



# Agency Mini Orientation

## **WELCOME**

We hope that this manual will assist you in your orientation

Please respect our patients and visitors by parking in the employee designates spaces

- It is advisable that you leave your valuables at home.
- If you choose to purchase a lunch, the cafeteria is located on the first floor and offers an excellent selection of food and snacks. Fridges are available to store home lunches on the units.

### **Mission Statement**

“Our Mission is to provide the community with excellent healthcare.”

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### **Vision Statement**

- Taking good care of our patients
- Treating our employees fairly
- Working with our physicians as partners
- Working hard and using resources wisely
- Constantly striving to improve the quality and safety of care delivered to our patients
- Doing what is right

### **Values**

<b>Accountability</b>	– We encourage creative thinking to promote quality and excellence in healthcare delivery.
<b>Compassion</b>	– We care about people, treating our patients and each other with dignity and respect.
<b>Customer Service</b>	– We strive to exceed the expectations of those we serve.
<b>Integrity</b>	– We act with honesty and are accountable, one to another.
<b>Respect</b>	– We hold others in high regard and appreciate and value the differences between us.
<b>Safety</b>	– We strive to provide a culture focused on reducing the risk of harm.

**Teamwork** – We work together to achieve common goals.

## **ELECTRICAL SAFETY**

**\*Grounding is the single most important principle in electrical safety.**

Every piece of electrical equipment has the potential to leak current. Any conductor touching a piece of equipment that is leaking current could pick up that current. A ground wire and prong provides an escape route for leaking current. For this reason, the following rules apply to ensure a safe atmosphere for patients, visitors and staff.

1. Never use a piece of equipment that is not equipped with a ground plug.
2. Never use electrical equipment when the ground prong is loose, broken or missing.
3. Frayed or damaged electrical cords should not be used. Report these to the Engineering Department immediately.
4. When a “tingle” or shock is felt, unplug the equipment and report to your supervisor or the Engineering Department at once.
5. When disconnecting electrical cords from a wall outlet, grasp the plug and tug gently. NEVER grab the power cord and “yank” on it.
6. Cables and cords must be kept protected from oil or chemicals, liquids and sharp objects to prevent damage.
7. Arrange equipment cords and cables away from foot traffic and keep them off stairs and out of aisles.
8. Unless it is specifically part of the job assignment, never open panel boxes, reset circuit breakers, or change fuses. Report all electrical problems to the supervisor or the Engineering Department.
9. Avoid a “Trip” hazard by careful placement of the electrical cords from beds, etc. To prevent electrical shocks and fires, check for damaged plugs, and/or pinched wires on the beds and other equipment. Report all problems to your supervisor or the Engineering Department.
10. Never use water or a water fire extinguisher to fight an electrical fire.

## **RADIATION SAFETY**

General Radiation Safety guidelines include:

- Employees working directly with radiation emitting machines or radioactive materials will follow special safety procedures, which do not apply, to general Medical Center employees. Employees in Radiology and Nuclear Medicine must be aware of and follow these procedures correctly.
- Any questions about contamination or radioactive spills should be brought immediately to the attention of the Nuclear Medicine Department. DO NOT proceed with clean-up or decontamination without notifying Nuclear Medicine first.
- Patients who have had x-rays or CT Scans are not radioactive.

## **HAZARDOUS MATERIALS MANAGEMENT**

Steward Healthcare is working hard to protect you against the dangers of hazardous materials. In addition the Occupational Safety and Health Administration (OSHA) has issued the “Hazard Communication Standard.” This rule states you have a “Right to Know” what hazards you may face on the job and how to protect yourself.

Some examples of hazardous materials are:

- Infectious substances
- Flammable liquids and gases
- Radioactive materials
- Toxic Chemicals

Hazard communication starts with the chemical manufacturer. Each company that makes or imports chemical must evaluate the possible physical and health hazards of each substance they make. This information is found in two places: 1. The container labels, and 2. Material Safety Data Sheet information which can be accessed by calling the phone number listed on each phone through out the hospital. There are Three “Master copies” of the MSDS that can be found in the Emergency Department, Materials Management and in Plant Operations office.

The manufacturer labels each container of hazardous chemical. The label may use words or symbols to tell you:

- The name of the chemical.
- The name, address and emergency phone number of the company that made or imported the chemical.
- The physical hazards.
- Storing or handling instructions.

When a Significant spill occurs, the following should take place:

- Consult the MSDS by consulting the MSDS Manual in your department.
- Call the Medical Center operator to notify of the spill.
- Isolate the area.
- If an employee is exposed to the chemical they should be taken to the Emergency Department, complete an Employee Medical Report of Injury, and notify the Employee Health Nurse.
- Complete spill assessment report and forward to Risk and Safety Manager following clean up.

## HOSPITAL CODES

### **Cardiac/Respiratory arrest**

**CODE BLUE for Adult / CODE BLUE BROSELOW for Pediatrics**

- Determine Unresponsiveness,
- If unresponsive, **Dial 5555**, give location or room number,
- Begin CPR, if qualified.
- Avoid the use elevators. Unless you are assisting in the transport of the patient.
- Remove roommate or visitors.
- Provide support for family.

### **DISASTER**

**CODE DISASTER**

Review department plan for specific responsibilities of the staff in your department.

### General Information

- The Command Center will be announced for a particular location.
- Elevators are for the use of disaster personnel, linen transport, etc.

