

## **Policies for Review for April 2021**

### **IT**

**1.0.01 Disposal of External Media/Hardware Policy:** This policy was reviewed and felt no changes were needed at this time.

**1.0.02 Unassigned Policy Number**

**1.0.03 Unassigned Policy Number**

**1.0.04 Information Systems/Applications Change Management Policy:** This policy was reviewed and felt no changes were needed at this time.

**1.0.05 Information Systems Audit Controls Policy:** This policy was reviewed and felt no changes were needed at this time.

**1.0.06 Information Systems Identification and Authentication Policy:** Changed the final sentence under process #3. The information systems manager no longer receives the form, it is to be sent to the IT Support Specialist.

**1.0.07 Malicious Code Policy:** This policy was reviewed and felt no changes were needed at this time.

**1.0.08 Unassigned Policy Number**

**1.0.09 Acceptable Use of Information Technology:** This policy was reviewed and felt no changes were needed at this time.

### **Reproductive Health**

**3.0.03 Adolescent Services:** Added updated information regarding mandatory reporting process. Added information about documenting education and family involvement.

**3.0.17 Pregnancy Testing and Counseling:** Added that counseling is provided by CRNP or physician. Added termination concerns handled by CRNP or physician.

### **Protocols/Processes**

**RHS Referral Resources:** Updated old and new resources.

**RHS Educational Materials Process:** Process changed that educational materials for materials are approved by board and consumers.

### **Billing & Procurement**

**4.5.5 Employee Discount on Services:** Changed policy to indicate all employees and direct family members who have insurance would receive a 100% discount after insurance has paid. All employees and direct family members who do not have insurance would receive a 50% discount.

### **Principles of Practice**

**7.0 Principles of Practice:** Added 1 Dental Navigator Operatory and changed medical procedure rooms to 1. Added that Express Care is using approximately 2,000 square feet of the Administration space. Added Express Care hours.

**Non-Physician Supervision**

**8.0.01 Non-Physician Protocol for PA-C:** This policy was reviewed and felt no changes were needed at this time.

**8.0.02 Non-Physician Protocol for NP:** This policy was reviewed and felt no changes were needed at this time.

**Health Management by Age**

**9.0.1 Age Specific Patient Care:** Added the attachment of clinical competency.

**Quality Management**

**15.0.01 Abuse Policy:** Added information on how to make a report on suspected abuse either by phone or online. Added that the policy is in compliance with the Commonwealth of PA Notification Laws. Added where to find the definition of child abuse. Added that all reports of abuse are tracked by the Clinical Operations Manager.

# SUSQUEHANNA COMMUNITY HEALTH & DENTAL CLINIC, INC.

## Information Systems Identification and Authentication Policy

**Policy Category:** 1.0.6 Information Technology  
**Policy Owner:** IT Manager  
**Origination Date:** 05/20/2013  
**First Date Approved by Board of Directors:** 05/20/2013

### **Purpose:**

Susquehanna Community Health & Dental Clinic, Inc. (SCH&DC) has established this policy to ensure each user has a unique logon ID and password for each system in order to prevent unauthorized users from entering systems or using information resources.

### **Process:**

#### *User Logon IDs*

1. Individual users shall have unique logon IDs and passwords. An access control system shall identify each user and prevent unauthorized users from entering or using information resources. Security requirements for user identification include:

- a. Each user shall be assigned a unique identifier.
- b. Users shall be responsible for the use and misuse of their individual logon ID.

2. Users who desire to obtain access to SCH&DC systems or networks must have a completed and signed Network Access Form (NAR). This form must be completed and signed by the Supervisor of each user requesting access. The form must be submitted to the IT department at least three business days before the employee start date. All approved requests will be processed and signed within 48 hours by the IT Department.

3. All user login IDs are audited ~~quarterly~~quarterly, and all inactive logon IDs are revoked. Upon the departure of all employees and/or contractors, the respective Supervisor notifies the IT Support Specialist Information Systems Manager via the NAR, at which time login IDs are revoked by the IT Support Specialist or the IT Support Technician.

#### *Passwords*

User IDs and passwords are required in order to gain access to all SCH&DC networks and workstations. All passwords are restricted by an organization-wide password policy to be of a "Strong" nature. This means that all passwords must conform to restrictions and limitations that are designed to make the password difficult to guess. Users are required to select a password in order to obtain access to any electronic information both at the server level and at the workstation level.



