

NURSING SERVICES

Self-Assessment Questions	YES	NO	N/A	Date/Initials	Comments
<p>Does the hospital have organized nursing service 24 hours a day seven days a week with at least one registered nurse supervising the service at all times?</p> <p>A-0385 COP §482.23</p> <p>Note: A rural hospital with 50 beds or less can apply for a waiver from this requirement.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<p>Does nursing service:</p> <p>a. have a well-organized service with a plan of administrative authority and delineation of responsibilities for patient care?</p> <p>b. have a written organizational chart indicating lines of authority, accountability, communication and delegation of responsibility?</p> <p>c. maintain records of staffing plans and actual staffing schedules?</p> <p>d. have nursing practice standards, policy and procedure manuals that are unit specific, current and readily available to staff?</p> <p>e. have procedures to ensure that all licensed nursing personnel have a valid and current license?</p> <p>f. have policies that provide for nursing collaboration with medical staff and other healthcare disciplines regarding patient care?</p> <p>A-0394 COP §482.23(b)(2)</p> <p>A-0386 COP §482.23(a)</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<p>Does the Director of Nursing Services:</p> <p>a. have a job description that clearly outlines specific duties, responsibilities and lines of authority?</p> <p>b. participate in the formulation of hospital policies and the development of long-range plans relating to patient care?</p> <p>c. or designee, represent nursing at all appropriate meetings of the medical staff and governing board of the hospital?</p> <p>d. approve nursing services patient care policies and procedures?</p> <p>A-0386 COP §482.23(a)</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<p>Is the Director of Nursing Services:</p> <p>a. a full-time R.N. qualified by education and experience in nursing management and practice?</p> <p>b. responsible to the CEO or COO?</p> <p>c. responsible for the operation of nursing</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

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service, including determining the types and numbers of nursing personnel and staff? d. accountable for the quality of nursing care in patient care areas? e. accountable for the selection, promotion and termination of all nursing personnel under the authority of nursing services? A-0386 COP §482.23(a)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Are there adequate numbers of licensed registered nurses, licensed practical nurses, and other personnel to provide care to all patients as needed? Are there supervisory and staff personnel for each department or unit to ensure the immediate availability of a R.N. for bedside care of any patient? Note: Registered nurses are not considered immediate if working on more than one unit, building, floor or provider at the same time. A-0392 COP §482.23(b) A-0393 COP §482.23(b)(1)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Are there sufficient R.N.s on duty on each unit at all times to supervise all nursing personnel? A-0392 COP §482.23(b)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Is the staffing and patient care delivered adequate to meet the needs of the patients as evidenced by: a. nursing assessment and care plans? b. patient records? c. employee injury reports? d. incident reports? A-0392 COP §482.23(b)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Are nursing assignments made: a. by an R.N.? b. consider the complexity of the needs of all patients and the location of the patients? c. consider the competency, education and the specialized qualifications of the nursing staff? A-0397 COP §482.23(b)(5)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Does an R.N. supervise and evaluate the nursing care of each patient? A-0395 COP §482.23(b)(3)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Are nursing care plans: a. developed and revised as needed for each patient?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

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b. initiated as soon as possible after admission? c. written to describe and reflect patient goals including appropriate physiological and psychosocial factors and discharge planning? d. implemented as written in a timely manner? e. consistent with the attending physician's plan for medical care? A-0396 COP §482.23(b)(4)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
All licensed nurses (employee, contract, lease, volunteer or other agreement) providing services in the hospital must be: a. orientated and adhere to policies and procedures, the hospital, the unit assigned and emergency procedures? b. supervised by an R.N. who is an employee of the hospital? c. annually evaluated on their performance? d. licensed in accordance with state law? A-0398 COP §482.23(b)(6)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Does the hospital have policies and procedures establishing which outpatient department are not required to have a registered nurse present and which establish the criteria that such outpatient departments must meet? a. take into account the types of services delivered, level of patient acuity and establish standards of practice for services delivered? b. establish alternative staffing plans? c. are approved by the director of nursing? d. are reviewed at least every three years A-0399 COP §482.23(b)(7)	<input type="checkbox"/>	<input type="checkbox"/>			
Are all drugs and biologicals prepared and administered in accordance with the orders of the practitioner(s) responsible for the patient's care and accepted standards of practice? A-0405 COP §482.23(c)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Are all drugs and biologicals administered by or under the supervision of: a. nursing personnel? b. other personnel in accordance with Federal and State laws and regulations and in accordance with the approved medical staff policies and procedures? A-0405 COP §482.23(c)(2)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
NOTE: This information taken from "Nursing Services" A-0405 COP §482.23 Nursing Services and Pharmacy Services overlap.					

