employees handle incidences of sexual harassment?
- **Personal telephone use**—Is personal use of office telephones permitted? Under what circumstances? What are the penalties for excessive personal telephone use?
- **Personal computer use**—Is personal use of the office computers permitted? Under what circumstances? What are the penalties for excessive personal computer use?
- **Vacation days**—Are employees eligible for paid or unpaid vacation days? At what intervals? How do employees request vacation days?
- **Severe weather or power outage**—What is the policy should severe weather prevent employees from traveling to the office? What is the policy should the office lose power?

- **Emergency fire procedures**—How are fire emergencies handled? Who is responsible for clearing patients from the office?
- **Emergency procedures for patient accidental injury**—How are patient injuries handled in the office? Under what circumstances are emergency personnel called to the office?
- **Jury duty**—How should employees notify the office of jury duty? Does the office pay employees during jury duty?
- **Maternity leave**—Employers with 50 or more employees must give employees up to 12 weeks off after the birth or adoption of a child under the Family Medical Leave Act. Will the employer offer any of that time paid? Is the employee able to use accrued vacation time for maternity leave? Are male employees able to take time off after the birth or adoption of a child?

Critical Thinking 11.4 ?

Imagine you are creating a personnel manual for a medical office. Reviewing the policies described in the previous section, which of these do you think should be worked on first? Why did you choose those?

Creating Policies and Procedures for the Medical Office

The medical office's policy and procedure manual may contain both policies and procedures, or policies and procedures may be separated. Policies are written instructions outlining what an organization's rule is regarding a certain topic, such as benefits, vacation accrual, and time off. Procedures are written steps for how one is expected to carry out an individual policy. Whatever the approach, each policy and procedure manual should contain the following items in separate sections:

- Mission statement
- Organizational chart
- Personnel policies
- Clinical procedures
- Administrative procedures.

A table of contents should clearly direct readers to desired pages. Per Occupational Safety and Health Administration (OSHA) and HIPAA regulations, infection control and quality improvement and risk management procedures must be kept in separate notebooks and reviewed and updated regularly.

One of the most important reasons for having a medical office policy and procedure manual is to clarify rules and regulations and the physicians' expectations for procedures. Strict adherence to policies as they are outlined achieves uniformity in the office and provides a fair method of treating staff equally.

To ensure ongoing compliance and relevance, all medical office policies should be reviewed and updated regularly. Many large medical offices separate their policy manuals into clinical and administrative sections. Some offices further divide their manuals according to position or department. Table ■ 11-1 identifies ancillary policies that may be found in medical office policy and procedure manuals.

Critical Thinking 11.5 ?

Why do you think a policy and procedure manual should be reviewed and updated regularly? What do you think could happen in a medical office if the policies and procedures are allowed to become out of date?

TABLE ■ 11.1 Ancillary Policies that May Be Found in Medical Office Policy and Procedure Manuals