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### *Confidentiality Agreement*

Users of SCH&DC information resources shall sign, as a condition for employment, an appropriate confidentiality agreement. The agreement shall include the following statement:

*I understand that any unauthorized use or disclosure of information residing on SCH&DC information resource systems may result in disciplinary action consistent with the policies and procedures of federal, state, and local agencies.*

Temporary workers and third-party employees not already covered by a confidentiality agreement shall sign such a document prior to accessing SCH&DC information resources.

Confidentiality agreements shall be reviewed when there are changes to contracts or other terms of employment, particularly when contracts are ~~ending~~ending, or employees are leaving an organization.

### *Access Control*

Information resources are protected by the use of access control systems. Access control systems include both internal (i.e. passwords, encryption, access control lists, etc.) and external (i.e. port protection devices, firewalls, etc.)

Access to SCH&DC information systems is granted only by the completion of a Network Access Request Form (Appendix A). This form can only be initiated by the appropriate Operations Manager/~~Supervisor, and~~Supervisor and must be signed by the Operations Manager/Supervisor and the Information Technology Specialist.

This guideline satisfies the “need to know” requirement of the HIPAA regulation, since the Supervisor is the person who most closely recognizes an employee’s need to access data. Users may be added to the information system, network, or EHR **only** upon the signature of the Information Systems Manager once verification is provided that is requested and necessary to complete their job.

### *User Login Entitlement Reviews*

If an employee changes positions at SCH&DC, the employee’s new Supervisor shall promptly notify the Information Systems Manager of the change of roles by indication on the NAR both the roles or access that need to be added and the roles or access that need to be removed so that the employee has access to the minimum necessary data to effectively perform their new job functions. The Information Systems Manager, upon verification that the employee is only granted access to data that is requested and necessary to complete their job, will sign-off approval of the change and forward to the IT Support Specialist for completion. The effective date of the position change should also be noted on the form so that the IT Support Specialist can ensure that the employee will have appropriate roles, access, and applications for their new job responsibilities. For a limited training period, it may be necessary for the employee who is changing positions to maintain their previous access as well as adding the roles and access necessary for their new job responsibilities.

## **Information Systems Identification and Authentication Policy**



## SUSQUEHANNA COMMUNITY HEALTH & DENTAL CLINIC, INC.

No less than annually, the Information Systems Manager or their designee shall facilitate entitlement reviews with each Supervisor to ensure that all employees have the appropriate roles, access, and software necessary to perform their job functions effectively while being limited to the minimum necessary data to facilitate HIPAA compliance and protect patient data.

### *Termination of User Logon Account*

Upon termination of an employee, whether voluntary or involuntary, the Supervisor shall promptly notify the Information Systems Manager by submitting the form and indicating "Remove Network Access" on the employee's NAR. The Human Resources Manager shall be responsible for ensuring that all keys, ID badges, and other access devices as well as SCH&DC equipment and property are returned to SCH&DC prior to the employee leaving on their final day of employment.

No less than quarterly, the Information Systems Manager or their designee shall provide a list of active user accounts for both network and application access to the Supervisors for review. Each Supervisor shall review the employee access lists within five (5) business days of receipt. If any of the employees on the list are no longer employed by SCH&DC, the Supervisor will immediately notify the Information Systems Manager of the employee's termination status and submit an updated NAR.

**Reviewed: 01/10/2014, 01/15/2016, 03/13/2018, 03/13/2019, 03/23/2021**

**Revised: 01/20/2014, 01/25/2016**

### **Signatures:**

_____	_____	Date:
<u>Kimberly Wetherhold</u>	<u>John Boll, Jr.</u> , Board Chair	James Yoxtheimer, President & CEO

**SUSQUEHANNA COMMUNITY HEALTH & DENTAL CLINIC, INC.**

**Adolescent Services**

**Policy Category:** 3.0.03 Reproductive Health Services  
**Policy Owner:** Clinical Operations Manager  
**Origination Date:** 04/27/2020  
**First Date Approved by Board of Directors:** 04/27/2020

**Purpose:**

To ensure that adolescent services are provided in a “youth-friendly” manner, meaning that they are accessible, equitable, acceptable, appropriate, comprehensive, effective, and efficient for youth.

**REGULATIONS:**

- Staff must not require written consent of parents/guardians for the provision of services to minors.
- Staff must not notify parents or guardians before or after a minor has requested services.
- Staff must not assume that adolescents are sexually active because they have come for services. (Many teens are seeking assistance in reaching this decision).
- Staff must not coerce patients to use contraception or to use any one method of contraception.
- Staff must inform patients that services are voluntary and confidential except in cases of mandatory reporting requirements.
- Follow-up is provided to increase probability of satisfaction with and on-going use of services.
- All counseling and education will be documented in the patient’s medical record.