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Do you have policies and procedures that:					
a. require confirmation of the following before administering each medication (often referred to as the “five rights of medication administration practice):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
- right patient – required*					
- right medication – required*					
- right dose – required*					
- right route – required*					
- right time – required*					
- right documentation – suggested					
- right action – suggested					
- right form – suggested					
- right response - suggested					
b. identify, either in general or specific clinical application, medications not eligible for scheduled dosing times?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
c. address for medications not eligible for scheduled dosing times:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
- how to ensure timely administration that is consistent with accepted standards of practice?					
- if policy applies hospital-wide or only for specific diagnosis types, units or clinical situations?					
d. identify medications eligible for scheduled dosing times?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
e. address for medications eligible for dosing times:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
- handling first dose medications, including parameters for which nursing staff are allowed to use their own judgment on the timing of the first and subsequent doses which may fall between scheduled dosing times?					
- retiming of missed or omitted doses?					
- those patient units that are not subject to following the scheduled dosing times?					
f. identify time-critical scheduled medications — those for which an early or late administration of more than 30 minutes may harm or have a significant, negative impact on the intended therapeutic or pharmacological effect?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
g. reconciling medications not administered?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
- medications prescribed for daily, weekly or monthly—may be administered within two hours before or after the scheduled dosing time, for a total window that does					

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not exceed four hours? - medications prescribed more frequently than daily but no more frequently than every four hours—may be administered within one hour before or after the scheduled dosing time, for a total window that does not exceed two hours? f. address the actions to be taken when medications with scheduled dosing times are not administered within their permitted window of time, such as: - the patient is temporarily away from the nursing unit - patient refusal - the patient is unable to take the medication - unavailable medications, etc. g. outline guidelines for the administration and timing of new medications that are initiated between standardized dosing times? h. identify parameters when nursing personnel can use their own judgment on the rescheduling of missed or late doses, when notification of the physician or other practitioner responsible for the care of the patient is required before doing so? i. require the reporting of medication errors to the attending physician that are the result of missed or late dose administration in accordance with requirements of A-0508 COP §482.25(b)(6)? A-0405 COP §482.23(c)(1), (c)(1)(i) and (c)(2)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Is the administration of medications or biologicals included in the hospital-wide QAPI activities? A-0405 §482.23(c)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Are the policies and procedures concerning the ordering of drugs and biologicals by practitioners approved by the medical staff and governing body? A-0405 §482.23(c)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Are the policies and procedures covering who is authorized to administer medications approved by the medical staff? A-0405 §482.23(c)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Are nursing staff authorized to administer drugs and biologicals practicing within their state-permitted scope of work? A-0405 §482.23(c)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
If personnel other than nursing personnel are	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

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administering drugs or biologicals, are they permitted to do so under Federal and State laws and regulations, including scope of practice laws, hospital policy, and medical staff bylaws? A-0405 §482.23(c)					
Are the policies and procedures addressing the timing of medication administration approved by medical staff? A-0405 §482.23(c)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
How does the hospital ensure adherence to accepted standards of practice required to prevent healthcare-associated infections related to medication preparation and/or administration, including compounded sterile preparations (CSPs) A-0405 COP §482.23(c)(2)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Does the hospital have policies identifying medications which are: a. not eligible for scheduled dosing times? b. eligible for scheduled dosing times and are time-critical? c. eligible for scheduled dosing times and are not time-critical? A-0405 §482.23(c)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
Has the hospital established total windows of time that do not exceed the following: a. 1 hour for time-critical scheduled medications? b. 2 hours for medications prescribed more frequently than daily, but no more frequently than every four hours? c. 4 hours for medications prescribed for daily or longer administration intervals? A-0405 §482.23(c)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
Does the hospital have a policy describing the requirements for administration of identified time-critical medications? A-0405 §482.23(c)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Is it clear whether time-critical medications types are identified as such for the entire hospital or are unit-, patient diagnosis-, or clinical situation-specific? A-0405 §482.23(c)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Are drugs administered in accordance with the hospital's established policies and procedures for timely and safe medication administration? A-0405 §482.23(c)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Does the nurse remain with the patient until oral medication is taken? A-0405 §482.23(c)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

