

Pre-Hospital Employment Orientation for Contract Employees, Students, Instructors and Volunteers



Welcome to the TEAM!

Southeast Health History

- 1957 – Southeast Alabama General Hospital opened its doors.
- 1980s – Reincorporated: The hospital was re-named Southeast Alabama Medical Center and became a not-for-profit organization (no shareholders).
- 2018 – Name changed to Southeast Health to better reflect what we do and who we serve.



Welcome to the TEAM!

- Southeast Health is governed by the Houston County Health Care Authority, which is a voluntary 13-member board made up of 12 members appointed by the Houston County Commissioner and the medical staff president.
- Southeast Health is a 420-bed regional referral center with approximately 2,800 team members.
- Southeast Health is accredited by **DNV** and we are a smoke free campus.



Mission & Vision

We exist to promote healing, prevent disease, educate medicine's brightest minds, and bring wellness and prosperity to the region.

5 Priorities and 6 Ground Rules

- Team members of Southeast Health use the **5 Priorities** and the **6 Ground Rules** to guide us to provide our guests with the best healthcare experience possible.
- All employees, students, and instructors should be familiar with the 5 Priorities & 6 Ground Rules and use them everyday.

➤ The 5 Priorities are:

1. **Employee Engagement**
2. **Patient Satisfaction**
3. **Quality**
4. **Physician Friendly**
5. **Financial Strength**

Southeast Health's Five Priorities

1. Employee Engagement

- a. Engagement not satisfaction
- b. Facility appearance (hallways, desks, nurse stations, walls)
- c. Eliminate the tail
- d. Communicate

2. Patient Satisfaction

- a. White boards, scripting, rounding, nurse leader rounding, hourly rounding, discharge phone calls, thank you cards, etc..
- b. Weekly accountability meetings
- c. Staff accountability
- d. 5/10 rule
 - If you walk within 10 feet, make eye contact & smile.
 - If you walk within 5 feet, speak/say hello.



Southeast Health's Five Priorities

3. Quality

- a. Performance improvement plans
- b. "Rome wasn't built in a day"
- c. Strategic initiatives will be met
- d. Accountability for performance measures
- e. Transparency



4. Physician Friendly

- a. Figure out how we can... not why we cannot
- b. Include in our performance improvement initiatives
- c. Our partners

Southeast Health's Five Priorities

5. Financial Strength

- a. Manage expenses appropriately
- b. Look for opportunities
- c. Finances are a result of the other 4 priorities
- d. Growth comes from strong financial performance



Southeast Health's Six Ground Rules

1. No Excuses.
2. We are a team; we sink or swim together.
3. Bring up your ideas.
All ideas will be considered for implementation.
4. Poor performance will be addressed.
5. "That's not my job" is not acceptable.
6. Manage up.



Policies and Procedures

- All employees (regular and contract), students and instructors are expected to follow the polices and procedures of Southeast Health.
- All Policies and Procedures can be found on our internal website which we call “insideSEH”

The screenshot shows the 'Inside' internal website for Southeast Health. The page layout includes a top navigation bar with social media icons and a search bar. Below this is a secondary navigation bar with links for Employee Resources, Request Assistance, Clinical Tools, Online Access, Help Desk, and Phone Directory. The main content area features a large banner for 'We win BIG AWARDS for doing the LITTLE THINGS' with a 'LEAPFROG HOSPITAL SAFETY GRADE' logo. Below this are four buttons: WORKDAY, SEH WEBSITE, PATIENT SATISFACTION, and SCORECARD. A 'Leapfrog Safety Video' section is also visible. On the right side, there is an 'ANNOUNCEMENTS' section with three items: 'EPIC - MEDICATION WARNING', 'Southeast Health is encouraging our nurses to participate in the opening ceremonies of the Alabama State Games XXXIX on Friday, June 10 at the National Peanut Festival Fairgrounds...', and 'UPDATED - Flashback 80s Photo Trivia'. At the bottom right, a red box highlights two 'COMPLIANCE 360 POLICY SEARCH by DEPARTMENT' and 'KEYWORD' search boxes, with a yellow arrow pointing to them.

Corporate Compliance Plan

- Healthcare has hundreds of laws and regulations that we must follow. Complying with Federal and State Fraud & Abuse laws are the primary area of focus for corporate compliance efforts.
- The compliance program establishes the standards that guide leaders and the workforce in developing and maintaining operational policies and procedures that help us to do the right thing all the time.
 - **Examples:**
 - Billing for a procedure not performed – billing for a service charted but not performed.
 - Double Billing – billing the patient twice for the same services.
 - Fraudulent Claim
 - Kickbacks
 - Physician Self-referral

Corporate Compliance Plan

- All workforce members have a **duty to report** any known or suspected non-compliance concern.
- The **Compliance Officer** investigates all reported concerns.
- Southeast Health ***prohibits retaliation*** against any individual who makes a good faith report.
- **How to report compliance issues:**
 - Compliance drop box at the employee entrance.
 - Mailing address: P.O. Box 5685, Dothan, AL 36302.
 - Call the hot line at 334-793-8029, anyone on the Compliance Committee or the Compliance Officer, Genie Thomas at ext. 3339.
 - You are **not** required to include your name.

Corporate Compliance Plan

Gifts, Tips, and Personal Gratuities from patients, visitors, vendors, and other healthcare providers **are prohibited by or restricted** under Federal Laws and Southeast Health Policies.

- **What should you do if patients/families insist on giving a gift for your excellent care?**
 - Decline the gift and explain that it is our goal to exceed their expectations.
 - Suggest that the patient or family contact the Southeast Health Foundation (or other charity) to make a gift or contribution in your honor.