**PROCEDURES:**

- Appointments will be made available to adolescents for medical services and counseling as soon as possible. Walk-in appointments for teens are available to address their needs if an adolescent presents for a visit.
- Assure adolescents that services are confidential and private.
- Assess adolescent/parent/guardian communication. Encourage discussion with a trustworthy adult if talking with parent/guardian is not probable.
- Provide adolescents with skilled counseling and detailed information as indicated on:
  - Resisting attempts of coercion regarding sex, including physical force or emotional manipulation
  - Using abstinence as a valid and responsible option
  - All contraceptive methods
  - Preparing adolescents to use a variety of methods effectively
  - Negotiations skills
  - Explanation of STD/HIV symptoms, prevention, and treatment
  - Using condoms to reduce the risk for STIs/HIV and pregnancy
  - Sexual abuse and date rape
  - Encouraging family involvement in seeking family planning services. If not

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discussed, the reason will be documented in the patient's medical record.

- Clarification of any misinformation about notification to parents and written consent
- Assure adolescents that if any follow-up is necessary, every attempt will be made to assure the privacy of the patient.
- Obtain an alternate phone number or agreed upon method for contact, i.e. text message, picture text, such as a butterfly, or some other agreed upon signal that will let the patient know that they should contact the Center.
- All attempts at follow-up will be documented in the patient's medical record.

**REVIEWED:** 03/11/2021

**REVISED:**

**Signatures:**

Date:

Kimberly Wetherhold  
~~John Bell, Jr. D.O.~~, Board Chair

James Yoxtheimer, President & CEO



# SUSQUEHANNA COMMUNITY HEALTH & DENTAL CLINIC, INC.

## Pregnancy Testing and Counseling

**Policy Category:** 3.0.17 Reproductive Health Services  
**Policy Owner:** Clinical Operations Manager  
**Origination Date:** 04/27/2020  
**First Date Approved by Board of Directors:** 04/27/2020

### Purpose:

To provide pregnancy diagnosis and counseling to all clients in need of this service, in accordance with recommendations of major professional medical organizations such as the American College of Obstetricians and Gynecologist (ACOG) and the American Academy of Pediatrics (AAP).

### Pregnancy Testing Includes:

- General consent for services signed by the patient yearly
- Medical history
- Reproductive Life Plan discussion
- Qualitative urine test with high sensitivity
- Quantitative serum pregnancy test for diagnosis and management if needed
- Discussion of test results with the patient

### Positive Pregnancy Test Process:

- Estimation of gestational age (if LMP is uncertain, a quantitative serum pregnancy test may be ordered)
- Information about normal signs and symptoms of early pregnancy
- Instructions on when to report any concerns to a provider for further evaluation
- Referral for immediate diagnosis and management if suspicion of ectopic pregnancy or other pregnancy abnormalities
- Provision of counseling and referral resources

**All pregnant patients are offered options counseling by a trained “Options Counselor”, Every woman who is medically verified as being pregnant must receive counseling by a physician or Advanced Practice Provider (CRNP, PA, CNM) unless the patient does not wish to receive such information and counseling.**

### Options counseling must include:

- Discussion of accessing prenatal care, adoption, and pregnancy termination. All counseling questions concerning termination must be handled by a physician or Advanced Practice Provider (CRNP, PA, CNM)
- Referrals to appropriate providers for follow-up care at the patient’s request
- Assessment of client’s social support and referral to appropriate counseling or other supportive services as needed

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**Counseling on each option must be non-judgmental, non-directive, neutral and factual. Counselors will provide resources on all three options if the patient is undecided when leaving the office.**

**Clients who wish to continue the pregnancy are given a prenatal referral and provided with initial pregnancy counseling that includes:**

- Encouragement to take a prenatal vitamin containing folic acid
- Recommendation to avoid smoking, alcohol, and other drugs
- Recommendation to avoid eating fish that might have high levels of mercury
- Advice indicating that some medications may be contraindicated in pregnancy and any current medications being taken need to be reviewed by a prenatal care provider
- STD screening (including HIV) if there might be a delay in obtaining prenatal care
- Referral for ~~age-appropriate~~ age-appropriate vaccinations if needed

**Negative Pregnancy Test Process (Clients who do not want to become pregnant):**

- Information about Family Planning services, including contraception
- Exploration of why the client thought she was pregnant and sought pregnancy testing
- Assessment of difficulties using a current method of contraception
- Discussion of making a Reproductive Life Plan