## FIRE

## CODE RED

A fire in any area of the hospital(s) is an emergency, which must be resolved quickly. Employees and students are encouraged to know and implement the four basic steps in the event of a fire using **R. A. C. E.**

### **R** ESCUE

Rescue the patient(s) from danger. Disconnect oxygen from the wall outlet only for the patients in immediate danger from the fire. Close the door behind you.

### **A** LARM

Activate the nearest alarm box and call the operator by **dialing 5555** on a red phone. Give the exact location of the fire by floor and room number and the extent of the fire. Remain on the line until the operator has verified the information given. The operator will announce “**CODE RED**” over the **public** address system to alert other Medical Center personnel that a fire is in progress.

### **C** ONFINE

Close all doors and windows in the area of the fire. This will limit oxygen supply to the room.

### **E** XTINGUISH

Extinguish only very small easily controlled fires, or fires that prohibit the removal of patients.

#### General Response of Students:

- Do not use any elevator during a Code Red.
- Reassure patients and visitors that everything is under control.

#### Protect or Contain in Place:

- Close all windows and doors, including fire doors in hallway.

#### Prepare to Evacuate

- Clear hallways of all equipment.
- Flag Kardex for helpless patient needs:
  - Stretcher/wheelchair patients.
  - Patients requiring O<sub>2</sub>.
- Obtain portable O<sub>2</sub> tanks, wheelchairs, and stretchers when necessary.
- Check patient rooms and mark vacant rooms with tape.

#### Collection Point Evacuation:

- Evacuate only if ordered by Fire Department/Security.
- Patient will be moved horizontally away from announced Code Red area.
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## SECURITY

## CODE SECURITY

### **Threatening situation / Combative or out of control patient or visitor**

Security needed immediately, all manpower/staff available should go to call.

- **Call 5555**
- Request **CODE SECURITY**

### **BOMB THREAT**

**CODE YELLOW**

The person receiving the bomb threat should:

- Keep the person talking.
- Ask:
  - Where is it?
  - What time is it set to go off?
  - What does it look like?
  - What is the explosive?
  - Where was it placed?
  - Why was it placed?
- Attract attention of another employee to **dial 5555 (PBX)**.
- PBX will alert security.
- Follow instructions of selected staff or Security Department.

### **INFANT or PEDIATRIC ABDUCTION**

**CODE PINK/PINK CHILD**

Should an infant be abducted the following procedures shall be followed:

#### **NURSING**

- Nursing personnel shall search the unit and obtain a head count of all infants.
- The mother of the missing infant shall be questioned regarding other possible locations of the child.
- Facility Security and other designated personnel shall be notified immediately so that all building and parking exits can be sealed.
- If the incident occurs close to shift change, all personnel designated to leave will remain until released by law enforcement personnel.
- Facility personnel shall protect the crime scene until law enforcement forensic experts arrive for evidence.

#### **FACILITY SECURITY AND ADMINISTRATION**

- A hospital wide search of the facility and grounds will be instituted immediately. All exits shall be sealed. Time is of essence, as the abductor may not have left the premises.
- Law enforcement shall be notified immediately. Request that a standard crime code be used over the radio without describing the incident. This will help to prevent unwanted media publicity.
- Suspicious individuals should be approached and asked to inspect their belongings. If the person refuses, follow and gather descriptive information.
- Administration will brief the public relations spokesperson.
- Information released to the media shall be approved by the law enforcement.
- All other area facilities and clinics shall be notified and a complete description of the infant and abductor, if known shall be provided.
- Remember to wear your identification badge or name badge at all times.

### **SEVERE WEATHER**

### **CODE WEATHER**

The Safety Officer or designee will call the code when information is received that severe weather is approaching.

The staff will do the following if a Code Weather is announced:

Tornado or high wind warning:

- Draw blinds
- Pull all drapes and curtains
- Provide patients with pillows
- Move to safe areas as outlined in Severe Weather Plan.
- Assist patients to get to safe locations.
- Move all visitors and other staff to interior hallways.

### **EARTHQUAKE**

### **CODE EARTHQUAKE**

Protect yourself. Take cover; stay away from windows, mirrors, shelves, etc. Prepare to evacuate.

### **BEGIN EVACUATION**

### **CODE EVACUATE**

In the event that evacuation of the Medical Center should take occur, the following procedures should take place.

- Close all doors, Close blinds.
- Clear hallways of all equipment.
- Obtain portable O<sub>2</sub> tanks, as necessary.
- Check patient rooms, closets, etc.; marking vacated rooms with tape.
- Refer to Kardex to indicate helpless patients, stretcher and wheelchair patients.
- Report to rendezvous site.