Conflict of Interest

Conflict of Interest

- A **conflict of interest** is any relationship with a business or person that causes a workforce member to choose between what is best for Southeast Health and what is best for him/herself.
- In the event a potential conflict of interest has a direct implication on patient care, the Compliance Committee may be asked to assist in the resolution of the issue.
- **If you have a conflict of interest concerns may be reported to the department manager or directly to the Compliance Officer.**
 - ComplianceLine @ 888-893-9021
 - Compliance Reporting on InsideSEH under Online Access
 - Call Hospital Operator @ 334-793-8111 and ask for the Compliance Officer
 - In person, direct email, or direct phone call

HIPAA

Health Insurance Portability & Accountability Act (HIPAA)

- Patients choose how much of their ***Protected Health Information (PHI)*** can be released.
- HIPAA notices are received upon admission.
- Patient Rights under HIPAA include:
 - Right to receive a ***Notice*** of the privacy practices of Southeast Health the first time he/she present for services.
 - Right to request additional ***privacy protection and confidentiality***.
 - Right to request ***access*** to his/her PHI
 - Right to request an ***amendment*** to his/her PHI
 - Right to know to whom their PHI has been ***disclosed***.
- **Questions? Contact the Privacy Officer at ext. 8029**

Patient Rights

All patients at Southeast Health are extended *rights*.

- They include the right:
 - to be notified of his or her rights.
 - to exercise individual rights regarding care.
 - to be informed about services available and the charges for these services, charges not covered by the payor and charges not included in the basic room rate.
 - to be informed by a **physician** of his/her medical condition.
 - to be given the opportunity to take part in planning his/her medical treatment.
 - to give informed consent prior to the start of any procedure/treatment.
 - to formulate advanced directives/living wills/durable power of attorney. If a patient requests information, please contact **Case Management**.
 - to refuse treatment to the extent permitted by law.
 - to privacy and confidentiality. **Only the people who have “responsibility” for the patient may discuss their information. The only terms you should use to describe a patient are ‘fair’, ‘good’, ‘critical’ or ‘serious’. You may also say, “HIPAA prevents me from releasing patient information.**
 - to reasonable response to request for services.
 - to be transferred if needed/desired.

Patient Rights

Patient Rights *continued*

- to refuse to participate in experimental treatment/care.
- to a safe environment – free of all forms of abuse, neglect, harassment and exploitation.
- to discharge planning (continuity of care).
- to know the identity, professional status and credentials of healthcare personnel.
- to be informed of the facility's rules/regulations of patient and visitor conduct.
- to examine/receive an explanation of his/her bill.
- to be treated with consideration, respect and full recognition of dignity and individuality (including treatment and caring for personal needs).
- to designate a legal representative to act in his/her behalf.
- to be free from restraints unless clinically required.
- to request protective services if needed.
- ***NOT to be photographed or videoed without written permission.***
- to report of pain accepted and managed by healthcare professionals.
- to be informed (or support person, where appropriate) of his/her visitation rights – can include spouse, domestic partner, family member or friend.

Patient Rights

NEVER post information and/or pictures, etc. about ***any patient*** on social media (Facebook, Twitter, Instagram, Snapchat, etc.)

- ***It could be considered a breach of confidentiality.***
- ***You can be terminated or dismissed from clinicals for breach of confidentiality.***



EMTALA



What is EMTALA?

- ALL staff working in a hospital need to know about **EMTALA**.
- **EMTALA** stands for the **Emergency Medical Treatment and Active Labor Act**.
- Congress enacted this law in response to concerns about patient “dumping” in 1986. It is often referred to as the “**anti-dumping**” law.
- This law is enforced by CMS (Center for Medicare/Medicaid) and the OIG (Office of the Inspector General).
- EMTALA does not apply to inpatients.



EMTALA Requirements

- EMTALA **prohibits** any Emergency Department, Behavioral Medicine Unit, or Family Birthing Center from delaying care, refusing to treat, or transferring patients to another hospital because they are unable to pay for their care.
- **EMTALA applies to:**
 - the **entire hospital campus** and
 - it applies to patients outside the hospital if they are **within 250 yards** of the main building.

EMTALA Requirements

- Patients on our campus should be routed to our Emergency Department regardless of the hospital's diversion status.
- *Example:*
*You have a patient at a clinic that needs emergency medical care. The ED and hospital are on diversion. YOU **SHOULD STILL SEND THIS PATIENT TO OUR EMERGENCY DEPARTMENT.***

Key Provisions

- Hospitals **must perform a medical screening exam** on any person who shows up on hospital property seeking care
- Hospitals **must identify any emergency medical condition and treat** them (includes active labor) regardless of their ability to pay.
- Hospitals **must stabilize** the patient to the full extent of their capability.
- Hospitals **must provide an appropriate transfer** to another hospital if it cannot stabilize the patient (after securing acceptance from a receiving hospital).
- Hospitals **must accept appropriate transfers** from referring hospitals if the receiving hospital has the capability and capacity to treat the patient.

Key Words in EMTALA

- **“Emergency Medical Condition” EMC**
 - If the “reasonably prudent layperson” would think that the symptoms exhibited might be an emergency medical condition, then it must be considered one until it is ruled out.
- **“Medical Screening Examination” MSE**
 - Hospital must provide a medical screening exam to determine if a Emergency Medical Condition exists.
 - Medical Screening Exam must be provided by physicians, advance practice providers in the ED.
 - For Family Birth Center evaluations, screenings must be performed by physicians, advance practice providers, or qualified nurses.

Why should we worry about EMTALA?

We worry about EMTALA because we want to do the right thing, but there are SEVERE consequences for breaking this law:

- CMS can terminate the hospitals Medicare provider agreement.
- The Office of Inspector General (OIG) has the power to stop Medicare/Medicaid payments to any physicians found to be in violation of the EMTALA law.
- Hospitals and physicians may be required to pay fines or penalties up to \$100,000 per violation.
- Patients can bring civil lawsuits against the hospital and physicians for damages caused by breaking this law.

EMTALA & Payment for Services

- Hospitals cannot require patients to provide proof of ability to pay before they perform their medical screening.
- The hospital may seek authorization for payment and services **after** the medical screening examination and once the patient is **stabilized**.
- Hospitals cannot turn patients away or delay their care/treatment because they don't have insurance.
- Hospitals cannot delay medical exam or treatment to inquire about payment.

EMTALA Diversion & Transfers

- If a patient comes to the Emergency Department, or has a medical emergency while on campus, or thinks they have a medical emergency, **the patient should be sent to the Emergency Department, regardless of hospital diversion status.**
- Do not transfer a patient unless there is a transfer agreement for unstable patients with benefits and risks documented.
- Provide stabilizing treatment to minimize the risks of transfer.
- Appropriate transfer paperwork to include medical records must be completed and accompany the patient.