**Negative Pregnancy Test Process (Clients who are trying to become pregnant):**

- Information and services to help achieve pregnancy (basic infertility services)
- Preconception health education
- STD services
- Reproductive Life Plan

**REVIEWED: 03/11/2021**

**REVISED:**

**Signatures:**

\_\_\_\_\_  
Kimberly Wetherhold~~John Boll, Jr. D.O.~~, Board Chair      Date: \_\_\_\_\_  
James Yoxtheimer, President & CEO

## **RIVER VALLEY HEALTH & DENTAL CENTER**

### **REPRODUCTIVE HEALTH SERVICES**

#### **REFERRAL RESOURCES**

##### **Sterilization - Female**

UPMC Susquehanna Ob/Gyn  
740 High Street, Suite 1004, Williamsport, PA 17701  
Phone: (570) 321-3300

##### **Sterilization – Male**

Family Medicine Residency Center  
699 Rural Avenue, SL1, Williamsport, PA 17701  
Phone: (570) 321-2345

UPMC Susquehanna Urologic Associates, LTD  
1705 Warren Ave., Suite 206, Williamsport, PA 17701  
Phone: (570) 321-3300

##### **Adoption**

Eckels Adoption Agency  
R. 915 Fifth Avenue, Williamsport, PA 17701  
Phone: (570) 323-2520

##### **Prenatal Care**

UPMC Family Medicine Residency Center (Prenatal Center)  
740 High Street, Suite 4001, Williamsport, PA 17701  
Phone: (570) 321-2345

UPMC Susquehanna Ob/Gyn  
740 High Street, Suite 1004, Williamsport, PA 17701  
Phone: (570) 321-3300

Office of Amy R. Cousins, MD  
149 Vestal Parkway West  
Vestal, NY 13851  
Phone: (607) 785-4171, or 1-800-676-9011

Allentown Women's Center  
31 South Commerce Way, Suite 100  
Bethlehem, PA 18017  
Phone: (877) 342-5292

Philadelphia Women's Center  
777 Appletree Street, 7<sup>th</sup> Floor  
Philadelphia, PA 19106  
Phone: (800) 869-2330



**Primary Care**

River Valley Health & Dental Center  
471 Hepburn Street, Williamsport, PA 17701  
Phone: (570) 567-5400

Physician Finder – UPMC Susquehanna  
Phone: (570) 321-2160; (877) 883-4789

**Nutrition**

River Valley Health & Dental Center  
471 Hepburn Street, Williamsport, PA 17701  
Phone: (570) 567-5400

WIC Program  
612 West Fourth Street, Williamsport, PA 17701  
Phone: (570) 322-7656

Penn State Cooperative Extension Service  
542 County Farm Road, Suite 206, Montoursville, PA 17754  
Phone: (570) 433-3040

**Infertility**

UPMC Susquehanna Ob/Gyn  
740 High Street, Suite 1004, Williamsport, PA 17701  
Phone: (570) 321-3300

OB-GYN Clinic, Access Point Program  
Hershey Medical Center, Hershey, PA 17033  
Phone: (570) 531-8521

Geisinger Medical Center Fertility Center  
100 North Academy Avenue  
Danville, PA 17822  
Phone: (800) 275-6401

**Natural Family Planning**

Donna and Kevin Howey  
Phone: (570) 435-3364

**Genetic Screening**

UPMC Susquehanna Ob/Gyn  
740 High Street, Suite 1004, Williamsport, PA 17701  
Phone: (570) 321-3300

**Genetic Screening/Counseling**

UPMC Susquehanna Ob/Gyn  
740 High Street, Suite 1004 Williamsport, PA 17701  
Phone: (570) 321-3300

Milton S. Hershey Medical Center (Division of Genetics)  
P.O. Box 850, Hershey PA 17033  
Phone: (717) 534-8414

**Medical Emergency – UPMC Susquehanna**

Williamsport Regional Medical Center, Emergency Department  
700 High Street, Williamsport, PA 17701  
Phone: (570) 321-2000

Muncy Valley Hospital, Emergency Department  
East Water Street, Muncy, PA 17740  
Phone: (570) 546-4201

**Emergency Contraception (if unable to purchase OTC)**

Family Planning Services of Snyder, Union, Northumberland, Mifflin & Juanita Counties  
650 US Highway 15 South, Lewisburg, Pa 17837  
Phone: (570) 523-3600

**Abnormal Exam or Test Results**

UPMC Susquehanna Family Medicine Residency Center  
741 High Street, Suite 4001, Williamsport, PA 17701  
Phone: (570) 321-2345

