



Chapter XVI

Specialized Areas

1. Respiratory Services (RS)
2. Dietary Service (DT)
3. Social Workers (SC)
4. Rehabilitation Service (RH)

1. Respiratory Services

Scoring:



Respiratory Services (RS)

Standard	FM (3)	PM (2)	MM (1)	NM (0)	NA
RS.1. The hospital has a Respiratory Therapy unit, with 24-hour coverage.					
RS.2. A qualified Pulmonologist/ Internist or an Anesthetist is the department head.					
RS.3. Policy and procedures guide the work in the unit and includes but is not limited to:					
RS.3.1 Use of equipment.					
RS.3.2 Pulmonary function test.					
RS.3.3 Coughing and breathing exercise.					
RS.3.4 Obtaining arterial blood gasses.					
RS.3.5 Mechanical ventilator support.					
RS.3.6 Dealing with open T.B. cases.					
RS.4. Personnel in the unit are trained professionals in this field.					
RS.5. There is education and training with competency assessment (e.g. written test, return demonstration, etc.) that includes:					
RS.5.1 Obtaining (ABG's) Arterial Blood Gases.					
RS.5.2 Using pulse oximeter.					
RS.5.3 Using humidifiers.					
RS.5.4 Performing pulmonary function tests.					
RS.5.5 Performing mechanical ventilator checks.					
RS.5.6 Performing pulmonary toilet.					
RS.5.7 Performing airway maintenance.					
RS.5.8 Knowledge and application of infection control policies.					
RS.5.9 Performing equipment maintenance and safety.					



Respiratory Services (RS)

Standard		FM (3)	PM (2)	MM (1)	NM (0)	NA
	RS.5.10 Performing emergency airway interventions.					
RS.6.	Respiratory services are carried out on the order of physicians who indicate the dose, frequency, and route and the patient's response to treatment is documented in the patient's record.					
RS.7.	There is regular calibration of respiratory equipment.					
RS.8.	All staff are BCLS certified.					

2. Dietary Service



Dietary Service (DT)

Scoring:

Standard		FM (3)	PM (2)	MM (1)	NM (0)	NA
DT.1.	There is a qualified (BS Nutrition) dietitian supervising the aspect of dietary service.					
	DT.1.1 Patients interviewing/visiting.					
	DT.1.2 Nutritional screening.					
	DT.1.3 Nutritional assessment and reassessment.					
	DT.1.4 Developing nutritional care plan.					
	DT.1.5 Highlight "food-drug interaction" to physicians and document this in the medical record.					
	DT.1.6 Making recommendations related to patient dietary needs.					
	DT.1.7 Follow-up with patient care team when an abnormality is recognized during screening.					
	DT.1.8 NPO monitoring.					
	DT.1.9 Education (patients/families/other members of the health care team).					
	DT.1.10 Participating in development of and enforcing policies and procedures.					
	DT.1.11 Developing menus.					
	DT.1.12 Evaluating and documenting patient's dietary intake when on specific diets.					
DT.2.	The job description for dietitian includes but is not limited to:					
	DT.2.1 Approval of all menus including any modified diets.					
	DT.2.2 Interviewing and visiting patients.					
	DT.2.3 Performing nutritional assessment and reassessments of patients as needed.					
	DT.2.4 Developing a nutritional care plan.					
	DT.2.5 Evaluating and document patient's caloric intake when on specific diets.					