Who Does EMTALA Apply to?

- It **does cover** patients **in a car at the ED doors** trying to access the ED.
- It **covers** patients **anywhere on hospital property** seeking emergency care , for example they come in the wrong entrance to the hospital and are looking for the ED.
- **Covers** non-citizens of the US and minors.
- Does **not** cover people on the phone.

EMTALA & Patients Who Leave AMA

- If a person left AMA or left without being seen **at the suggestion of the hospital**, CMS says the hospital **will be found in violation of EMTALA!**

Examples:

- ❑ *If a patient presents to the ED requesting a pregnancy test and a staff member diverts the patient seeking care by suggesting they could get that test performed at health department, that could result in an EMTALA violation.*
- ❑ *If a patient asks, “How long is the wait ?” And a staff member replies, “I don’t know, I’d just go to my doctor’s office in the morning.” - that could result in a violation if the patient leaves.*

There must be NO coercion or suggestion!!

Preventing EMTALA Violations

How can we prevent EMTALA violations?

- If ever asked by a person on campus how long the wait in the emergency department is, please respond **“I’m not sure but let’s get you inside to get you seen as quickly as possible”** and walk with them (or assist them) to the emergency department.
- Follow your emergency response policies for off-campus outpatient departments.
- If a person experiences a medical emergency on campus and they are **within 250 yards** of the main building, ensure that they are directed to our Emergency Department for care.

Computer Security

- As a student or employee, you may be given a computer user name and password. This will give you access to information needed to perform your job.
 - **Sharing this information is strictly prohibited (you will be dismissed).**
 - If you think your information has been compromised, tell your immediate supervisor so it can be changed.
 - You should have a **strong** password – minimum of eight letters and/or numbers.
- ***It is NOT permissible to copy or remove, in any form, patient information from the hospital.***
 - This includes information from a patient’s paper chart, computerized chart or any communication tool with patient data listed.
 - Example: Patient SBAR, vital signs printout, census, admission history, etc.

Computer Security

- Southeast Health has a security program called **Fair Warning** that tracks who is looking at the patient's chart.
- **If you look at a patient's record and you are not involved in the care of that patient, the security program (Fair Warning) will see it and you will be disciplined, (up to and including termination or dismissal from clinicals).**
- If it is discovered that you breached the security of a patient's information, you will be dismissed from your job and/or clinical/internship.



Ethics Committee

Mission of the Ethics Committee:

To provide education, help and support for families and care providers facing a difficult situation and decisions. It includes Administration, healthcare professionals (physicians, nurses, a case manager and a social worker), a community leader who assists in pastoral care, others with special training or experience, an ethicist, an attorney and a person acting as a patient advocate.

An example of when the Ethics Committee could be utilized:

Ms. Smith is a patient who has suffered a severe stroke and is now in a coma. She is being kept alive on a respirator. She has no real chance of coming out of her coma. Unfortunately, she has no advance directive. Her son and daughter cannot agree on what to do and need help making a decision.

After obtaining the family's consent, the social worker asks the Ethics Committee to meet with the family and the caregivers. The meeting or "consultation" takes place in a private setting.

The goal is to help the family understand the situation better so they can make an informed and wise decision.

To contact the Ethics Committee, call Medical Staff Services at ext. 8705.

Patient Grievance Process

Complaint

- An issue that a patient or family member has that can be resolved at that time.
- Example: Patient complains meal is cold. We can warm it in the microwave.

Grievance

- A formal or informal, written or verbal complaint that can NOT be resolved promptly.
- Example: Patient writes a letter complaining about their care after they leave the hospital.
- **When a grievance is received, you must:**
 - Get your director and the Quality & Regulatory Programs Department involved
 - Report the grievance within 24 hours of receiving it

Certified Interpreters

- We are required to use certified interpreters in the hospital setting.
- Southeast Health subscribes to a **Video Remote Interpreter service**. This service should be used if the patient does not speak English.
- You can call this service and have a certified interpreter talk to the patient and healthcare providers.
- ***Do not use a co-worker or team member that “says” they speak the language.***
- The House Supervisor has the pin code for the Language Line. Request help from the charge nurse and/or House Supervisor.



Cultural Diversity

It is important for team members to be sensitive to our cultural diversity and appreciate their unique elements.

- The concept of culture can be very complicated.
- Culture includes a persons beliefs, behaviors, values, religion, national origin (language), ethnicity, gender, sexual orientation and education.

Any staff or students in our facility should strive to create an environment of **inclusion and **respect**.**

We should take the time to get to know and understand our patients, visitors & coworkers.



Harassment Policy

- Southeast Health has a harassment policy to protect workers.
- ***Southeast Health does NOT tolerate any form of discrimination or harassment.***

Workplace Harassment

includes, but is not limited to, offensive language, jokes or other verbal, graphic or physical conduct; or intimidating, threatening or offensive behavior.

Sexual harassment

is ***unwelcomed*** sexual advances, request for sexual favors or other conduct of a sexual nature.

- Example: flirting; sending personal, sexually suggestive notes or cards; use of derogatory terms, such as referring to women/men as babe, darling, honey, sugar, girl/boy, etc.; nude or suggestive pictures, cartoons, faxes, ads, emails, etc.; blowing kisses; uninvited hugging or kissing; uninvited massaging of neck/shoulders/back.

Harassment Policy

Any employee, student or volunteer who believes they are being harassed should remember the slogan, “***Don’t tolerate, go communicate.***”

- You should **report** *any* incident to one of the following: immediate supervisor, department head, administrative contact, director of Human Resources or Administration.
- Once an incident has been reported, Southeast Health ***will conduct an investigation*** and the person found guilty of harassment will be subject to **disciplinary action up to termination.**

Hostile Work Environment

Southeast Health has zero tolerance for intimidating and/or disruptive behaviors that cause a hostile work environment.