UPMC Susquehanna Ob/Gyn  
741 High Street, Suite 1004, Williamsport, PA 17701  
Phone: (570) 321-3300

**Sexual Dysfunction**

UPMC Susquehanna Ob/Gyn  
741 High Street, Suite 1004, Williamsport, PA 17701  
Phone: (570) 321-3300

UPMC Susquehanna Urologic Associates, LTD  
1705 Warren Avenue, Suite 206, Williamsport, PA 17701  
Phone: (570) 326-8090

**Cervical Cap Fitting**

UPMC Susquehanna Ob/Gyn  
741 High Street, Suite 1004, Williamsport, PA 17701  
Phone: (570) 321-3300

**Social Services**

River Valley Health & Dental Center (Behavioral Health)  
471 Hepburn Street, Williamsport, PA 17701  
Phone: (570) 567-5400

Wise Options (YWCA) – Domestic Violence  
815 West Fourth Street, Williamsport, PA 17701  
Phone: (570) 322-4637

Lycoming County Department of Children & Youth  
48 West Third Street, Williamsport, PA 17701  
Phone: (570) 327-2405

STEP - Transportation  
2137 Lincoln Street, Williamsport, PA 17701  
Phone: (570) 326-0587

Department of Health & Human Services  
400 Little League Boulevard  
Williamsport, PA 17701  
Phone: (570) 327-3311

### **Mental Health**

River Valley Health & Dental Center (Behavioral Health)  
471 Hepburn Street, Williamsport, PA 17701  
Phone: (570) 567-5400

UPMC Susquehanna Behavioral Health Center  
1000 Grampian Boulevard  
Williamsport, PA 17701

### **Sexually Transmitted Diseases**

River Valley Health & Dental Center (Reproductive Health Services)  
471 Hepburn Street, Williamsport, PA 17701  
Phone: (570) 567-5400

### **HIV Counseling & Testing Sites**

River Valley Health & Dental Center (Reproductive Health Services)  
471 Hepburn Street, Williamsport, PA 17701  
Phone: (570) 567-5400

Pa. Department of Health, State Health Center  
1000 Commerce Park Drive, Suite 109, Williamsport, PA 17701  
Phone: (570) 327-3400

AIDS Resource Alliance  
500 West Third Street, Williamsport, PA 17701  
Phone: (570) 322-8448

### **Mammography Screening**

Kathryn Candor Lundy Breast Health Center  
1100 Grampian Boulevard, Williamsport, PA 17701  
Phone: (570) 326-8200



**Smoking Cessation**

River Valley Health & Dental Center  
471 Hepburn Street  
Williamsport, PA 17701

**Dental Care**

River Valley Health & Dental Center  
471 Hepburn Street, Williamsport, PA 17701  
Phone: (570) 567-5400

Revised: 2/16/16  
2/01/17  
3/08/18 SW  
2/22/2021 BW

***Referral Resources***

## **RIVER VALLEY HEALTH & DENTAL CENTER**

### **REPRODUCTIVE HEALTH SERVICES**

#### **PROTOCOL: EDUCATIONAL MATERIALS APPROVAL PROCESS**

1. To ensure the quality and health literacy of our patient education materials we have adopted a systematic approach to evaluating those materials.
2. The RHS staff work in conjunction with the Clinical Operations Manager to review educational materials for distribution to our patients.
3. All educational materials are sent to the QA/QI Executive Committee for review and subsequently approved by the Board of Directors and the PR and Marketing Committee, which is comprised of consumer members.
4. RVH&DC uses the Patient Education Materials Assessment Tool (PEMAT) to determine the usefulness of the material. The material should score a 90% or better on the tool to be considered acceptable materials.
5. If the PEMAT score is less than 80% the material may be either modified or excluded from distribution to patients.

**Reviewed: 7/2020 BW, 03/2021 BW**

**Revised: 04/2021**

***Educational Materials Approval Process***

#### **4.5.5 Employee Discount on Services**

##### **Purpose**

To define to policy an employee discount in relation to SCH&DC services.

##### **Policy**

SCH&DC will offer a 100% discount on services that are provided at any SCH&DC location, in the following manner:

- All staff and immediate family members that have an insurance plan will receive a 100% discount on services upon payment of the insurance claim. Any dental services that have an associated lab fee, such as crowns, will have the service discounted, but staff will be required to pay full lab fees.
- ~~The 100% discount will be limited to SCH&DC Health and Dental Insurance Plan's allowable costs. For example, SCH&DC plan has a \$30 copay, but staff member not on SCH&DC insurance has a \$40 copay, SCH&DC will provide a \$30 discount to staff member.~~
- All staff and immediate family members that do not have an insurance plan will receive a 50% discount on all services. Any dental services that have an associated lab fee, such as crowns, will have the service discounted, but staff will be required to pay full lab fees.