### **SIGNS OR SYMPTOMS of STROKE**

### **CODE PURPLE**

- If you suspect stroke with a patient, look for the following with a patient
- (FAST)
  - F -Facial droop – Ask patient to smile and look for unevenness or drooping on one side of face.
  - A - Arm drift – Ask patient to lift arms at shoulder level, if one arm is hanging lower or drifts downward.
  - S – Speech – Watch for confused garbled speech or slurring of words.
  - T- Time last well known
- **Dial 2222**, request a **CODE PURPLE**

## **ACTIVE SHOOTER/TERRORIST/HOSTAGE SITUATION**

## **ACTIVE SHOOTER**

How to respond when an active shooter is in your area:

- 1-Evacuate: Have an escape route and plan in mind, Leave your belongings behind, Keep your hands visible
- 2- Hide Out: Hide in an area out of the shooter's view, Block entry to your hiding place and lock the door, Silence your cell phone and beeper
- 3-Take Action: As a last resort and only when in imminent danger, Attempt to incapacitate the shooter, Act with physical aggression and throw items at the active shooter

How to respond when law enforcement arrives:

- Remain calm and follow instructions, Put down anything in your hands (i.e. cell phone, bag coat), Raise your hands and spread your fingers, Keep hands visible at all times, Avoid quick movements toward officers, Avoid pointing screaming and yelling, Do not stop and ask the officers for help

Information you should provide to law enforcement or 911 operator:

- Location of shooter, Number of shooters, Physical description of shooters, Number and type of weapons used, Number of potential victims at the location.

## **HOSTAGE SITUATION**

If you identify a hostage situation you should.

- Dial **5555** Request a Active shooter, stay on the line, PBX will call 911 for you.
- Secure the immediate area and remove all personnel to an area that is safe and secure.
- Write down everything, keep a log.
- Do not talk with the media.
- Follow instructions from the police, once they arrive.

## **STEMI**

## **CODE STEMI**

STEMI stands for ST segment elevated MI. This code is called for anyone coming into the ED (or an inpatient) having a myocardial infarction. Because time is of the essence with these patients, when a code STEMI is called, a designated team is notified. Code STEMI team is made up of:

- Cath Lab personnel
- ER Nurse
- ER TLA
- Phlebotomist
- Respiratory Therapist
- Rad Tech
- Hospital Operator
- House supervisor

If you are hired for any of these positions, find out your department specific role in a Code STEMI during your unit orientation.

## **RAPID RESPONSE**

## **RAPID RESPONSE**

The rapid response team is a multidisciplinary team that responds to urgent situations in the hospital. The team consists of and ICU RN, a Respiratory Therapist, the Primary Nurse and a Hospitalist. The rapid response team is called for any clinically unstable patient and may be called anytime by **dialing 5555**.



**TRAUMA ONE/ TRAUMA TWO**

**CODE TRAUMA ONE TRAUMA TWO**

Activate Team for a Level 1 Trauma or a Level 2

- A Physician determines the need to call a Trauma Alert
- When instructed by the Physician, contact the Hospital Operator by **dialing 5555**
- If instructed by the ED call in the OR, page/ all OR crew.
- Other staff who respond as available Anesthesia, Pharmacy, ICU RN, OR RN, Radiology

**NEED TO SHELTER IN PLACE**

**CODE SHELTER IN PLACE**

Take shelter where you are at

**ACTIVATE MALIGNANT HYPERTHERMIA PROTOCOL**

**CODE HYPERTHERMIA**

**MISSING ADULT**

**MISSING ADULT**

**INFECTION CONTROL**

Preventing the spread of disease to patients, employees, and visitors is the responsibility of everyone in the medical center. Infections can lengthen a patient’s stay, cause inconvenience, pain, and increase health care costs. As we provide care to patients, whether in the ER, other outpatient areas, or in inpatient areas, we must all think about the possibility of the patient having an illness that may be spread to other patients or to staff. Use of appropriate personal protective equipment is essential when assessing, caring for or transporting patients expected or diagnosed with illnesses that are transmissible to others. Departments receiving such patients should be made aware of the possible diagnosis so they may also use the appropriate personal protective equipment.

It is important that Standard Precautions and Transmission Based Precautions be followed with all patients – the diagnosed and undiagnosed. All patients should be considered potentially infectious. **Standard Precautions** are work practices that are used when an employee may come in contact with a patient’s blood, other body fluids, non-intact skin or mucous membranes. **Hand washing is the single most important thing that can be done to prevent transmission of diseases to others.** Gloves must be worn any time exposure to body fluids is likely. Masks, face and eye protection must be worn any time splashes or sprays of blood or body fluids would be likely. Gowns and other personal protective equipment are to be worn as needed to protect the employees from exposure to body fluids. **Transmission Based Precautions** give more detailed guidelines for the care of patients with suspected or diagnosed illnesses. There are three categories:

1. Airborne (TB, Measles, Chicken pox)
2. Droplet (Pertussis, Meningitis, Rubella)
3. Contact (Scabies, draining wounds, Rotavirus, MRSA)

Disease specific guidelines and Isolation Policies are included in the Infection Control Manual found in each department. Remember – the best defense is to protect you and others by strictly following Standard Precautions and Transmission Based Precautions. The use of personal protective equipment is **mandatory**.

### **Infectious Waste**

Items such as dressings with blood and body fluids must have enough blood to be smearable or able to be released from the dressing to be considered Infectious Waste.

Infectious waste is defined as:

- Liquid/Semi-liquid blood
- Contaminated articles – capable of releasing blood
- Sharps
- Pathological waste
- Microbiological waste

Infectious waste is disposed of in red bags, sharps containers, or containers with the Biohazard symbol. All linen is considered contaminated. Soiled linen should be handled as little as possible and placed in a leak proof bag. It does NOT need to be disposed of as infectious waste even if it has blood on it.

### **Spill Clean Up**

Clean up blood and body fluid spills immediately. Wear gloves and other personal protective equipment as needed to protect you as you are doing the clean up. Spill kits, containing absorbable powder, are available through Housekeeping. If the amount is small, you may soak up the fluid with paper towels and discard in appropriate container. Flood area with disinfectant, letting sit ten minutes to kill all microorganisms then wipe up. Remove gloves and wash hands thoroughly.