Hostile behaviors could include:

- verbal outbursts
- physical threats
- refusing to perform assigned tasks
- quietly exhibiting uncooperative attitudes during routine activities
- reluctance of refusal to answer questions, return phone calls or pages; or condescending language or voice tone

If you feel you are in a hostile work environment, report it to your supervisor and/or H.R.

Workplace Violence

Overview of Workplace Violence

- Workers in healthcare settings face increased risk of workplace violence.
- Violence in healthcare settings is on the rise.
- Front-line healthcare workers should be educated on how to handle upset, angry, disruptive patients and visitors.
- Prevention is best, but knowing how to handle a violent (or potentially violent) situation is just as important!



Workplace Violence

- Violent behavior shall not be tolerated.
 - Individuals who commit such acts may be removed from the premises and may be subject to criminal penalties.
 - Employees may also be subject to disciplinary action up to and including termination.
- Each Southeast Health employee or representatives (such as students and instructors) have the responsibility of maintaining a non-violent work environment by refraining from engaging in any violent behavior and reporting any occurrence that would be considered inappropriate under this policy.
- No behavior, implied or actual, that violates this policy will be tolerated.

Workplace Violence

Reporting Workplace Violence

- If an employee believes they have been subjected to workplace violence **they should report it to their manager/supervisor**, who will immediately report the situation to security.
- If an employee/student/instructor believes they may be at risk for violence at work as a result of a domestic dispute should report the situation to their manager/supervisor, who will report the situation to security.
- **Workplace violence and/or threats should be documented/recorded on an Occurrence Report.**

Workplace Violence

Recognizing a Problem

- Many times there are **WARNING SIGNS** before a person becomes angry or violent.
 - Staff should be alert and **LISTEN** to their patients, family members, & visitors.
 - Preventing a frustrated patient or visitor from escalating into to a disruptive, yelling, threatening, angry patient is always best.
 - **BE ALERT, LISTEN, and REPORT** any warning signs to the nurse, such as:
 - Someone using verbally aggressive language
 - Patient/visitor/staff that seems angry about everything
 - You see family members arguing
 - Threatening lawsuits
 - Someone appears to be under the influence of alcohol or drugs
 - Patient or visitor that seems agitated. Pacing the floor.

Dress Code

“It only takes 2-3 seconds to make a first impression – make the right one.”

Dress Code/Professional Appearance Policy General Guidelines:

- Hair – no extreme looks or hair colors
- Facial hair – sideburns and mustaches should be neat
- Personal hygiene – good personal and oral hygiene required
- Scents/Odors – **NO perfume, cologne or scented lotions**
 - * could cause an allergic reaction to patients or employees
- Makeup – no extremes in makeup
- Jewelry – **NO visible body piercing, except in the ear**
 - no tongue rings/apparatuses
 - no sunglasses worn inside the building
 - no more than two rings per hand, one necklace, one watch, one bracelet and two earrings per ear

Employees, students and volunteers wear:

- Uniforms
- Business attire

Dress Code

Dress Code/Professional Appearance Policy General Guidelines:

- Attire for women – dresses, slacks, shirts, skirts, blouses, etc.
 - **NO** sleeveless dresses or tops; backless, see-through, tight fitting or revealing tops/dresses; mini skirts or skirts with revealing long slits. **No denim.**
- Attire for men – uniforms or street clothes (trousers/shirts). **No denim.**
- Footwear – appropriate for job, closed-toe shoes in patient areas
 - **NO** sandals or croc style shoes with holes
 - Dress sandals are allowed in non-patient/office areas
- Tattoos – should **NOT** be offensive and should be **covered** as much as possible
- Fingernails – **NO** artificial nails for direct patient care. Fingernails should be neat, clean and of appropriate length
 - Definition: Caregivers must **NOT wear artificial or long natural fingernails** due to Infection Control standards. Artificial nails include, but is not limited to, acrylic nails, all overlays, tips, bonding, extensions or nail jewelry.
 - Nails should be natural or of one solid color – designs/accessories are not allowed
 - Nails should be no longer than ¼ of an inch

News - Media

News/Media should ***always be escorted by someone from Public Relations.***

Employees can only give the following information if the person inquiring provides the patient's full name:

- Room number
- Condition
 - Terms you can use: ***Undetermined, Good, Fair, Serious or Critical***

Photos can only be taken with a ***patient's written permission.***

Occurrence Reports

If you discover an occurrence (incident):

- **First – Get help for the individual**
- Second – Report the incident to your supervisor
- Third - Documentation must be completed. (Complete an Occurrence Report. See the charge person or supervisor if you have questions or need help.)

Occurrence Reports should be completed for any event that outside of the normal work day. This could include events such as a patient or visitor fall, a patient threatens a staff member, any emergency code that is called.

Report of Injury

Contract employees, students and/or instructors injured on the job must **report** the incident to their supervisor **IMMEDIATELY**.

- Go to the Emergency Department for care.
 - *You may choose to seek care with your regular physician or a different E.D. if you wish.*
- **If you had a needle stick injury, you MUST let the triage nurse know!** You should start treatment **within two hours** of your injury.

Identity Theft

Identity Theft

- Definition: using fraud to steal the identity of another person.
- Southeast Health protects our patient/customer information.
- We have **RED FLAGS** rules (alerts) because we have patient accounts (their bill) and medical records (their health information).
- Southeast Health does **NOT** delay treatment (we will investigate further). Get your supervisor involved.

Emergency Codes

Emergency Phone Numbers:

- If you have an **in-house emergency (main building)** - dial **5555**.
- If you work in an **off-site clinic** and you have an emergency – dial **911**.

For main building emergencies, dial 5555 and tell the operator:

**Type of
Alert**



**Type of
Event**



**Location of
Emergency**

Emergency Codes

The **in-house** emergency phone number is **5555**.