Policy or Procedure	Purpose
Emergency Closure Policy	Outlines the steps to take in the event the office closes due to an emergency.
Opening Office Policy	Outlines the steps to take to open the office at the beginning of the day.
Building Lockup Policy	Describes the steps to take to lock the building at the end of the day.
Publications and Distribution Policy	Outlines the policy with regard to allowing publications or pamphlets to be distributed to patients and staff.
Smoking Policy	Describes the availability of smoking areas near the office.
Personal Relationships Between Office Staff Members	Outlines the policy for personal relationships between coworkers.
Personal Relationships Between Staff and Patients	Outlines the policy for personal relationships between office staff and patients.
Termination Policy	Describes the policy for terminating employment.
Disciplinary Policy	Describes the policy for disciplining of employees. Includes an outline of the offenses justifying discipline.
Grievance Policy	Describes the process staff must follow to file grievances.
Continuing Education	Outlines the requirements for continuing education.
Malpractice Insurance	Describes the requirements for holding malpractice insurance.
Reimbursement for Seminars	Outlines the policy for reimbursing staff who attend medical-related seminars.
Computers for Personal Use Policy	Describes the policy for personal use of office computers.
Petty Cash Funds	Describes the policy for using petty cash, including the type of expenses that qualify as petty cash and the amount to be kept as petty cash.
Parking Policy	Outlines where employees may park, as well as reimbursement for parking expenses.
Dress Code Policy	Describes the dress code for each office position.
Disclosure of Patient Information Policy	Describes the procedure for disclosing patient information, including the forms required and the HIPAA regulations.
Job Descriptions	Provides a job description for each office position.
HIPAA Privacy Officer Duties	Outlines the duties of the HIPAA privacy officer in the medical office.
Calling Patients from the Reception Room	Describes the procedure for calling patients from the reception room.
Missed Patient Appointments	Describes the steps to take when patients miss their appointments. Includes proper charting technique.
Termination of the Physician/Patient Relationship	Outlines the steps to be followed to legally terminate a physician/patient relationship.
E-Mail Policy	Describes the conditions under which the medical office may e-mail information to patients or other facilities.
Obtaining Consent for a Procedure	Describes the consent forms used in the medical office and outlines the process of witnessing patient signatures.
Prescription Refill Requests	Outlines the policy for taking telephone calls for prescription refills, including documentation in the patient's medical record.
Jury Duty Policy	Describes the policy for employees called for jury duty.
Sick Leave Policy	Describes the policy for employees who take sick leave.
Personal Telephone Calls	Describes the policy for employees making and receiving personal telephone calls.

MISSION STATEMENT

The policy and procedure manual for a medical office should begin with an office **mission statement** that is concise and communicated to all staff. For example, a mission statement might read "To care for all patients in a compassionate and dignified manner, with a focus on patient safety and satisfaction." Many medical offices frame and hang their mission statements in the offices as well as place the statement prominently on the offices' websites for patients to see.

The mission statement should be short so that it is easily remembered by members of the healthcare team. In many organizations, the mission statement is created by soliciting feedback from all employees. This allows an organization to create a mission statement that has input from everyone in the organization.

In many practices, annual employee performance evaluations include feedback on how the employee performs in relation to the organization's mission statement. For example, in a practice with the mission statement listed above, employees might be evaluated on how well they do toward treating patients in a compassionate and dignified manner, and how they do at avoiding patient injury and increasing patient satisfaction.

mission statement
a statement that describes a medical office's reason for existing

Critical Thinking 11.6 ?

Why do you think some organizations solicit feedback from all employees in creating a mission statement? How might that organization benefit from this practice? How might the employees benefit?

ORGANIZATIONAL CHARTS

In addition to the mission statement, all policy and procedure manuals should break down the offices' organizational structures in an **organizational chart** (Figure ■ 11-3). Organizational charts are maps to office hierarchies, from physicians to entry-level staff. Members of the healthcare team should be able to use these charts to identify their supervisors, as well as their supervisor's supervisor, all the way to the top of the **chain of command**. In addition to reporting structure, an organizational chart might explain how employees can contact varied healthcare staff. Because organization charts change as people move in and out of positions, these charts should be updated on a regular basis.

organizational chart
a visual breakdown of the chain of command in a business

chain of command
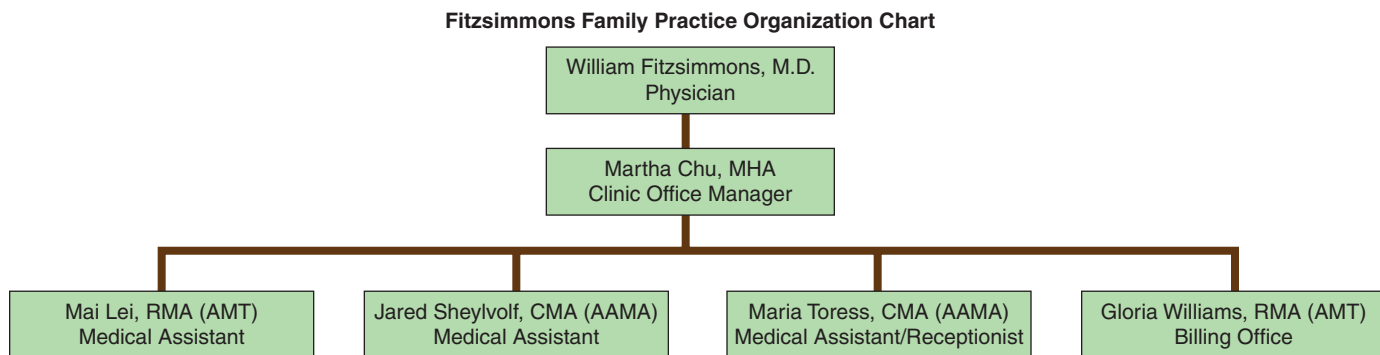a series of positions in which each position has authority over the position below