SCH&DC will offer employees a discount on services provided at River Valley Pharmacy based on the lesser of insurance cost or cost of the pharmaceutical plus \$1.00.

To be eligible for the discount, staff are required to complete the Staff/Family Member form and submit it to HR. This form can be updated at any time throughout the staff member's employment with SCH&DC. The discount ends for staff and immediate family members immediately upon separation of the staff member's employment with SCH&DC.

##### **Applicability**

All SCH&DC employees.



## SUSQUEHANNA COMMUNITY HEALTH & DENTAL CLINIC, INC.

### Principles of Practice

**Policy Category:** 7.0 Principles of Practice  
**Policy Owner:** Compliance Officer  
**Origination Date:** 08/27/2012  
**First Date Approved by Board of Directors:** 08/27/2012

#### Department Identity

##### **A. Mission**

To extend God's healing by providing inclusive, quality primary medical and dental care to all those who need it.

##### **B. Vision**

To create access to cost effective and compassionate dental and primary health care where the community need is evident. To focus on the health and dental needs of the under- and un-insured, and to provide quality care for all who need it.

##### **C. Purpose**

To provide access to the community for primary medical and dental care services for patients of all ages.

##### **D. Goals**

To provide safe, efficient, compassionate primary health and dental care with a focus on prevention and patient education.

#### Description of Unit/Location

The primary location for services of Susquehanna Community Health & Dental Clinic, Inc. dba River Valley Health & Dental Center is located at 471 Hepburn Street, Williamsport, PA 17701.

Administrative offices are located at 431 Hepburn Street, Williamsport, PA 17701.

The mailing address utilized for all correspondence with Susquehanna Community Health & Dental Clinic, Inc. dba River Valley Health & Dental Center shall be 471 Hepburn Street, Williamsport, PA 17701.

##### **A. Facilities include:**

- The main facility is composed of 26,000 sq. ft which includes:
  - 31 Medical Exam rooms (Private, and oxygen tanks available)
    - 23 Primary Care Rooms that include 1 bariatric table
    - 6 Reproductive Health Services Rooms
    - 2-1 Medical Procedure Rooms
    - 1 Dental Navigator Operatory

### Principles of Practice

## SUSQUEHANNA COMMUNITY HEALTH & DENTAL CLINIC, INC.

- 19 Operatories
  - 15 Operatories for adult care that include 1 bariatric chair
  - Pediatric dental suite with 4 pediatric chairs
  - Nitrous capacity in the pediatric suite and 4 operatories
- Pharmacy
  - Approximately 400 square feet is segregated and laid out in conformance with PA regulatory requirements.
- The Administration space is composed of 7500 sq. feet which includes staff offices. In addition, Express Care Services are provided using approximately 2,000 square feet in this space comprised of and three (3) clinical exam rooms for future expansion.

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### Patient Population

Infant through geriatric are served at the Susquehanna Community Health & Dental Clinic, Inc.

- SCH&DC serves outpatients of all ages needing primary medical care.
- The Dental department provides general dental care to individuals of all ages. The scope of practice is general dentistry, with a focus on prevention. Restorative services are also provided, as appropriate. Pediatric Dental services are also provided primarily to patients under six years of age.

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### Core Services

- Primary Care – Medical care for patients without a primary/family physician which encompasses primary medical, reproductive health, behavioral health, coordination of care and chiropractic services.
- Acute Care/Sick Visit – Minor illnesses that a patient feels need immediate attention. Also used to discourage inappropriate and non-reimbursable use of the Emergency Department.
- Pediatric Care – Children in the state HMO program, Family Care Network. Provides physicals, screenings, and immunizations. Also provides exams for community programs like Head Start.
- Dental Care – General, preventative, restorative, and emergency along with pediatric dental.
- Pharmacy – Dispenses patient prescriptions and Over-the-Counter medications.

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### Methods to Assess and Meet Care Needs are as Follows:

Patient and family needs are assessed in an individualized manner with attention to special needs based on:

1. Age
2. Culture

### Principles of Practice



## **SUSQUEHANNA COMMUNITY HEALTH & DENTAL CLINIC, INC.**

3. Religion
4. Physical and mental ability
5. Medical condition/Disease process
6. Procedure
7. Physician practice patterns

### **Assessment Mechanism:**

1. Physical assessment by clinical staff
2. Data collection and patient history interview
3. Past medical records
4. Testing: X-ray, lab, EKG, etc.
5. Consultation and referral
6. Patient and family input

Assessment information is recorded in the patient record. It is the basis for planning and evaluating patient care.