Tell the operator:

Type of Alert



Type of Event



Location of Emergency

Type of Alert	Type of Event	Location
Security Alert	<ul style="list-style-type: none">• Missing Person• Suspicious Package• Active Shooter• Abduction Alert• Lockdown	Location of security alert
Medical Alert	<ul style="list-style-type: none">• Code Blue• Fall• <i>All other types of medical emergencies will be "Medical Alert + Location"</i> <p><i>- see the next slide for clarification</i></p>	Location of emergency
Facility Alert	<ul style="list-style-type: none">• Fire Alarm• Radiation Response• IS Outage• External Disaster	Location of facility alert
Weather Alert	<ul style="list-style-type: none">• Weather Type	Houston County

Rapid Response Team

- The **R**apid **R**esponse **T**eam should be summoned for:
 - Changes in respiratory, cardiac or neurological
 - Significant changes in vitals signs
 - Staff concern over patient condition.
- **ANYONE can call an RRT:** *staff members, students, instructors, family members, visitors, etc.*
- **RRT members include:**
 - Critical Care Registered Nurse
 - A Respiratory Therapists
 - The Shift Coordinator.

**Rapid Response Team
phone number
is 5500.**

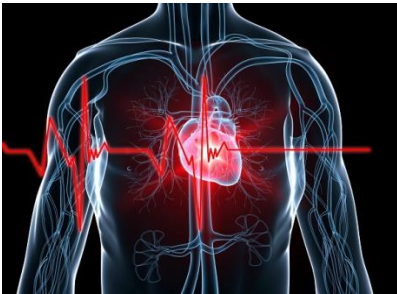
Chest Pain Center & Stroke Center

Southeast Health is a Chest Pain Center and a Stroke Center.

- If you see someone having signs and symptoms of a heart attack or stroke, be an AMBASSADOR for the programs by ***getting help quickly.***
 - If you are **outside of the hospital, call 911.**
 - If you are inside the hospital, call 5555 or get a nurse.



Signs and Symptoms of Heart Attack



Heart Attack Signs & Symptoms

Pain in the jaw, neck arm or shoulder, tingling in the left arm

Pressure or heaviness in their chest, sweating profusely

Shortness of breath with or without chest discomfort, dizziness or passing out

Pain in upper stomach area or indigestion, nausea or light headedness

Signs and Symptoms of Heart Attack

- If you outside of the hospital and find someone having symptoms of a heart attack - - call 911 and stay with them.
 - Start CPR if needed and if you are trained.
- If you are inside the main hospital and find someone having symptoms of heart attack:
 - call 5555 (or 5500) for a Rapid Response Team or
 - quickly tell a nurse

TIME

IS MUSCLE

So Act Fast!



B.E.F.A.S.T.

When it comes to stroke: **B.E.F.A.S.T.**

B

**Balance
loss**

E

**Eyesight
loss**

F

**Facial
drooping**

A

**Arm
weakness**

S

**Speech
difficulty**

T

**Time to
call 911**

- If you outside of the hospital and find someone having symptoms of stroke - - call 911 and stay with them. Start CPR if needed and if you are trained.
- If you are inside the main hospital and find someone having symptoms of stroke - - call 5500 for a Rapid Response Team.

Other Signs of Stroke

- You have learned how to spot a stroke using “**B.E.F.A.S.T.**” - - but that doesn’t cover all of the symptoms.
- Everyone needs to be able to recognize the other **10 signs of stroke** and to take QUICK action!

A SUDDEN ONSET of the following symptoms may indicate stroke*

	SYMPTOMS A LOVED ONE MAY EXPERIENCE	SIGNS YOU MAY NOTICE
1. CONFUSION	Unable to understand what is happening, can't think clearly or feel thrown off	A puzzled look, a hard time focusing, trouble making decisions
2. DIFFICULTY UNDERSTANDING	Unable to comprehend speech or language	Raised or wrinkled eyebrows, shaking their head "no." Unsteady or woozy
3. DIZZINESS	Feeling faint, lightheaded, or like the room is spinning	Unsteady movements (like they have motion sickness), like they are drunk (without having any alcohol)
4. LOSS OF BALANCE	Unstable with less coordination	Wobbling around, grabbing onto a stationary object
5. NUMBNESS	A tingling sensation in the body (i.e. face, arm or leg), like pins and needles	Constant touching, massaging or shaking of the numb areas

Other Signs of Stroke

A SUDDEN ONSET of the following symptoms may indicate stroke*

	SYMPTOMS A LOVED ONE MAY EXPERIENCE	SIGNS YOU MAY NOTICE
6. SEVERE HEADACHE	Pain or discomfort in the head, scalp, or neck with no known cause	Touching their head or rubbing their temples, sensitivity to light
7. TROUBLE SPEAKING	Unable to speak or slurred speech	Sentences that can't be understood, difficulty having a conversation
8. TROUBLE WALKING	Stumbling or unable to walk straight	Tripping over nothing
9. VISION CHANGES	Blurred vision or trouble with eyesight in one or both eyes	Squinting or rubbing their eyes, not able to read
10. WEAKNESS	Lack of strength in the face, arm, or leg—especially on one side of the body	Wanting to sit or lay down, difficulty doing simple tasks

*Note that these symptoms or a combination of them are not unique to stroke, but if they are sudden and out of the ordinary, they may indicate a sign of stroke and require immediate attention.

Call your local emergency services immediately if you think you or someone near you is having a stroke.

Patient Safety

- Bed should be in low and locked position anytime a patient is in the bed.
 - If a bed is raised to perform care, it should be put back down in low and locked position once the care is completed.
- When patients are placed in a chair, the wheels should be locked and the call light should be placed within the reach of the patient.
- Staff and/or students should make sure the call light is within the reach of the patient.
- Patients should have the appropriate side rails up to prevent falls.