Fitzsimmons Family Practice Organization Chart

FIGURE ■ 11-3 Sample organizational chart for a medical office.

Critical Thinking 11.7 ?

How does having access to the clinic's organizational chart potentially help an employee?

CLINICAL PROCEDURES

Any clinical procedure that requires staff to interact with a patient should be documented for employee reference. Procedures should clearly list appropriate steps, as well as information

on patient education, documentation, and infection control. The types of clinical procedures found in a policy and procedure manual vary according to the type of medical practice and the physician's specialty (Figure ■ 11-4). Clinical procedures should be documented to include such specific topics as:

- Use of the automated external defibrillator
- Procedures, instruments, and positions for various physical examinations
- Draping procedures for physical examinations
- Taking and documenting height, weight, vision, hearing, and chief complaint from the patient
- Procedure for emergencies in the medical office
- Dressing, bandaging, and splinting
- Taking and documenting subjective and objective findings
- Administering injectable medications.

Policy: Administering Injectable Medications
Purpose: To provide injectable medications to the patient per physician orders.

1. Verify the Five Rights of Medication.
   - Verify patient identity by asking the patient his or her full name and birth date.
   - Verify the route the medication is to be delivered by checking physician orders.
   - Verify that the correct dose of medication has been drawn by checking the physician orders.
   - Verify that the time of the medication administration is correct by checking the physician orders.
   - Verify that the medication is correct by checking physician orders and the label on the medication.
2. Administer the medication according to physician orders.
3. Discard the syringe in the sharp's container.
4. Document the medication administered, including dose and route, in the patient's medical record.

FIGURE ■ 11-4 Sample clinical procedure.

Critical Thinking 11.8 ?

How might the clinical procedures in a pediatric practice differ from the procedures in a cardiology practice? What might be included in the pediatric procedure manual that is not needed in the cardiology manual?

ADMINISTRATIVE PROCEDURES

Administrative procedures should be documented to include such specific topics as:

- Office opening and closing
- Inventory and supply ordering
- Appointment scheduling
- Patient accounting and bookkeeping
- Insurance processing
- Insurance benefit verification
- Patients' records release
- Medical records management
- Operation of administrative office machinery.

Like clinical procedures, administrative procedures vary according to the type of medical practice, but the vast majority of administrative policies remain constant from office to office (Figure ■ 11-5).

Policy: Releasing Medical Records to a Patient
Purpose: To release medical records to the patient following legal guidelines.

1. Verify the patient's identity by requesting photo identification.
2. Obtain the patient's signature on the release-of-records form.
3. Ensure the patient has dated the release form.
4. Check to see if the patient has made any alterations to the release form, such as restricting the records release to a limited date.
5. Check to see if the patient has checked the boxes allowing release of information regarding HIV/AIDS, reproductive health, mental health, or drug and alcohol rehabilitation.
6. Pull the patient's medical record.
7. Photocopy the appropriate parts of the medical record according to any limitations noted by the patient on the release form.
8. Send copies of the records to the patient.
9. Note in the patient's file when the records were released.
10. File the original signed release form.

FIGURE ■ 11-5 Sample administrative procedure.

Critical Thinking 11.9 ?

Do you think the administrative procedures in a pediatric practice would differ much from those in a cardiology practice? If so, in what way?