**Dietary
Service
(DT)**

Standard		FM (3)	PM (2)	MM (1)	NM (0)	NA
	DT.2.6 Educating other health staff, patients and families.					
	DT.2.7 Reviewing, and updating the dietary manual.					
DT.3.	All patients at nutrition risk receive a dietitian's assessment within twenty (24), which include.					
	DT.3.1 For All patients with ordered therapeutic diets, a documented dietitian's assessment is done within 48 hours of order, which includes:					
	DT.3.1.1 Nutrition status, using:					
	DT.3.1.1.1 Height and weight chart for children.					
	DT.3.1.1.2 BMI for adults.					
	DT.3.1.2 Eating habits.					
	DT.3.1.3 Food allergies.					
	DT.3.1.4 Need for therapeutic diet.					
	DT.3.1.5 Physical difficulties with eating and drinking.					
	DT.3.1.6 Need for equipment to assist eating and drinking.					
DT.4.	The dietitian in collaboration with other health care professionals, develops a suitable nutritional plan of care for the patient which includes but is not limited to:					
	DT.4.1 Monitoring the patient's response to the therapeutic diet.					
	DT.4.2 Making adjustments in the plan of therapeutic diet as needed.					
	DT.4.3 Documenting the patient's response to the plan to therapeutic diet in the medical record.					
DT.5.	The hospital has a dietary manual written by the dietitian and appropriate staff and contains the following information and reviewed every two (2) years:					
	DT.5.1 Different types of diets used in the hospital.					



**Dietary
Service
(DT)**

Standard		FM (3)	PM (2)	MM (1)	NM (0)	NA
	DT.5.2 Nutritional supplements used and how to use them.					
	DT.5.3 Appropriate storage method for snacks and beverages					
	DT.5.4 Working hours of the kitchen and mealtimes.					
	DT.5.5 Food preparation, handling, storage, and distribution are safe and comply with laws, regulations, and current acceptable practices.					
DT.6.	Physicians are responsible for ordering therapeutic hospital and discharge diets based on diets listed in the therapeutic dietary manual.					
	DT.6.1 The calories needed.					
	DT.6.2 Any restrictions.					
	DT.6.3 The route.					
	DT.6.4 The frequency of the meals or the feed.					
DT.7.	Discharge teaching is provided by dieticians for all patients/families, and cultural preferences are incorporated into the plan, which is based on patient's medical status and ability to eat. This is documented in the patient record as a part of multidisciplinary team planning where applicable.					
	DT.7.1 Providing patient and/or family education on therapeutic diets.					
	DT.7.2 Documenting the patient's response to education in the patient's medical record.					

3. Social Workers

Scoring:



Social Workers (SC)

Standard		FM (3)	PM (2)	MM (1)	NM (0)	NA
SC.1.	The hospital has a Social Work unit.					
	SC.1.1 The unit is well staffed according to the hospitals size and complexity of care provided.					
	SC.1.2 The unit is well equipped with necessary equipment like computers, printer telephones.					
	SC.1.3 The unit has enough space according to the needs of the staff.					
	SC.1.4 Social Workers are available during day and evening to patients and patients' families.					
	SC.1.5 Social workers comply with the hospital's patient safety and infection control standards.					
	SC.1.6 Education programs for social work department/service personnel are based, at least in a part, on the findings from					
SC.2.	Social worker service is directed and staffed by licensed, experienced and qualified individuals.					
	SC.2.1 Head of department has to be qualified with experience not less than 3 years as a social worker.					
	SC.2.2 He/she is skilled in the approaching, analyzing and recording the case.					
	SC.2.3 Social skills depends on educational, social programs (communication skills, ^- Body language, decision maker, etc.)					
SC.3.	There is a job description for each staff member including the head of the department.					



Social Workers (SC)

Standard		FM (3)	PM (2)	MM (1)	NM (0)	NA
SC.4.	The Social Worker works collaboratively with the physicians and nurses and helps them with the psychosocial needs of the patient.					
SC.5.	The Social Worker assesses the social needs of the patient so they can help the physicians to develop a plan of care for the patients.					
	SC.5.1 Interviews the patient and his/ her family to understand the patient psychosocial needs.					
	SC.5.2 Explains the patient needs to the physician to develop a plan depends on the patients needs.					
SC.6.	The Social Worker educates the patient about the agencies available which provide assistance to the patients.					
	SC.6.1 Explains to the patient the governmental and the private agencies services					
	SC.6.2 Guides or/ and advises the patient the most suitable agencies services depends on his/her needs.					
SC.7.	The Social Worker assesses and helps the financial status of the patient and / or find a fund to buy certain drugs, equipments or appliances.					
	SC.7.1 Contacts the governmental and/ or private agencies and/ or a sponsor.					
	SC.7.2 Informs the sponsor or/ and the agencies about the patient needs by reporting them.					
	SC.7.3 Follows-up the patient support services.					
SC.8.	The Social Worker assesses the patient's home situation and the patient's non-compliance to treatment.					
	SC.8.1 Interviews the patient to clarify his/ her home situation.					
	SC.8.2 Evaluates the patient home situation depends on the patients interview or/ and home visit.					