Patient Safety

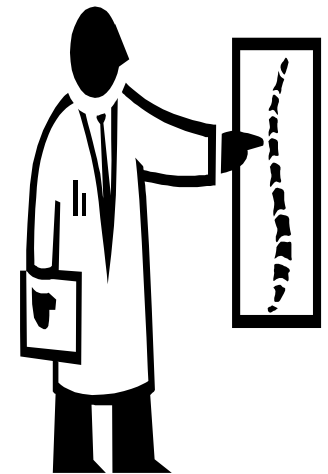
- Staff and students in our facility should watch for hazards all over the hospital, but especially when entering or exiting patient rooms, and when walking in public areas.
 - If hazards are found, you should correct ones that are within your scope or job title.
 - If you can't correct/fix the problem – notify the supervisor **IMMEDIATELY!**

❖ *Examples of hazards to watch for:*

- Too many chairs in the patient's room, or any other clutter
- Wet floor
- Electric cords across walkways (tripping hazard)
- Anything that could cause harm or an injury

Body Mechanics

- Most pain felt in the workplace is **not** caused by a single traumatic injury.
- **Most injuries are the result of:**
 - months or years of poor body mechanics
 - stressful living
 - poor work habits
 - a loss of flexibility
 - a general lack of physical fitness



- **Most injuries can be avoided by using good body mechanics.**

Body Mechanics

• Standing:



- legs should be at least shoulder-width apart
- legs can be either side-to-side or one in front of the other
- elevate or incline the work surface to bring your work closer to you
- put one foot up, shift your weight, or squat down occasionally
- keep your work at a comfortable height
- stand on an anti-fatigue mat

Note: Do NOT Stand in one place too long, use poor posture or bend forward at your waist or neck.

• Sitting:

- keep weight evenly distributed in the chair
- sit close to your work
- **get up and move about every 15-30 minutes to prevent blood flow problems**



Body Mechanics

- **Sitting:** You should sit in a chair that:
 - is low enough that both feet are on the floor
 - supports your back in a slightly arched position
 - allows you to work with your elbows bent at 90 degrees and with shoulders relaxed.

Note: Do NOT slump-sit or lean forward or downward to reach for or look at your work .
Do NOT sit for more than 15-30 minutes without getting up or changing position.

- **Pushing:**
 - push whenever possible
 - maintain good posture
 - side-step versus twisting to turn
 - remain close to the item being pushed.



- **Reaching** -- reach with two hands, face the object and stand on a stable step-stool to reach high items.

Body Mechanics

Lifting:

- use good posture, face the object
- keep objects close to your body
- keep feet at least shoulder width apart
- test the load before lifting
- request help with heavy items



Note: Do NOT lift in a bent-over, stooped position, twist, lift with one hand or outstretched arms or keep feet together

Carrying objects:

- carry the load in front
- pivot with your feet and make multiple trips
- use two hands and keep objects near your body
- ask for assistance with heavy items.



Note: Do NOT carry with one hand, twist or carry with bent-over, stooped posture!

Falls Prevention

- Southeast Health nurses will perform FALLS ASSESSMENTS on admission and each shift.
 - Patients that are **moderate to high-risk for falls** will have a **YELLOW ARMBAND**.
 - Patients that are **HIGH-RISK for falls** will have a **YELLOW ARMBAND** and they should have their **BED ALARM** on.

Occurrence Reporting

- **Occurrence reports should be filled out anytime there is an incident that involves a potential liability.**
 - **Here are some examples: patient or visitor falls (gets injured in any way), medication error, equipment malfunction, infection control issue, lost or damaged property.**
- Although the questions on each Occurrence Report Form may differ, they all work in the same way.
- Occurrence reports are not designed to punish or belittle anyone, they are to **help the organization improve patient safety.**
- **All of the forms can be found under “Occurrence Reporting”, which is found on “insideSEH”, under ONLINE ACCESS**
- If you are an contract employee that does not have access to our computer system, you **MUST report** the issue to a supervisor so that an Occurrence Report can be completed.

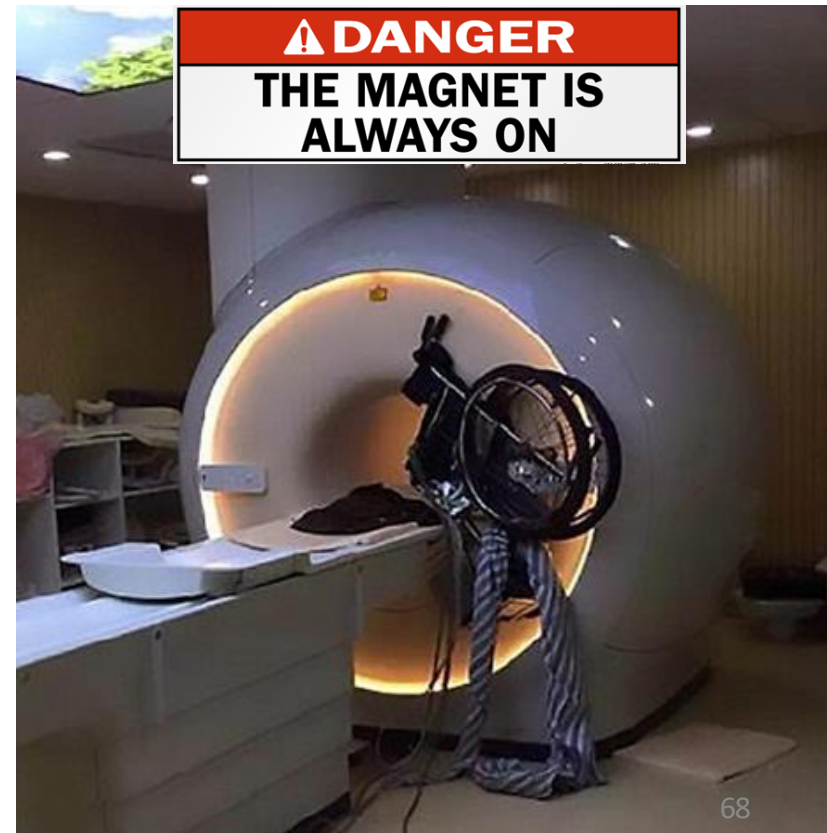
MRI Safety

- Magnetic Resonance Imaging (MRI) is a very strong magnet that is used to take detailed images of organs and tissues in the body.
 - The MRI exam causes no pain or tissue damage of any kind.
 - The MRI scanner may make loud tapping or knocking noises at times during the exam.
 - Patients may wear ear plugs to help with the noise.
- **SAFETY measures MUST be followed because the magnetic force could cause injury or death! The magnet is ALWAYS ON!**
- **EVERYONE** who enters the magnet room must be **SCREENED** for medical implants, electrical devices or objects **ON** or **ABOUT** their body!