INFECTION CONTROL PROCEDURES

Infection control procedures should be written for all of a medical office's applicable procedures, including:

- Biohazardous waste disposal
- Employee needlestick injuries
- Employee exposure to infectious materials
- Employee education for infection control
- OSHA-required documentation
- Local, state, and federal reporting requirements for infectious agents.

As mandated by OSHA, infection control procedures must be part of the office's exposure control plan, which must be kept separate from other procedure manuals in the office and must be made available to an OSHA inspector when needed. In many practices, new employees must sign a form after training on infection control policies. This practice ensures that employees fully understand how to avoid spread of infection for that particular procedure.

Critical Thinking 11.10 ?

Do you think it would be beneficial to a new employee to have him or her sign the infection control policies after training on each one? Why or why not? Do you think it would be beneficial to the employer to have the employee sign after training? Why or why not?

QUALITY IMPROVEMENT AND RISK MANAGEMENT PROCEDURES

Risk management procedures are those designed to reduce patient or staff injury in the medical office. These policies range from information on washing children's toys in the

reception room to handling life-threatening patient events in the office. Often, these policies arise as a result of an event that has happened in the office. For example, if a patient who is unsteady on his or her feet falls while walking from the reception room to the exam room, a risk management policy may be written to address a safer way to escort a patient who is unsteady (Figure ■ 11-6).

Policy: Escorting Patients While in the Medical Office
Purpose: To keep patients from falling while in the medical office.

- When greeting the patient, visually determine if the patient is able to walk unassisted. If the patient is in a wheelchair, or using a device (walker or cane), or appears unsteady in their gait, offer to assist.
- Assist any patient who needs help by gently taking the patient's arm.
- Walk at the same pace as the patient and do not allow the patient to be out of your sight as you escort them.

FIGURE ■ 11-6 Risk management policy for escorting patients.

Quality improvement policies are those that address potential problems in the office, such as those relating to patient satisfaction. For example, a medical office may create a quality improvement policy in order to reduce the patient wait time on the telephone (Figure ■ 11-7).

Policy: Patient Wait Time on the Telephone
Purpose: To keep patients from waiting on the telephone longer than 1 minute before call is taken.

- When patients call into the office, the call is sent to a queue for the next available receptionist.
- Patient wait time is to be no longer than 1 minute in the call queue.
- If a receptionist sees that there are more calls in the queue than the reception team can answer within 1 minute, he or she should alert the medical assistants to assist with answering the calls.

FIGURE ■ 11-7 Quality improvement policy for reducing patient wait time on the telephone.

While quality improvement and risk management procedures and policies vary according to office needs, the vast majority apply to all office types. HIPAA legislation mandates that quality improvement and risk management policies be kept in a separate notebook that is clearly marked and updated regularly.

Critical Thinking 11.11 ?

What other ideas can you think of that would qualify as a risk management or quality improvement policy? How would this policy help with care of patients in the medical office?

Case Study Questions

Refer to the case study presented at the beginning of this chapter to answer the following questions:

1. How would you suggest Steve begin to create a policy and procedure manual for his medical office?
2. Who should Steve speak to regarding the needed policies?
3. Where might Steve look for information on what should be included?
4. What type of policies would you suggest Steve begin with first?

Chapter Review

Summary

■ Patient education pamphlets or brochures are an excellent way to reinforce information provided by the physician or medical office staff. Brochures may be purchased from vendors, or they may be created by the office for a more personal touch.

■ To create a personnel manual, the medical office manager should work in concert with the practice physicians to determine the type of policies needed, as well as the content. Included in the manual are the mission statement, organizational chart, clinical and administrative procedures, infection control procedures, and quality improvement and risk management procedures.

  ■ A mission statement is the practice's statement of purpose; it is the stated reason why the practice exists.

  ■ An organizational chart visually demonstrates the hierarchy in the organization. This chart should be updated as needed as people move in and out of their positions.

  ■ Clinical procedures are any that cause staff to interact with the patient on a clinical level. Examples include the process for taking vital signs or assisting in a physical examination.

  ■ Administrative procedures are those that pertain to the administrative functions of the medical office. These include the insurance billing process and the scheduling of patient appointments.

  ■ Infection control procedures include those that keep infection from spreading from one person to another. An example is a procedure on how to sterilize equipment after use.

