

supplies and takes measures to prevent potential patient harm. Although a public hospital may not know the integrity of each supplier in the chain, it can become aware of how supplies are purchased and managed by the governmental or nongovernmental agency.

Measurable Elements of GLD.05.03

1. ④ Hospital leaders establish a written supply chain strategy that does the following:
 - Defines the steps in the supply chain.
 - Identifies risk within the steps of the supply chain.
 - Defines supplies at most risk.
 - Outlines recommendations on mitigating risks that will ensure continuity of safe and high-quality patient care services.
2. The hospital has a process for performing retrospective tracing of supplies found to be unstable, contaminated, defective, or counterfeit.
3. The hospital notifies the manufacturer and/or distributor when unstable, contaminated, defective, or counterfeit supplies are identified.

Direction of Hospital Departments and Services

Standard GLD.06.00

The hospital identifies the scope of services and structure of each department or service.

Intent of GLD.06.00

The clinical care, patient outcomes, and overall management of a hospital are only as good as the clinical, managerial, and operational activities of each individual department or service. Good departmental or service performance requires clear leadership from qualified individuals.

Hospital leaders provide for the coordination of care, treatment, and services among the hospital's different programs, services, sites, or departments. In larger departments or services, there may be multiple leaders. The responsibility of each role is defined in writing.

Each department/service leader reports their resource requirements to hospital leaders. This helps ensure that adequate staff, space, medical equipment, technology, and other resources are available to meet patients' needs at all times.

Department/service leaders consider the services provided and planned by the department or service and the education, skills, knowledge, and experience needed by the department's professional staff to provide those services. Department/service leaders develop criteria reflecting this consideration and then select staff. Department/service leaders may also work with human resources or other departments in the selection process based on their recommendations.

Department/service leaders ensure that all staff in the department or service understand their responsibilities and establish the orientation and training for new staff. The orientation includes the hospital's mission, the department's or service's mission, the scope of services provided, and the policies and procedures related to providing services. For example, all staff understand the infection prevention and control procedures within the hospital and within the department or service. When new or revised policies or procedures are implemented, staff are trained.

Clinical services provided to patients are coordinated and integrated within each department or service. Also, each department or service coordinates and integrates its services with other departments and services. Unnecessary duplication of services is avoided or eliminated to conserve resources. Although the department/service leaders make recommendations regarding human and other resource needs, those needs sometimes

change or are not fully met. Thus, department/service leaders have a process to respond to resource shortages to ensure safe and effective care for all patients.

Each department/service leader identifies, in writing, the services to be provided by the department, and integrates or coordinates those services with the services of other departments. The department/service leaders collaborate to determine the uniform format and content of the department-specific planning documents. In general, the documents prepared by each clinical department define its goals, as well as identify current and planned services.

Department policies and procedures reflect the department's goals and services as well as the knowledge, skills, and availability of staff required to assess and to meet patient care needs.

Measurable Elements of GLD.06.00

1. Each department or service in the hospital is directed by an individual with the qualification, training, education, and experience comparable to the services provided. (*See also* AOP.03.01, ME 1; AOP.04.00, ME 1; AOP.05.01, ME 1; MMU.01.00, MEs 1 and 5; FMS.01.01, ME 1; HCT.01.00, ME 2; PCI.01.00, ME 1; QPS.01.00, ME 1; GHI.01.00, ME 3)
2. Department/service leaders recommend space, medical equipment, staffing, technology, and other resources needed by the department or service and have a process in place to respond to shortages. (*See also* SQE.01.00, ME 1)
3. ⓐ The departmental or service documents describe the current and planned services provided by each department or service. (*See also* ACC.02.02, ME 3)
4. There is coordination and/or integration of services within and among other departments and services. (*See also* ACC.02.02, ME 4; ACC.03.00, ME 1; ACC.05.00, ME 1)

Standard GLD.06.01

Department/service leaders participate in hospitalwide improvement priorities and in monitoring and improving patient care specific to the department/service.

Intent of GLD.06.01

Each department participates in improvement activities that reflect and contribute to the hospitalwide priorities to establish an integrated quality and patient safety program.

Department leaders are responsible for ensuring the quality of care and services provided by their department/service. Department/service leaders identify improvement priorities that address clinical or nonclinical activities specific to the department or service. For example, a clinical department or service would participate in the hospitalwide effort to improve handover communications and may monitor and reduce variation in an internal process such as the ordering of diagnostic tests for patients with the same condition. Similarly, a managerial department may be involved in automation projects to improve handover communications and may monitor and improve the accuracy of patient bills.

Quality measurement activities can be important to ensuring that the department/service leader has objective information to support improvement activities. Over time, quality measurement includes all the services provided by the department or service and includes the clinical privileges of all the physicians. In some cases, the measures will be linked to the clinical practice guidelines, clinical pathways, and clinical protocols implemented in the department or service. Data are needed to support the evaluation of the nurses and other health care practitioners in the department. Although these individuals have job descriptions rather than clinical privileges, the department/service leader is still accountable for evaluating their work. In many cases, the clinical practice guidelines implemented in the department or service will have associated pathways and protocols that will support the collection of measurement data for nursing staff and other health care practitioners.