MRI Safety

- For **MRI Safety** certain **medical devices** should **NEVER** enter the magnet room:
 - wheel chairs
 - carts
 - beds
 - IV pumps, PCA pumps, etc.
 - oxygen tanks
 - unapproved IV poles
 - Swan-Ganz Catheters
 - medical instruments
 - crash carts



Hand Hygiene

Handwashing is a simple thing to do and it is the best way to prevent infection and illness.

– U.S. Centers for Disease Control & Prevention (CDC)



- **Hand Hygiene:**

- **Handwashing**

- Good handwashing = **warm water + soap + FRICTION**
 - Wash for at least 20 seconds

- **Hand sanitizers (alcohol based hand rub)**

- Only use about a nickel size amount on the hands and rub it in. Let dry 30 seconds.
 - **Do NOT use hand sanitizers in the following situations:**
 - Your hands are visibly soiled or contaminated
 - After you use the restroom
 - When you are caring for a patient with Clostridium Difficile (C-Diff)

Workplace Practices to Prevent Infection

In clinical work areas:

- Do **NOT** eat, drink or put objects in your mouth in the patient care areas where you may be exposed to pathogens that make you sick.
- Do **NOT** apply cosmetics, lip balm or contact lenses in the patient care areas.
- If you do, you increase your risk of contracting an infection!!!

Hand Hygiene - Fingernails

- Anyone working with direct patient contact shall adhere to the CDC and Southeast Health's Infection Control guidelines regarding fingernails.
- **Fingernails must be so that their natural nail tips should not extend past the ends of their fingers.**
- **Artificial nail enhancements are not to be worn.**
 - This includes, but is not limited to, artificial nails, tips, wraps, appliques, acrylics, gel, glue, and any additional items applied to the nail surface.
- Nail polish is permitted, but anything applied to natural nails other than polish is considered an enhancement.



Flu Prevention

- ***Southeast Health employees and students/instructors are required to take a flu shot each year.***
- If you have an allergy or religious objection to taking the flu vaccine, you must apply for an exclusion.
 - Employees will apply for an exemption/exclusion through the Employee Health and Wellness Department, Extension 8005
 - **Students/instructors** will get our application at their school and submit to orgdev@southeasthealth.org
- **If** you are granted a medical and/or religious exemption to taking the flu shot (so you do not receive the influenza vaccine), you are required to:
 - **Wear a surgical mask** when you are within six feet of a patient during influenza season.
 - **Wear the mask CORRECTLY!**
- The mask should fit snugly over the face.
- It should cover the nose, mouth and chin.
- The metallic strip should be bent to fit over the bridge of the nose. It should mould around the nose so there is not a gap.
- The strings or elastic bands should be properly tied or positioned to hold the mask in place.



Sepsis

- Sepsis is a complex and rapidly progressive condition that warrants immediate, aggressive action by a well educated and prepared multidisciplinary team.
- Uncontrolled sepsis may result in devastating outcomes, including the development of septic shock, permanent organ damage, or death.
- Sepsis occurs in four(4) stages. **The earlier it is recognized, the BETTER the chance for survival.**
- The 1st stage of Sepsis is “SIRS”, which stands for Systemic Inflammatory Response.
 - If the patient has 2 or more of the following symptoms - - they **are** in the 1st stage of Sepsis!
 - Temperature less than 96.8°F or greater than 100.9°F
 - Respiratory rate greater than 20/min or PaCO₂ less than 32mmHg
 - Heart rate greater than 90 beats per minute
 - White Blood Cell count greater than 12,000 or less than 4,000 cells/mm³ or bands greater than 10%

- ❖ If you discover that a patient has 2 or more of the above symptoms, you must notify a nurse immediately!
- ❖ If you are a nurse - -you must order a STAT lactate level or call an RRT and contact the physician.

Universal Precautions

- All patients should be treated using “**Universal Precautions**”
 - This means you should treat all human blood and certain human body fluids as if they were known to be infectious for HIV, HBV and other blood borne pathogens.
 - Anytime you are going to contact blood or body fluids, or there is the possibility that you may contact blood and/or body fluids - - - you should wear the appropriate **personal protective equipment** such as: gloves, masks, and gowns.

Personal Protective Equipment (PPE)

- **Gloves:** wear anytime you may have contact with blood or other body fluids
 - **DO NOT** go from patient to patient wearing the **same** pair of gloves
- **Gowns:** use when your clothing could be soiled with blood or other body fluids
- **Mask and/or goggles:** when you might get splashed in the face
- Always check your PPE carefully to be sure it is **NOT** damaged or worn.
- It is the hospital’s responsibility to provide PPE and it is **YOUR** responsibility to use it!

Infection Control – Isolation Precautions

Isolation Precautions

- When patients have certain types of infections we must place them on isolation precautions based on the type of germ they have. This keeps the germs contained to their room and protects the staff and other patients.
- These are called “transmission-based precautions”.
- **READ the sign on the door for instructions.**
- **ANYONE** entering the room **MUST** follow the instructions on the sign.
- Ask your supervisor if you have ANY questions before entering these rooms.

Types of Precautions:

STOP CONTACT PRECAUTIONS PRECAUCIONES DE CONTACTO ALTO

To prevent the spread of infection, ANYONE* ENTERING THIS ROOM **MUST**:

Para prevenir el esparcimiento de infecciones, TODAS LAS PERSONAS* QUE ENTREN EN ESTA HABITACION **TIENEN QUE USAR:**

Hand Hygiene
Higiene De Las Manos ✓

Gloves
Guantes ✓

Gown
Delantal ✓

Applies whether or not contact with the patient or the patient's environment is anticipated. Esta regla se aplica aunque no anticipé con el paciente o con el ambiente del paciente.

*Patient visitors must wash hands, wear gloves, and gown upon entering and leaving this room. *Los visitantes del paciente deben lavar manos, usar guantes, y la bata al entrar y partir este cuarto.

Patient Transport: Clean patient hands, clean patient gown, employ containment all drainage, secretions, and excretions. **Traslado del Paciente:** Asegúrese que las manos y el delantal del paciente estén limpios, y vacíe o contenga todo drenaje, secreción o excreción del mismo.