  ■ Quality improvement and risk management procedures pertain to patient care and safety in the medical office. These policies may result from an event that occurs in the office, such as a patient fall.

Multiple Choice

Choose the letter that best answers each question or completes each statement.

1. Quality improvement procedures and policies pertain to which of the following?
   a. Addressing a problem with patient satisfaction
   b . Listing the steps to sterilizing equipment after use
   c. Understanding how to answer the telephone
   d. Performing vital signs at the beginning of the patient's visit

2. A mission statement should be
   a. lengthy and include the names of all physicians in the practice.
   b. concise and easy to remember.
   c. a list of the fees for services in the clinic.
   d. created by copying the statement from another clinic in town.

3. Which of the following is the purpose of an organizational chart?
   a. To alert patients to whom they should call with a complaint about quality of care
   b. To provide employees with a list of administrators' salaries
   c. To give employees the telephone numbers of all managers and supervisors in the clinic
   d. None of the above

4. Which of the following is an example of a clinical procedure?
   a. Prevention of patient falls
   b. Employee needlestick injury
   c. Steps for sterilizing equipment
   d. Medical records management

5. Which of the following is an example of an administrative procedure?
   a. Prevention of patient falls
   b. Employee needlestick injury
   c. Steps for sterilizing equipment
   d. Medical records management

6. Which of the following is an example of a risk management policy?
   a. Prevention of patient falls
   b. Employee needlestick injury
   c. Steps for sterilizing equipment
   d. Medical records management

7. Which of the following is an example of an infection control policy?
   a. Prevention of patient falls
   b. Employee needlestick injury
   c. Steps for sterilizing equipment
   d. Medical records management

8. What is one reason for giving an educational brochure to a patient?
   a. The patient will be able to review the material further after the visit.
   b. The patient will be able to provide material for his or her spouse to read after the visit.
   c. The patient will be able to better understand his or her condition.
   d. All of the above

9. How often should an employee handbook be updated?
   a. Monthly
   b. Yearly
   c. As needed
   d. Never

10. A procedure that outlines biohazardous waste disposal would be found in which of the following policy manuals?
    a. Infection control
    b. Risk management
    c. Clinical
    d. Administrative

True/False

Determine if each of the following statements is true or false.

_____ 1. OSHA requires every medical office to keep an exposure control plan.

_____ 2. A personnel manual is also known as an employee handbook.

_____ 3. The most important reason for having a medical office policy and procedure manual is so that the manager can properly discipline employees.

_____ 4. The organizational chart should list the name of every employee within the organization.

_____ 5. Policies should be clear so that misinterpretation is kept to a minimum.

_____ 6. Policies should be created by the office manager solely, with no input from others.

_____ 7. Offices may copy policies used in other organizations.

_____ 8. The physician is the person who should write all office policies and procedures in the medical office.

_____ 9. New employees should be given access to, or a copy of, the personnel manual upon hire.

_____ 10. Educational brochures should include medical terms, rather than be written in layman's terms.

Matching

Match each of the following procedural descriptions to the correct type of procedure (clinical, administrative, infection control, or risk management).

a. Clinical procedure

b. Administrative procedure

c. Infection control procedure

d. Risk management procedure

1. Outlines the steps to take in the event the office closes due to an emergency

2. Describes the steps taken to sterilize medical equipment after use

3. Lists the steps to take to schedule a patient appointment

4. Outlines the steps required if an employee is exposed to infectious materials

5. Describes the desired process for escorting patients so that patients do not fall in the medical office

6. Lists the steps for copying patient's medical information

7. Outlines the steps for taking accurate patient's vital signs

8. Lists the steps for verifying patient's insurance coverage information

9. Describes the steps to take for disposing of biohazardous waste

10. Lists the steps for closing the office at the end of the day

Chapter Resources

Lean Enterprise Institute: http://www.lean.org/whatslean

Occupational Safety and Health Administration: http://www.osha.gov

U.S. Department of Health and Human Services—policies regarding HIPAA: http://www.hhs.gov/ocr/hipaa

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