

## **ABN: Annual Report of Standardized Procedures**

### **2014 Annual Standardized Procedure Report Instructions**

It is now time to complete the 2014 Annual Report of Standardized Procedures as mandated by ABN Administrative Code, Rule 610-X-6-.12(6). To decrease completion time, we added a review option selection. If your Standardized Procedures have not changed since last year, you may select this option and it will take you directly to the last page of the report. As in previous years, the 2014 format will allow the chief nurse and/or designee to edit, delete or make additions to the 2013 report. Updated instructions are attached for those of you who are new or need reminding how to complete the report.

**Remember, if your facility/agency belongs to a larger corporation, please check with your corporate nurse for direction.** The corporate nurse may be completing the report for all facilities/agencies in the corporation.

## ABN: Annual Report of Standardized Procedures

The Annual report should include practices/procedures beyond basic education being performed by all nurses providing care in your facility/agency in accordance with the Alabama Board of Nursing Administrative Code Rule 610-X-6-.12(3).

Deadline for the 2014 Annual Report of Standardized Procedures reflecting practice in 2013 is **June 6, 2014.**

**Location:** The Report is located on the Alabama Board of Nursing Website [www.abn.alabama.gov](http://www.abn.alabama.gov) under the Nursing Practice tab, select 'Standardized Procedures

STEPS/INFO	DIRECTIONS
STEP ONE	<b>CLICK on the 2014 Standardized Procedures link from the menu on the left hand side of the page</b>
STEP TWO	<b>Complete all Demographic Information (Page 1 of Report). If needed, the detail is listed below:</b> 1. CLICK the facility type that best describes your facility/agency  2. Using the drop down box, select the name of the COUNTY where your facility is physically located by CLICKING.  3. CLICK on the drop down box entitled "FACILITY" and the names of facilities in your county will be available for you to select the name of your facility by CLICKING on the facility's name.  4. After selecting the name of your facility, the ADPH Facility Number (this is for ABN use) and the name of your facility/agency will be entered by the computer. If the name of your facility/agency has changed, enter the "new" name.  5. Verify the address of your facility/agency. If the address is incorrect or incomplete, please make the appropriate corrections or additions. <b>Note: If your facility is NOT a hospital, proceed to number 7 below.</b>  6. If your facility is a hospital, CLICK in the button that corresponds to your facility's LICENSED bed capacity.  7. The computer will enter the date upon access of the form.  8. ENTER the name of the person preparing the report.  9. Review the name of the CHIEF NURSING OFFICER OR DIRECTOR OF NURSING for your facility. If this has changed, please enter the correct name.

## ABN: Annual Report of Standardized Procedures

	<p>10. Review the RN LICENSE NUMBER for the Chief Nursing Officer or Director of Nursing for your facility and enter or change, if applicable.</p> <p>11. Review or enter the correct TELEPHONE NUMBER including the area code for the Chief Nursing Officer or person we can call with any questions.</p> <p>12. Review or enter the correct EMAIL ADDRESS of the Chief Nursing Officer or person we can contact with any questions.</p> <p>13. If your facility is a nursing home, enter the name of the Assistant Director of Nursing and applicable license number. <b><i>If your facility is NOT a nursing home, proceed to number 14 below.</i></b></p> <p>14. For <b>corporations</b>, check the box(es) to indicate that this report contains the report of standardized practices/procedures for the facilities/agencies listed. For each agency/facility within the corporation enter the name of the Director of Nursing and applicable license number in the box that corresponds to that facility/agency. If applicable, also add the name of the Assistant Director of Nursing and applicable license number. If additional facilities/agencies are included in this report and their names are not listed, enter their names in the <b>COMMENT</b> Box located at the end of the report. <b><i>If your facility/agency is NOT part of a corporation, proceed to number 15 below.</i></b></p> <p>15. CLICK on the “Save This” button.</p> <p>16. If you are ready to begin checking or entering procedures, CLICK on the “Procedures Page&gt;&gt;&gt;” button.</p>
<p><b>STEP THREE</b></p>	<p><b>Complete the Procedures Section (Page 2). If needed, the detail is listed below:</b></p> <p>1. The practices/procedures that were submitted last year for your facility should appear <b>(Do NOT send the policy/procedure to the ABN)</b>. If you have no changes to report this year, you may select the check box on the report. <b>Example:</b> <input type="checkbox"/> <b>Reviewed: No changes at this time and Skip to Step 4</b></p> <p>2. If this is the first time your facility/agency is completing this report, proceed to number 4.</p> <p>3. Review the list of practices/procedures submitted in 2013. <i>To proceed to an additional page, if applicable, click on “2” at the bottom of the page.</i> (Depending upon the number of practices/procedures submitted, you may also need to click “3,” “4,” etc. to view the additional</p>