### **Coordination: Integration of Services**

- SCH&DC recognizes the privileges and capabilities of physicians and APPs as credentialed by the credentialing policy.
- Physician Assistants (PA) and Certified Registered Nurse Practitioners (CRNP) supplement the provider coverage for the SCH&DC.
- Both Registered Nurses (RN) and Licensed Practical Nurses (LPN) provide nursing care.
- Licensed Clinical Social Workers (LCSW) provide behavioral health care and Licensed Social Workers (LSW) provide social services support.
- SCH&DC also has secretarial and Office Assistants (A).
- Dentists, Dental Hygienists to include Public Health Dental Hygienists (PHDH), Dental Assistants, Expanded Function Dental Assistants (EFDA), and cover the Dental Center.
- SCH&DC is linked into other community health care delivery resources through our governing Board of Directors, participation in the Lycoming County Health Improvement Coalition, and through referral relationships and shared patient populations.

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### **Facilities**

Facilities support services include:

- Maintenance
- Housekeeping
- Telecommunications
- Information Technology
- Biomedical
- Security

### **Principles of Practice**



## SUSQUEHANNA COMMUNITY HEALTH & DENTAL CLINIC, INC.

Emergency equipment and supplies are stored on site.

### Code Cart:

- The Center has 2 AED machines:
  - One Machine is located in the Dental Sterilization Area and is marked with AED signage.
  - One machine is located on the Code cart in Medical, which is stored in the Medication Room.
- AED's are checked weekly according to system standard.

### Central Supply:

- There is a central supply area in the storage rooms.
- Other supplies are stocked in med/lab room and cupboards in each exam/operator room.

### Linen:

- Linen is supplied by Paris Linens.

### Environmental:

- Maxworx - carries out daily cleaning services.

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### **Hours of Operation**

Dental services are generally provided Monday through Friday, excluding holidays. Scheduled hours begin at 7:45 AM. Mondays through Wednesday the Dental Center closes at 6:00 PM and on Thursdays and Fridays closes at 5:00 PM.

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Medical services are generally provided Monday through Friday, excluding holidays, and Saturday mornings.

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Scheduled hours are – 8:00 AM to 7:00 PM Monday through Thursday, 8:00 AM – 5:00 PM on Friday and 8:00 AM – 12:00 PM on Saturday.

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Express Care Services hours are – 8:00 AM to 5 PM Monday through Friday.

**Reviewed: 04/08/2016, 04/12/2018, 04/11/2019, 4/13/2020, 3/31/2021**

**Revised: 04/23/2018, 04/22/2019, 3/31/2021**

### Signatures:

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~~John Boll, Jr. D.O.~~ Kimberly Wetherhold., Board Chair      Date: \_\_\_\_\_  
President & CEO      James Yoxtheimer,

### Principles of Practice

**SUSQUEHANNA COMMUNITY HEALTH & DENTAL CLINIC, INC.**

**Principles of Practice**



**SUSQUEHANNA COMMUNITY HEALTH & DENTAL CLINIC, INC.**

**Age-Specific Patient Care**

**Policy Category:** 9.0.1  
**Policy Owner (s):** Clinical Operations Manager  
**Origination Date:** 08/27/2012  
**First Date Approved by Board of Directors:** 08/27/2012

**Policy:**

All staff members will demonstrate the knowledge, skills, and abilities necessary to provide care based on physical, psychological, educational and safety needs of patients/clients in the patient care area. The knowledge, skills and abilities to provide such care may be gained through education or experience. Evaluation of this aspect of patient care will be ongoing and documented yearly as a clinical competency. Employees will follow various protocols approved by EPSDT, the Department of Health and Human Services, and the Center for Disease Control when administering immunizations and performing age-appropriate check-ups.