**Hand Washing** is considered the single most important procedure for preventing the spread of disease.

**When:** Before and after direct patient contact, after glove removal, after personal toileting, blowing nose, coughing or sneezing into hands, before and after eating.

**How:**

- Wet hands under running water.
- Keep hands lower than elbows and apply soap.
- Use friction to clean between fingers, palms, backs of hands, wrists, and around nailbed for 15 seconds.
- Rinse under running water. Do not touch inside of sink with clean hands.
- Use dry paper towel to dry hands.
- Use second dry paper towel to turn off water faucet.
- Jewelry, chipped nail polish, and artificial nails are all difficult to clean in cracks and crevices and should not be worn in work place.

**Germ Barriers:**

- If it is wet, warm and not yours, **wear gloves to touch it.**
- If it is aerosolized and in the air, **wear eye protection and a mask.**
- If it drips or splashes, wear a **cover gown and consider a face shield.**

### **Hepatitis B**

This is an inflammation of the liver caused by the Hepatitis B virus. Symptoms may include loss of appetite, nausea, vomiting, dark colored urine, jaundice or liver damage. The symptoms may be so mild, they are hardly noticeable or they may be serious enough to cause death. Hepatitis B is spread to healthcare workers by exposure to an infected person's blood or body fluids through injuries from sharps or from mucous membrane and non-intact skin exposure from spills or splashes.

Vaccination with Hepatitis B vaccine provides excellent protection against this virus. The vaccine consists of a series of 3 shots given over a period of 6 months. The vaccine is very effective and quite safe. Other protective measures include following Standard Precautions guidelines and the proper use of personal protective equipment.

### **Hepatitis C**

Like Hepatitis B Virus, Hepatitis C Virus is found in blood and body fluids and it also infects the liver. Healthcare workers can become exposed to this virus in the same way as Hepatitis B. There is no vaccine to protect you. The healthcare worker must follow Standard Precautions and use of personal protective equipment in order to be protected in the health care setting.

### **HUMAN IMMUNODEFICIENCY VIRUS**

- HIV attacks the body's immune system causing the AIDS disease. There is presently no vaccine to prevent the infection.
- HIV can be transmitted through semen, vaginal fluid and blood. In the healthcare setting it could be transmitted through a needle stick or when blood gets into existing cuts, abrasions, or mucous membranes. Casual contact is not a risk factor.
- Many people who carry the virus do not have symptoms for years.
- Most will eventually develop AIDS and there is currently no cure.
- Symptoms of AIDS include flu-like symptoms, swollen lymph glands, night sweats, fever, cough, diarrhea, and weight loss. In advanced stages, pneumocystis carinii and Kaposi's sarcoma may appear.

### **TUBERCULOSIS**

Tuberculosis is still a health problem. TB transmission can be prevented by rapid identification and treatment of patients with active pulmonary disease. TB is spread through the air when the infected person coughs, sneezes, sings or yells. You CAN get it by breathing those aerosolized TB germs into your lungs. Because of this, TB patients are placed in airborne isolation in a negative pressure room. You CANNOT get TB by touching bed linens, doorknobs, etc.

### **Diagnosis and Treatment of TB:**

A positive skin test requires taking a health history for possible signs and symptoms of active disease. In most cases, when a person becomes infected the body's immune system surrounds the germ and prevents active disease from developing. A chest x-ray is done as the next step in diagnosing TB in the lungs. A person with a positive skin test can have either Latent TB (non infectious) or Active disease.

1. **Latent Disease:** a person has a positive PPD, a normal chest x-ray, and has no signs or symptoms of active disease. An assessment is completed and a referral may be made to the health department for preventive medication. A person with Latent TB infection is considered non-communicable and can continue to work.
2. **Active Pulmonary TB disease:** Person has a positive PPD, an abnormal chest x-ray and symptoms. Sputum samples x 3 are submitted and are usually positive for TB. If active disease is confirmed, the local health department is notified for treatment and follow-up. The employee

can not work or have contact with the public until they are taking appropriate medications and sputum specimens are negative.

**Symptoms of active disease:**

- Persistent and productive cough
- Night sweats
- Weight loss
- Fever
- Loss of appetite
- Coughing up blood

**Treatment:**

Treatment usually consists of taking at least 4 medications daily for many months. Follow-up sputum sampling and chest x-rays will help determine the effectiveness of the treatment. When the employee is considered to be non-communicable the doctor may then release them to return to work. Medications must continue until the course of treatment has been completed.

## **IMMUNIZATIONS**

### **PPD**

All personnel are required to have an assessment for TB.

### **Hepatitis B**

All personnel are required to have the Hepatitis B vaccine.

### **Measles and Rubella**

Titers showing immunity

### **Varicella (Chicken Pox)**

A history of having had the disease meets this requirement.

### **Td**

All are encouraged to keep current with their Td, which is recommended every 10 years. The Medical Center does not require this nor provide the vaccine.

### **Flu**

Flu vaccine is required of all

## **LATEX ALLERGY**

Steward Healthcare is working toward becoming a Latex Free Zone. We do not allow Latex balloons and provide Non-Latex gloves for our staff. Those at risk for natural rubber latex allergy include:

- Patients with neural tube defects.
- Patients requiring chronic catheterization.

