Chain of Command Policy – SAMPLE

Subject: Chain of Command

I. Policy

Any employee who identifies a problem with regard to patient care and is unable to reconcile it with the attending physician or charge nurse should present the issue to successively higher levels of authority within the organization’s chain of command until a satisfactory resolution is achieved. The chain of command process is inclusive of the governing body of the organization. All staff members shall be expected to invoke this procedure in furtherance of patient safety and the organization’s mission, values and goals.

II. General Chain of Command for Serious Patient Care Issues for Nurses

1. Charge nurse and licensed provider - risk management if it is a serious event involving a patient, staff member or visitor injury
2. Unit nursing manager
3. Nursing shift supervisor
4. Nursing department director
5. Nursing administrative vice president
6. Chief nursing officer
7. Administrator on call
8. Executive administrator: chief operating officer (COO), then chief executive officer (CEO), then president
9. Governing body

Note: Issues involving licensed providers should include notification of the department/section chairperson at any time the charge nurse or higher level person thinks that a patient is in serious jeopardy and his/her concerns are not being addressed. If the issue is still not resolved, the vice president of medical affairs (VPMA) or chief medical officer (CMO) will be notified by the unit nursing manager or shift supervisor. Notify risk management and complete an incident report.
III. Procedures

The following procedures must be followed to invoke the chain of command before taking an issue to the next level of authority and any subsequent authority levels thereafter.

1. Clearly identify the patient care issue to be resolved.
2. Ensure that all appropriate people are aware of the situation and that all pertinent information is conveyed using the SBAR format (adapted with permission from copyrighted material of Kaiser Foundation Health Plan, Inc., California Regions).
3. SBAR is a communication tool used to standardize discussions among caregivers to ensure that critical information about a patient’s status is communicated effectively. SBAR is a mechanism for framing conversations, especially critical ones requiring immediate action:

   **S - SITUATION:** A concise statement of the problem - chief complaint, acute change in condition
   **B - BACKGROUND:** Pertinent and brief information related to the situation - vital signs, pertinent history
   **A - ASSESSMENT:** Analysis and consideration of the options - what you found and think about the situation
   **R - RECOMMENDATION:** Action you request and recommend - what you want

4. Take the issue from the authority figure closest to the event and move up the organization’s chain of command, as the situation warrants.
5. Incorporate any additional information as the issue is addressed at each level (e.g., response of authority levels at each level of the chain, suggested resolution, solutions).
6. Document only the facts of notification. Do not criticize other professionals in the medical record.