Social Workers (SC)

Standard		FM (3)	PM (2)	MM (1)	NM (0)	NA
SC.9.	The Social Worker assesses the patient's emotional and psychological factors that could impact the patient's self care ability.					
	SC.9.1 Interviews the patient to understand his/her emotional and psychosocial factors					
	SC.9.2 Evaluates the patient psychosocial needs					
	SC.9.3 Develops a plan covers all the patients needs					
SC.10.	The Social Worker assists in the discharge planning process by:					
	SC.10.1 Finding any social factor that might delay the discharge of patients.					
	SC.10.2 Making necessary arrangements to facilitate timely discharge.					
	SC.10.3 Identifying community resources.					
	SC.10.4 Evaluation of home situation.					
SC.11.	The Social Worker facilitates the continuity of care to the patient and expedites it by responding to the needs of the patient.					
SC.12.	The Social Worker evaluates the disability of the patient and helps reduce the impact of it on the patient by:					
	SC.12.1 Liaising and helping the patient to overcome his/her disability.					
	SC.12.2 Identifying community resources					
	SC.12.3 Patient and family education					
SC.13.	Social work services records all relevant patient data in the patient record to include:					
	SC.13.1 Reason for referral.					
	SC.13.2 Summary of initial patient and/ or family assessment.					
	SC.13.3 Goals of assistance, interventions, and plan.					



Standard	FM (3)	PM (2)	MM (1)	NM (0)	NA
SC.13.4 Routine and regular progress notes that include patients/ family understanding, progress or needs for different or additional confidential social / counseling services.					



**Social
Workers
(SC)**

4. Rehabilitation

Scoring:



Rehabilitation (RH)

Standard	FM (3)	PM (2)	MM (1)	NM (0)	NA
RH.1. The hospital has a Rehabilitation unit.					
RH.2. A qualified therapist is the department head.					
RH.3. There is a written scope of service.					
RH.4. The staff in the unit are qualified by appropriate education and experience with rehabilitation.					
RH.5. Staff are BCLS certified.					
RH.6. Treatment is offered only after referral by a physician.					
RH.7. Each case referred receives a documented assessment.					
RH.8. Each case contains a treatment plan designed with measurable goals.					
RH.9. Each patient has a clinical record that contains the reason for referral, the initial assessment made, the treatment plans, the goals achieved and the response of the patient to the treatment.					
RH.10. Space and equipment are recommended by the Head of the Rehabilitation to meet the scope of service.					
RH.11. There is appropriate communication between the ordering physicians and all the staff on the unit for optimum implementation of the plan of care with evidence of interdisciplinary planning to meet the patient's needs.					
RH.12. The patient's response to therapy is documented.					
RH.13. Patients are educated about the plan of care, the procedures and the rehabilitative exercises.					
RH.14. Policies and procedures cover:					
RH.14.1 Safety measures.					
RH.14.2 Infection control guidelines.					



Rehabilitation (RH)

Standard		FM (3)	PM (2)	MM (1)	NM (0)	NA
	RH.14.3 Communication with the physicians.					
RH.15.	Policies and/or protocols exist for the management of:					
	RH.15.1 Strokes.					
	RH.15.2 Hip replacements.					
	RH.15.3 Knee replacements.					
	RH.15.4 Back pain.					
RH.16.	A crash cart is available.					