- Anyone with a history of banana or avocado allergy
- Patients who have had multiple surgeries
- Patients/Staff with occupational exposure to latex.
- Anyone with a history of allergic reaction during a dental exam or after touching balloons, rubber gloves or any latex product.
- Healthcare personnel and others who wear gloves frequently
- Newborns of mothers with latex sensitivity

The medical center has a latex free cart which has the basic supplies for patient care. It is the law that any supply which contains latex must be marked; check packaging for this information. Please consult the Policy and Procedure for Latex Allergy/ Patient Care which is located in I-REPP.

If you have a known Latex allergy or have any questions, please contact the Employee Health Nurse x4266.

### **OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION (OSHA)**

The Bloodborne Pathogen Law became effective December 1991. As part of the law an Exposure Control Plan must be made available for all students. A complete copy of the plan is available in the Employee Health Office and in the Infection Control Policy

- This law applies to all occupational exposures to blood or other potentially infectious body fluids or materials including: semen, vaginal secretions, CSF, synovial fluid, pleural fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures or any body fluid visibly contaminated with blood.
- Personal protective equipment (gloves, goggles, face shields, gowns, aprons, laboratory coats) will be utilized during any procedures that may result in any potential exposure to blood and body fluids that may contain blood, as indicated in the current Standard Precautions policy.
- Jordan Valley Medical Center will make available in the work place the necessary personal protective equipment for all students/employees.
- Hepatitis B vaccine is required for all employees/students who have any risk for Hepatitis B. Employees will provide documentation of having received the vaccine. If employee is in job category I or II and has not received the vaccine, it will be offered. If employee refuses vaccine, he/she must read and sign the refusal statement. If they decide later to get the vaccine, it will be offered.
- Compliance to Standard Precautions and Transmission Based Precautions is mandatory.
- Contaminated sharps and needles will be discarded in sharps containers provided in all patient care areas. Needles should not be recapped and never bent by hand. A one-handed recapping or recapping device can be used. Whenever safety needles are provided, they will be used if available in needed size.
- Eating, drinking, smoking, applying cosmetics and handling contact lens are prohibited where there is a reasonable risk of exposure to blood or body fluids. This includes any area in which specimens of body fluids are handled.
- If an employee/student experiences an exposure to blood or body fluids, it will be reported immediately to the Department Director or House Supervisor and Employee Health Nurse. If neither is available, go directly to the emergency room. See policies on Exposure Control Plan and Post Exposure Prophylaxis.

### **BLOODBORNE PATHOGEN INJURIES**

All Bloodborne Pathogen Injuries (including needle sticks and splashing of body fluids to the mucous membranes or non-intact skin) will be reported immediately to the Employee Health Nurse at extension 4266, and to the unit manager or supervisor. This will determine whether the employee needs to be seen in the ER. If the Health Nurse is not available, the employee will go the ER for assessment. An Occurrence Report will be completed and submitted to the Employee Health Nurse within 24 hours.

- Whenever possible, the source of the infectious body fluid will be determined. It is important that an assessment of the source patient be done immediately so the employee will know the risk of HIV exposure and determination can be made as to whether HIV prophylaxis should be offered to the employee. This assessment can be done by the patient's physician, the Employee Health Nurse or by a staff nurse to determine whether there are risk factors for having HIV, Hepatitis B or C. Informed, signed consent must be obtained from the source prior to any testing for HIV. Lab results on the source will be made available to the exposed employee.
- If the exposed individual consents, he/she will have baseline HIV test and will be re-tested according to current policy. The number of follow-up tests is dependent on the test results of the source. The person will also be tested for Hepatitis C antibody. If he/she has had the Hepatitis B vaccination series, a Hepatitis B antibody will be drawn if there is not a copy of a recent positive titer. If he/she has not had the series, Hepatitis B vaccine will be offered and encouraged.
- A medical assessment and counseling post exposure will be provided to the individual free of charge.
- Records on exposures are kept in the Employee Health office and must be available for **30 years**.

If you have any questions about this, you may call:

Infection Control-Employee Health

801-562-4266

## **BACK SAFETY**

### Back Care Basics

Most back problems are not the result of a single injury. Even though pain is often felt suddenly, such as with a twist or a lift, the problem is almost always due to a combination of several factors.

- Poor posture
- Faulty body mechanics
- Stressful living and working habits
- Loss of flexibility
- General decline of physical fitness

Take care of your back. To reduce stress on the back:

- Never reach above your shoulders to lift something.
- When moving objects, do not twist the back. Turn the whole body in the direction you are moving the object.
- When reaching down to pick up an object, bend your knees and not your back.
- Plan your movements ahead of time.
- Ask for assistance when appropriate.
- When sitting, keep your feet flat on the floor.
- Shift sitting position several times during the day.
- Use a lumbar support such as a small pillow, in the small of the back.
- Place one foot on a low stool when standing for long periods of time.
- Avoid lying on your stomach.
- It is best to lie on your side with knees bent.
- Lie on your back with a pillow under your knees.

## **ERGONOMICS**

Ergonomics is the study of work requirements in relation to the physical and psychological capabilities and limitations of people. In other words, ergonomics seeks to fit the job to the person rather than the person to the job.

Certain wrist and hand movements may increase your chances of developing repetitive motion problems. By making a few small changes, you can break the movement patterns that could otherwise set you up for injury. One way to avoid problems is to work with well-designed tools and know how to hold and use them. Also, learn how to modify the way you use your wrist and hand to avoid harming your muscles, nerves or tendons.