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Are patients assessed by nursing and/or other staff, per hospital policy, for their risk to their prescribed medications? A-0405 §482.23(c)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Are patients who are at higher risk and/or receiving high-alert medications monitored for adverse effects? A-0405 §482.23(c)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Are staff knowledgeable about intervention protocols for when patients experience adverse medication-related events? A-0405 §482.23(c)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
With the exception of influenza and pneumococcal polysaccharide vaccines, are all orders for drugs and biologicals in writing and signed by the practitioner(s) responsible for the care of the patient? A-0406 COP §482.23(c)(3)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Are all orders for drugs and biologicals administered per protocol or standing order documented and signed by a practitioner(s) responsible for the care of the patient? A-0406 COP §482.23(c)(3)(iii)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Do hospital policies and procedures: <ul style="list-style-type: none"> a. assure verbal orders are used infrequently? b. describe limitations or prohibitions on the use of verbal orders? c. provide a mechanism to ensure the authenticity of the practitioner issuing a verbal order? d. list the elements required for inclusion in the verbal order process? e. describe situations in which verbal orders may be used? f. define the types of personnel who may issue and receive verbal orders? g. establish protocols for clear and effective communication, verification and authentication of verbal orders? A-0407 COP §482.23(c)(3)(i)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Are verbal orders for drugs and biological documented in the medical record by the individual authorized to accept verbal orders? A-0408 COP §482.23(c)(3)(ii)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Do all orders for drugs or biologicals include: <ul style="list-style-type: none"> a. name of patient? b. age and weight* of patient, when appropriate? c. date and time of order? d. drug name? 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

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e. exact strength or concentration when applicable?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
f. dose, frequency and route?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
g. quantity and/or duration when applicable?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
h. dose calculation requirement when applicable?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
i. specific instructions for use when applicable?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
j. name of prescriber?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Note: *Hospital policy should specify if weight is to be in pounds or metric weight. A-0405 COP 482.23(c)(1), (c)(1)(i) and (c)(2)					
Is the verbal order always read back and verified by the prescriber? A-0407 COP §482.23(c)(3)(i)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Does the recipient of a verbal order date, time and sign the order per hospital policy? A-0407 COP §482.23(c)(3)(i)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Does hospital policy require prompt authentication of all orders by the prescribing practitioner or another practitioner responsible for the care of the patient? A-0454 COP §482.23(c)(2) A-0409 COP §482.23(c)(3)(iii)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Is the verbal order signed by the prescribing practitioner or other practitioner responsible for the care of the patient in a timeframe defined by hospital policy? A-0407 COP §482.23(c)(3)(i)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Are all blood transfusions and intravenous medications administered in accordance with state law and approved medical staff policies and procedures? A-0410 COP §482.23(c)(4)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
If blood transfusions and intravenous medication are administered by personnel other than physicians, do personnel have special training for this duty? A-0109 COP §482.23(c)(4)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Are staff knowledgeable with respect to:					
a. venipuncture techniques?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
b. safe medication administration practices, including general practices applying to all types of medications and practices concerning IV tubing and infusion pumps?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
c. maintaining fluid and electrolyte balance?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
d. patient assessment for risk related to IV medications and appropriate monitoring?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
e. early detection and intervention for IV opioid-induced respiratory depression in post-	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

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operative patients? f. process for verification of the right blood product for the right patient? g. transfusion reactions including identification, treatment and reporting requirements? A-0410 COP §482.23(c)(4)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
If your hospital allows patients or his/her caregiver to administer medications, does your policy: a. define what types of meds can be a part of the self-administration process? b. define if the nurse must supervise administration? c. specify security procedures? d. outline if policy is for both hospital-issued medications and those brought in by the patient? A-0412 COP §482.23(c)(6)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Does your medical staff, nursing personnel and pharmacy work together to create and approve these policies? A-0412 COP §482.23(c)(6)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Can you demonstrate that the following required elements are in place for self-administered medications: a. an order allowing the patient or caregiver to administer meds is present in the chart? b. a documented assessment of the capacity of the patient to successfully administer medications for which self-administration has been authorized? c. instructions given to patients about how to self-administer? d. security of the self-administered medications? e. documentation of the medication administered? f. documentation that the medications brought into the hospital by the patient were visually inspected and identified as correct medications to ensure integrity? A-0412 COP §482.23(c)(6)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Helpful Hints

- It is very important to read the detailed Interpretative Guidelines in A-0405 COP §482.23(c) regarding preparation and administration of drugs including timing, scheduling and monitoring of medications.
- It is very important to read Interpretative Guidelines for A-0409 COP §482.23(c)(4) regarding monitoring patients receiving IV medications and blood transfusions.

Key Resources and Links

- [A-0885 COP §482.23](#)
- [42 CFR 482.42](#) – Practices to reduce healthcare associated infections related to medication preparation and/or administration.
- [A-0405 COP §482.23\(c\)\(1\)\(i\)](#)