



El Paso - Ambulatory Clinic Policy and Procedure

Title: CLINICAL DEPARTMENT POLICY REQUIREMENTS	Policy Number: EP 1.2
Regulation Joint Commission Reference:	Effective Date: 03/2021

Policy Statement:

It is the policy of Texas Tech Physicians of El Paso (TTP-EP) to establish criteria for individual Clinic Policy and Procedure Manuals.

Scope and Distribution:

This policy applies to all TTP-EP Ambulatory Clinics.

Procedure:

1. All clinical departments or areas should prepare and maintain Clinic policies and procedures to address issues unique to their clinics. Subjects addressed in *Health Sciences Center Operating Policies* and/or *TTUHSC at El Paso Ambulatory Clinic Policies* should NOT be duplicated.
2. Each Clinic Departmental Policy should have the following components:
 - a. Policy Statement
 - b. Scope and Distribution
 - c. Procedure or Text
 - d. Approval Authority
 - e. Responsibility and Revisions
3. All clinic policies should be reviewed and/or revised at least every 3 years and approved by the Department Chairperson or designated Clinic Medical Director, and acknowledged by the respective Clinic Manager.
4. The Clinics Operations Administration and the Office of Quality Improvement should have access to each Clinics Policy and Procedure Manuals. All manuals and policies are subject to periodic audit.
5. Clinical Department Chairpersons or designated Clinic Medical Director, and the respective Clinic Manager, are responsible for maintaining the copies of all outdated or revised Clinic departmental policies and procedures. In case of legal action, the policy which was in effect at the time an incident actually occurred, will be used to assess the appropriateness of the TTP-EP actions of care.
6. Clinic policies and procedures may include, but are not limited to, the following as they are applicable to the clinic's operations:
 - a. Scope of Care
 - b. Competency requirements/skills checklist
 - c. Prescription Refill policy, including list of designated agents
 - d. Clinic specific triage plan: walk-ins and patient calls
 - e. After-Hours Patient Instruction
 - f. Patient Referrals
 - g. Policy/procedure for procedures specific to a department or clinic or needing specialized



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equipment, staff, or training (i.e.; casting, laser surgery, circumcisions, etc.)

- h. Any processes unique to each clinic that need formalization/clarification
- i. List of procedures performed in the clinic that require consent conducting a universal protocol
- j. List of stock medications

7. Clinic staff should be educated regarding existing policies.

Policy Number: EP 1.2	Original Approval Date: 9/2013
Version Number: 2	Revision Date: 03/2021
Signatory approval on file by: Juan Figueroa, M.D. Director of Clinical Operations Clinic Medical Directors Committee, Chair Paul L. Foster School of Medicine	
	