Working with tools:

- Use tools that are the right size and length for your hand so you don't have to "adjust" by using awkward positions to hold them.
- Use tools that are the right shape for the job you're doing, so you won't have to use too much force on the wrong part of your hand.
- Use power tools with the least amount of vibration.

Know the right position:

- To work smart, stand or sit so your arms and wrists remain in a natural (neutral) position.
- Keep your wrists straight. Avoid bent, extended twisted positions for long periods of time. This will keep extra pressure off the wrist and hand. Be sure your workstation fits you.
- Many jobs require stressful positions and activities, but if they are interrupted frequently, injury can be prevented. Do stretching exercises before beginning your day's work and repeat them periodically throughout the day.
- Change the job tasks throughout the day. This will relieve the stress on muscles and nerves.

If your work station does not fit you, be sure to talk to your manager or to the Employee Health Nurse to see what adjustments can be made. Prevention of injuries is our goal.

## **EDUCATION**

Your assistance is greatly appreciated in identifying any educational needs. Feel free to discuss these with the Department Director or the Education Director

## **SPECIFIC CARE**

All agency providing patient care and services need to demonstrate on an on-going basis, knowledge and competence in providing care to all age groups served by the entity. This is a DNV/Joint Commission requirement as well as a quality of care issue. The information below will assist in understanding the different age groups in order to more fully meet the needs of our patients.

## **INFANT-BIRTH TO 1 YEAR**

### **Infants like:**

- Touch
- Talking
- Musical Toys
- Peekaboo/Patty Cake (6 months- 1 year)
- Being read to (6 months- 1 year)
- Music (6 months- 1 year)

### **Diet:**

- Breastmilk or formula 6-8 times/day or on demand
- Begin solid foods at 4-6 months
- Teething begins by 6 months
- Doubles birthweight by 6 months
- At risk for dehydration

### **Pain:**

- Remember painful experiences after 6 months of age
- Need to be medicated for pain when appropriate
- Have faster metabolism so pain medications work more quickly

### **Health Maintenance:**

- Teach parents the importance of immunizations
- Encourage parents to seek well child check-ups from their Health Care Provider
- Childproof Medical Center room
- Instruct parents to childproof home
- Instruct parents on the importance of knowing CPR, the poison control phone number, 911
- Place infant on back to sleep to prevent SIDS
- Car seats, place child-facing rear of car until they reach 20 pounds.
- Car seat placed in back seat
- Observe for signs/ symptoms of child abuse and report to Child Protective services when appropriate

**PRE**

### **Separation Anxiety:**

- Encourage parents to stay with infant
- 

- Bring infant's favorite toy/blanket to Medical Center.

## **TODDLER AGE 1 TO 3 YEARS**

### **Toddlers like:**

- Push/pull toys
- Dolls
- Trucks
- Being read to
- Music
- Videos/TV
- To play by themselves
- Don't like to share

### **Pain:**

- Remember painful experiences
- Need to be medicated for pain when appropriate

### **Health Maintenance:**

- Teach parents the importance of immunizations
- Encourage parents to seek well child check-ups from their Health Care Provider
- Childproof Medical Center room
- Instruct parents to childproof home
- Instruct parents on the importance of knowing CPR, the poison control phone number, 911
- Car seats
- Car seat placed in back seat

### **Diet:**

- Drink from cup
- Likes finger foods
- Are finicky eaters
- Like small frequent meals/snacks
- Like to feed self
- Are at risk for dehydration

## **PRESCHOOL AGE CHILDREN 3 TO 6 YEARS**

### **Pre-School Age Child likes:**

- Group play



## Agency Mini-Orientation

- Music
- Videos/TV
- To dress self
- Vivid imagination

### **Health Maintenance:**

- Teach parents the importance of immunizations
- Encourage parents to seek well child check-ups from their Health Care Provider
- Instruct parents on the importance of knowing CPR, the poison control phone number, 911
- Seat belts while in car
- Bicycle helmets

### **Diet:**

- Likes finger foods
- Are finicky eaters
- Like small frequent meals/snacks
- Likes to choose own food
- Are at risk for dehydration

## **SCHOOL AGE CHILD AGES 6 TO 12 YEARS**

### **School Age Child likes:**

- Board/Video games
- Books
- Music
- Art
- Videos/TV
- Friends
- Maintain home routine while in Medical Center
- Encourage independence

### **Health Maintenance:**

- Wear seat belts
- Wear helmets safely
- Instruct about illicit drugs
- Abstaining from smoking
- Protection from firearms

### **Diet:**

- Allow school age to choose food preference.