## ABN: Annual Report of Standardized Procedures

	<p>pages.)</p> <p>4. If the practice/procedure listed is NOT performed at your facility any longer CLICK the “DELETE” button on the left of the row and follow the prompt to permanently delete that practice/procedure. <b>If this is the first time your facility is completing the report (never have completed it before), certain procedures will default based on your facility type. Please delete the procedures not performed at your facility.</b></p> <p>5. Click the “EDIT” button on the left of the row for each procedure listed and follow the prompts to edit the information and to answer the question regarding policies. If the practice/procedure listed or the supporting information has changed (such as nursing discipline performing practice/procedure, limitations, supervision), change or add the appropriate information. Reminder:</p> <ul style="list-style-type: none"><li>• Performed By: What nurses in your facility can perform this practice/procedure?</li><li>• Limitations: Are the nurses limited by area in which they work, by experience or certification such as ACLS or WCON certification?</li><li>• Supervised by: What <b>discipline/classification</b> supervises the nurses performing the practice/procedure? (Hint: Nurses are supervised by physicians, dentists or nurses)</li><li>• Policy in Place: Check to indicate that the facility/agency has a POLICY IN PLACE for the practice/procedure listed.</li></ul> <p>6. When you have verified that the edited data is correct, CLICK the “UPDATE” button to the left of the line and proceed down the table.</p> <p>7. Be sure to indicate if a policy is in place for all practices/procedures, There should always be a policy in place. <u>The section must be completed and cannot be left blank.</u></p> <p><b>To ADD PRACTICES/PROCEDURES: The “Add” feature is available on every page allowing you to add additional practices/procedures.</b></p> <p>8. For additional practices/procedures that were not added in the previous report (or for a new report), go to the “ADD” link on the left-hand side of the line, enter the name of the practice/procedure beyond basic nursing education (one at a time) and click “ADD”.</p> <p>9. Proceed across the line and CLICK to indicate what nurses are allowed to perform the practice/procedure in your facility. (You may click multiple entries.)</p>
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## ABN: Annual Report of Standardized Procedures

	<p>10. ENTER any limitations or restrictions that apply to that particular practice/procedure in your facility. (Are the nurses limited by area in which they work, experience or certification?)</p> <p>11. ENTER the classification/discipline of the person supervising nurses performing the practice/procedure. (Note: this should be a physician, registered nurse or dentist.)</p> <p>12. CHECK “yes” or “no” to indicate if a policy is present in the facility/agency for the practice/procedure listed. There should always be a policy available.</p> <p>13. Continue by ENTERING all standardized practices/procedures for your facility (one at a time) that were not added in the previous year.</p>
<b>STEP FOUR</b>	<p><b>Submission of Data to the ABN. If needed, the detail is listed below:</b></p> <p>1. If you have completed data entry for the report and are ready for the report to be transmitted to the ABN:</p> <ul style="list-style-type: none"> <li>• CLICK the check box “I attest that the data contained in this report is true and accurate and the required elements of the standardized procedures listed are present in my facility/agency.”</li> <li>• CLICK the “SEND to ABN” button and the information will be sent to the ABN.</li> </ul> <p>2. If you are NOT finished and need to come back later to finish the report <b>DO NOT</b> mark the “I attest that the data is true and accurate.....” Do NOT click the “SEND to ABN” checkbox. Once this “SEND” button is clicked, you will not be able to go back and make any changes to the report without calling the ABN to re-open your facility’s data.</p> <p>3. To PRINT the report, click on the link provided. Be patient, it may take a few minutes to print. <b>NOTE: To print this report, your facility/agency must have Adobe Acrobat Reader 7.0 or higher.</b> You may obtain this version from <a href="http://www.adobe.com">www.adobe.com</a> .</p> <p>4. If you have comments to send to the ABN, enter them in the COMMENT box provided.</p>
<b>NOTE</b>	<p>We are unable to send you a “return/receipt” notice. However, when you click the “Send to ABN” box, you should get a confirmation screen. If you wish to verify submission to the ABN, go back to steps 1 through 5 to access your facility in the appropriate county. If you can no longer access your facility’s name in your county, the report is on its way to the ABN.</p>

## ABN: Annual Report of Standardized Procedures

<b>NOTE</b>	If your facility/agency belongs to a larger corporation, please check with your corporate Chief Nursing Officer (CNO) for direction. The corporate CNO <u>may</u> be completing the report for all facilities/agencies.
<b>CONTACT Questions</b>	For questions about the practices/procedures to enter in the report, contact Joyce Jeter by email at <a href="mailto:joyce.jeter@abn.state.al.us">joyce.jeter@abn.state.al.us</a> or by phone at (334) 293-5200.
<b>CONTACT Technical</b>	For technical assistance with completing the report and to re-open your report, contact Richard Boyette by email at <a href="mailto:Richard.Boyette@abn.alabama.gov">Richard.Boyette@abn.alabama.gov</a> or by phone at (334) 293-5200.