**Notification Process:**

**Outcome Criteria:**

- I. Employee Education: All staff providing direct patient care will receive appropriate education related to age-specific needs of patients/residents/significant others served in their service area.
  - A. Information will be provided yearly at minimum and more frequently as determined by the Clinical Operations Manager.
  - B. Areas of education will contain any or all of the following:
    1. Growth-development principles
    2. Physical assessment
    3. Psychological needs
    4. Educational approaches
    5. Safety issues
  - C. The skills and knowledge needed to provide such care will be gained through education, training and/or experience.
- II. Competency Evaluation
  - A. Employee competency will be assessed through written knowledge evaluation (e.g., tests) and through observation by a Registered Nurse [\(See attachment\)](#).
  - B. Documentation will occur during orientation and on an annual basis (Employee Appreciation Review). Behaviors to be assessed are:
    1. Key concepts of growth and development

**Age-Specific Patient Care**



Revised: 04/23/2018

Date: \_\_\_\_\_  
Kimberly Wetherhold., Board Chair James Yoxtheimer, President & CEO

### Age-Specific Patient Care

Name \_\_\_\_\_

Instructions: Please check appropriate box. Each basic skill must have 1 of the 5 experience choices marked.

Key Guidelines:

- A- No experience
- B- Training/Minimal Experience, Needs Supervision
- C- Adequate Experience
- D- Sufficient Skill to Perform Without Supervision
- E- Proficient in Performing Skill

	A	B	C	D	E
<b>Neonate (Less than 1 month old)</b>					
Knowledge and development					
Ability to assess and interpret					
Ability to provide service or care for age-specific patients					
Communication skills to interpret age-specific responses to treatment					
Ability to involve family/significant other in decision-making plan of care					
<b>Infant (1 month to 1 year old)</b>					
Knowledge and development					
Ability to assess and interpret					
Ability to provide service or care for age-specific patients					
Communication skills to interpret age-specific responses to treatment					
Ability to involve family/significant other in decision-making plan of care					
<b>Pediatric (1 year to 13 years old)</b>					
Knowledge and development					
Ability to assess and interpret					
Ability to provide service or care for age-specific patients					
Communication skills to interpret age-specific responses to treatment					
Ability to involve family/significant other in decision-making plan of care					
<b>Adolescent (13 years to 18 years old)</b>					
Knowledge and development					
Ability to assess and interpret					
Ability to provide service or care for age-specific patients					
Communication skills to interpret age-specific responses to treatment					
Ability to involve family/significant other in decision-making plan of care					

Adult (18 years to 65 years old)					
Knowledge and development					
Ability to assess and interpret					
Ability to provide service or care for age-specific patients					
Communication skills to interpret age-specific responses to treatment					
Ability to involve family/significant other in decision-making plan of care					
Geriatric (over 65 years old)					
Knowledge and development					
Ability to assess and interpret					
Ability to provide service or care for age-specific patients					
Communication skills to interpret age-specific responses to treatment					
Ability to involve family/significant other in decision-making plan of care					

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Competency completed by RN

\_\_\_\_\_  
Date



## SUSQUEHANNA COMMUNITY HEALTH & DENTAL CLINIC, INC.

### Abuse

**Policy Category:** 15.0.01 Quality Management  
**Policy Owner:** Clinical Operations Manager  
**Origination Date:** 08/27/2012  
**First Date Approved by Board of Directors:** 08/27/2012

#### Process:

1. All Susquehanna Community Health & Dental Clinic, Inc. (SCH&DC) employees are considered mandated reporters and will notify the Clinical Operations Manager or designee immediately of any suspected case of child, adult, or elder abuse unless the victim is a competent adult who requests no report be made and victim is NOT in any immediate danger. The staff member who suspects the abuse, or has been told that abuse has occurred, will be expected to initiate the report.

4.2. The report will be made by calling Childline at 1-800-932-0312 and/or by using the online portal @ [www.compass.state.pa.us/cwis](http://www.compass.state.pa.us/cwis)

2.3. Documentation will be provided as required by law and will include the following:

- The initial call to the appropriate hotline
- Supportive information
- Follow up contact

3.4. Informed written consent from any patient involved is not required in order to report suspected abuse to the proper authorities.

4.5. SCH&DC employees will receive education and be able to identify signs and symptoms of abuse.

6. All licensed staff will complete mandatory abuse education in accordance with their licensure.

7. This policy is in compliance with the Commonwealth of PA Notification Laws.

8. The definition of child abuse can be found at [www.keepkidssafe.gov/about/signs/index.htm](http://www.keepkidssafe.gov/about/signs/index.htm).

5.9. All reports of abuse are tracked by the Clinical Operations Manager.

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#### Signatures:

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Kimberly Wetherhold, Board Chair

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James Yoxtheimer, President & CEO

**REVIEWED:** 10/18/2012, 11/20/2012, 04/08/2016, 08/01/2018, 08/03/2020, 03/11/2021

**REVISED:** 11/26/2012, 08/27/2018, 08/24/2020