## **ADOLESCENT AGES 12 TO 18 YEARS**

### **An adolescent likes:**

- Increased sleeping/eating during growth spurts
- Need to fit in with peer groups.
- Developing own identity
- Choosing own values
- Very independent
- Self-conscious about physical appearance
- Privacy

### **Health Maintenance:**

- Auto safety
- Sport safety, helmet safety
- Alcohol, smoking and drug safety
- Depression/Suicide
- Eating disorders
- Self esteem
- Sexually Transmitted Diseases

### **Diet:**

- Reinforce good food choices

## **ADULT AGE 18 TO 65 YEARS**

### **The Adult has:**

- Multiple roles, look for signs of stress
- Teach stress management

### **Health Maintenance:**

- Women: Cervical Cancer screening; Breast exams and Mammography.
- Men: Monthly self testicular exams and PSA
- Both: Cholesterol checks, Colorectal cancer screening; Sexually transmitted disease, Alcohol in moderation, abstaining from smoking and illicit drug use

### **Diet:**

- Reinforce high fiber, low cholesterol diet

## **THE ELDERLY AGES 65 YEARS AND OLDER**

### **The Elderly have:**

- Poor skin turgor
- Sensitivity to heat and cold
- Slower cognition

## Agency Mini-Orientation

- Short term memory loss
- Decrease hearing and visually acuity
- Assist with chronic disease management, with special attention to medication

### **The Elderly may have difficulty adjusting to:**

- Changes in family roles; adjusting to retirement and income constraints
- Death of spouse or friends
- Their own chronic illness.

### **Health Maintenance:**

- Continue to seek guidance from their health care provider

### **Diet:**

- Balanced diet with attention to food taste and texture.
- At risk for dehydration

## **CULTURAL AWARENESS AND APPRECIATION**

Every person is a member of many cultures. Culture affects every aspect of our lives, including health beliefs. Those of us who work in health care need to be able to work and respect people of all cultures. To do this we must understand how our own cultures affect our actions, values, and attitudes and then learn as much as we can about the cultures we work with.

To become culturally skilled:

- Learn as much about your own cultural heritage and how you are affected.
- Be open, respect, and become comfortable with differences between yourself and others.
- Examine you beliefs and feelings about other cultures and determine how they affect your relations with others.
- Do not make judgments about others' values, beliefs, and customs.
- Learn about other people.
- Remember that different does not mean inferior.
- Be helpful to people learning the English language.
- Find common grounds between yourself and others.
- Don't tell ethnic/lifestyle jokes.

## **IDENTIFICATION, DOCUMENTATION OF SUSPECTED ABUSE OR NEGLECT OF CHILDREN, ADULTS, DISABLED ADULTS OR ELDERS AND SPOUSES/PARTNERS**

- Any Medical Center employee that witnesses suspected abuse or neglect shall be responsible for reporting observations to immediate supervisor or charge nurse, who is responsible to report to the proper authorities.
- When there is any question as to the possibility that a patient may be abused or neglected, the staff will notify the appropriate police or investigating agency within 24 hours.
- If it is identified that the patient is in immediate danger the West Jordan Police Department is notified immediately.
- After the report has been made, the Department of Family Services, and the local police are responsible for investigating the case and protecting the affected patient.
- Any employee involved in reporting shall be immune from civic or criminal liability.

Situations where abuse should be considered:

- The housekeeper cleaning a room observes a parent yelling at a child and hitting the child at the same time. The nurse should be notified immediately.
- The patient sent by their physician for a lab test is noted to have several bruises on part of their body or a cigarette burn on their arm. The Phlebotomist showing concern asks the patient how they hurt themselves. The patient responds by appearing frightened and acts in a manner which does not make sense or matches the situation.
- While positioning the patient for a Chest X-Ray, the technician notices the patient is in pain and has bruises on their body, or the technician notices cigarette burns or unusual welts on their body.
- The patient may feel comfortable enough to tell you that they may have a problem. If this occurs, be supportive and let the patient know that you want to help. Obtain help from your supervisor, the patient's physician, and/or the Department of Family Services.

## **ETHICS**

You are responsible for reporting ethical problems and have the right to get help with ethical problems at work. The medical center has an Ethics Committee as a resource for employees, physicians, patients and families. The major functions of the Ethics Committee are:

- To provide resource for ethical dilemmas
- To assist with policy/procedures regarding ethical issues. These issues include DNR, Organ Donation, Advance Directives (Physical and Mental) and informed consent.
- To assist in the education of ethics of staff, physicians, patients and families.

To access the Ethics Committee notify the operator or administration.

## **SEXUAL HARASSMENT**

Sexual Harassment is:

- Unwelcome words or actions of a sexual nature
- Behavior directed at a person because of his/her gender when job, raises, or promotions depend on the employee's response.
- Behavior makes it more difficult to do a job
- A form of discrimination
- Is illegal

Examples of Sexual Harassment:

- Dirty jokes
- Leering
- Sexually oriented remarks/gestures
- Sexually oriented posters/cartoons
- Unwelcome and/or offensive touching
- Name calling
- Requests for sexual favors

If Sexual Harassment happens:

- Tell the person that you are offended and to stop
- Write down the date/time and description of what happened.
- If they do not stop report the person to your supervisor
- If your supervisor is the harasser, go directly to HR manager
- Do not remain silent or quit your job. The harasser will think they can get away with it and continue to harass you and possibly others.

## CUSTOMER SERVICE

Jordan Valley Medical Center, West Valley Campus, Mountain Point Medical Center and Clinics exist to serve the community, providing the best health care services possible to our customers. **Some of our customers are patients, families, visitors, co-workers, physicians, other Medical Center staff, outside vendors, insurance companies, and even the federal and state governments.**

We believe that a culture of quality service is the heart of our organization. We commit to treating every patient promptly and competently with courtesy, respect and compassion.

How employees act towards customers is the most powerful way to satisfy customers and to get them to return.

**To provide excellent customer service remember “STAR”**

- S – Service
  - Smile
  - Make customers feel special
  - Go the extra mile
  - Listen to the customer
  - Dress clean and neat
- T – Teamwork
  - Find someone else to help if you can't
  - Make a good first impression
  - Help lost people
- A – Accountability
  - Don't pass the buck
  - Take pride in your work
  - Strive for excellence
  - Wear name badge
- R - Responsiveness
  - Act quickly
  - Be courteous
  - Be helpful
  - Anticipate customers' needs

Our Customer Service Motto is "I will be aware to show that I care."

## ORGAN DONATION

The option of organ, eye, and tissue donation is everyone's right. This Medical Center strives to remain in compliance with local and federal regulations. In the event of a death it is our responsibility to make inquiry about organ, eye, or tissue donation. Only those individuals who have received formal training from Donor Network may approach families about tissue and organ donation.

## QUALITY IMPROVEMENT

Quality improvement is a continuous process that is everyone's responsibility. Quality improvement requires us to assess how well we are doing the job and serving our customers. Our customers are internal and external to the medical center.

When we assess our jobs and operations, we must look at data which tells us a lot of valuable information. Quality improvement is data driven and involves a cycle of actions we must take to make improvements. These actions, or *Quality Model*, involve the following steps:

- DEFINE
- MEASURE
- ANALYZE
- IMPROVE
- CONTROL

If you believe that there is a process to improve, please fill out the Performance Improvement requisition and forward to the Quality Department. Thank you.

## TOBACCO FREE CAMPUS/SMOKING POLICY

### **Philosophy:**

Steward Healthcare administration and staff members recognize the health hazards caused by tobacco products. As a healthcare campus, we are committed to the establishment and enforcement of a healthier, tobacco-free environment. The purpose of this operating policy and procedure is to establish a policy prohibiting tobacco use in or all Campuses and is applicable to anyone, including but not limited to employees, physicians, patient, vendors, contractors, visitors, and volunteers.

### **Tobacco Use Definition:**

Tobacco use is defined as the burning of any type of tobacco product, as well as the use of oral tobacco products.

## **OCCURENCE REPORT**

An “unusual occurrence” is an event, which does not routinely happen, in the normal course of Medical Center work. When an unusual occurrence takes place, a report is to be completed and submitted to the manager in a timely fashion. Only **objective** information should be included in the report. These forms are never to be copied or placed in the medical record.

### **Examples of unusual occurrences:**

- Patient falls
- Code Blue
- Unexpected transfer of patient to ICU or return to the OR
- Medication Errors Adverse Drug Events
- Adverse Drug Reaction
- IV infiltration
- Patient leaving against medical advice (AMA)

## **CONFIDENTIALITY**

Our entities are small, close knit, family oriented facilities. And as evidenced in many families, confidentiality may be compromised. Please be aware of what you may say in public areas. **DO NOT** repeat to anyone what you may hear regarding patients.

## **Health Insurance Portability and Accountability Act (HIPAA)**

As a covered entity, our hospital, along with other healthcare providers, healthcare clearing houses, and health plans must abide by the regulations set forth in the Health Insurance Portability and Accountability Act of 1996.

Specifically, the Privacy Standards took effect April 14, 2003 and allow patients greater liberties with their protected health information or “PHI” and require specific assurances from covered entities in how they use a patient’s PHI. What this means to us as a provider is that any individually identifiable health information in any format is protected.

Because we are concerned about the delivery of quality healthcare and because the government does not want to infringe upon timely delivery of services as well as payment for services rendered, covered entities do not need to obtain an additional consent from the patient for the purposes of treatment, payment and healthcare operations. However, because we are committed to providing confidentiality to the patients and families we serve, we are held to the standard that we must use reasonable efforts to limit the amount of “PHI” that we use, disclose or repeat to the minimum amount necessary to accomplish our task or purpose.

At the time of registration, every patient will receive Hospital’s Notice of Privacy Practice. This notice is required to be received by the patient one time and will remain in effect indefinitely, unless changes are made to the notice. Our hospital is also required to obtain a signature from the patient acknowledging receipt of the notice. If a patient is unable to sign, a family member or personal representative can sign for them. In the event that we are not able to obtain a signature based on the patient’s condition or no family member or personal representative present, the facility may document on the acknowledgment form that the patient was unable to

sign. This acknowledgement form must be present in the patient's medical record for us to be complaint with this piece of the regulation.

At the time a patient is admitted to our hospital, they can determine if they would like to be listed in the hospital directory. If they choose **not to be** listed, a greater than symbol ">" is indicated in front of their name on the hospital census, computer, or information board in the clinical areas. **This symbol notifies staff that we cannot give out any information regarding this patient to anyone who inquires, including family members or friends.** Additionally on the face sheet in the bottom left hand corner, the question "OPT OUT" is listed. **If the patient lists "YES" this is our indication that no information should be given out regarding the patient.**

It is important to know that everyone is responsible for HIPAA and ensuring confidentiality. Penalties ranging from fines to imprisonment can be assessed to all employees for violation of the regulation. Please make sure to contact the Privacy & Compliance Officer if you have any questions regarding HIPAA.

## **ISO\_9001**

**ISO 9001** is the international standard that specifies requirements for a quality management system (QMS). Organizations use the standard to demonstrate the ability to consistently provide products and services that meet customer and regulatory requirements. It is a worldwide federation of national standards and A Quality Management System. ISO has its foundation in Plan-Do-Check-Act cycle of continuous improvement