Isolation shall not be discontinued without the notification of Infection Prevention & Control Extension 5680. Preguntas? Llame al Departamento de Prevención y Control de Infecciones al Extension 5680

STOP CONTACT PRECAUTIONS PRECAUCIONES DE CONTACTO ALTO

To prevent the spread of infection, ANYONE* ENTERING THIS ROOM **MUST**:

Para prevenir el esparcimiento de infecciones, TODAS LAS PERSONAS* QUE ENTREN EN ESTA HABITACION **TIENEN QUE USAR:**

Hand Hygiene
Higiene De Las Manos ✓

Gloves
Guantes ✓

Gown
Delantal ✓

SPECIAL ENTERIC

Perform hand hygiene before entering room AND wash hands with soap and water only before leaving room. **Lavase las manos antes de entrar al cuarto y lávese las manos con agua y jabón cuando salga del cuarto.**

EV5: Special Cleaning Indicated

Applies whether or not contact with the patient or the patient's environment is anticipated. Esta regla se aplica aunque no anticipé con el paciente o con el ambiente del paciente.

*Patient visitors must wash hands, wear gloves, and gown upon entering and leaving this room. *Los visitantes del paciente deben lavar manos, usar guantes, y la bata al entrar y partir este cuarto.

Patient Transport: Clean patient hands, clean patient gown, employ containment all drainage, secretions, and excretions. **Traslado del Paciente:** Asegúrese que las manos y el delantal del paciente estén limpios, y vacíe o contenga todo drenaje, secreción o excreción del mismo.

Isolation shall not be discontinued without the notification of Infection Prevention & Control Extension 5680. Preguntas? Llame al Departamento de Prevención y Control de Infecciones al Extension 5680

STOP DROPLET PRECAUTIONS PRECAUCIONES CONTRA PARTICULAS O GOTTITAS ALTO

To prevent the spread of infection, ANYONE ENTERING THIS ROOM **MUST**:

Para prevenir el esparcimiento de infecciones, TODAS LAS PERSONAS QUE ENTREN EN ESTA HABITACION **TIENEN QUE USAR:**

Hand Hygiene
Higiene De Las Manos ✓

Surgical Mask
Mascara Quirúrgica ✓

Gloves
Gautes ✓

N-95 Respirators should not be used for personal protection for patients on droplet precautions. Los Respiradores N-95 no se deben utilizar para la protección personal de pacientes con precauciones contra partículas o gottitas.

Isolation shall not be discontinued without the notification of Infection Prevention & Control Extension 5680. Preguntas? Llame al Departamento de Prevención y Control de Infecciones al Extension 5680

STOP AIRBORNE PRECAUTIONS PRECAUCIONES CONTRA ORGANISMOS QUE SE MANTIENEN EN EL AIRE ALTO

To prevent the spread of infection, ANYONE* ENTERING THIS ROOM **MUST**:

Para prevenir el esparcimiento de infecciones, TODAS LAS PERSONAS* QUE ENTREN EN ESTA HABITACION **TIENEN QUE USAR:**

Hand Hygiene
Higiene De Las Manos ✓

N-95 Respirator
Respirador N-95 ✓

Ensure that the door to the patient's room remains closed at all times. **Asegúrese de mantener la puerta de esta habitación cerrada todo el tiempo.**

*Patient wears surgical mask during transport. Check with Nurse for assistance. *Paciente lleva mascarilla quirúrgica durante el transporte. Consulte con la enfermera para asistencia.

Isolation shall not be discontinued without the notification of Infection Prevention & Control Extension 5680. Preguntas? Llame al Departamento de Prevención y Control de Infecciones al Extension 5680

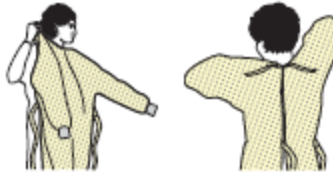
Infection Control – Using PPE Correctly

SEQUENCE FOR DONNING PERSONAL PROTECTIVE EQUIPMENT (PPE)

The type of PPE used will vary based on the level of precautions required; e.g., Standard and Contact, Droplet or Airborne Infection Isolation.

1. GOWN

- Fully cover torso from neck to knees, arms to end of wrists, and wrap around the back
- Fasten in back of neck and waist



2. MASK OR RESPIRATOR

- Secure ties or elastic bands at middle of head and neck
- Fit flexible band to nose bridge
- Fit snug to face and below chin
- Fit-check respirator



3. GOGGLES OR FACE SHIELD

- Place over face and eyes and adjust to fit



4. GLOVES

- Extend to cover wrist of isolation gown



USE SAFE WORK PRACTICES TO PROTECT YOURSELF AND LIMIT THE SPREAD OF CONTAMINATION

- Keep hands away from face
- Limit surfaces touched
- Change gloves when torn or heavily contaminated
- Perform hand hygiene

SECUENCIA PARA PONERSE EL EQUIPO DE PROTECCIÓN PERSONAL (PPE)

El tipo de PPE que se debe utilizar depende del nivel de precaución que sea necesario; por ejemplo, equipo Estándar y de Contacto o de Aislamiento de infecciones transportadas por gotas o por aire.

1. BATA

- Cubra con la bata todo el torso desde el cuello hasta las rodillas, los brazos hasta la muñeca y dóblela alrededor de la espalda
- Átesela por detrás a la altura del cuello y la cintura

2. MÁSCARA O RESPIRADOR

- Asegúrese los cordones o la banda elástica en la mitad de la cabeza y en el cuello
- Ajustese la banda flexible en el puente de la nariz
- Acomódesela en la cara y por debajo del mentón
- Verifique el ajuste del respirador

3. GAFAS PROTECTORAS O CARETAS

- Colóquesela sobre la cara y los ojos y ajústela

4. GUANTES

- Extienda los guantes para que cubran la parte del puño en la bata de aislamiento

UTILICE PRÁCTICAS DE TRABAJO SEGURAS PARA PROTEGERSE USTED MISMO Y LIMITAR LA PROPAGACIÓN DE LA CONTAMINACIÓN

- Mantenga las manos alejadas de la cara
- Limite el contacto con superficies
- Cambie los guantes si se rompen o están demasiado contaminados
- Realice la higiene de las manos

Infection Control – Using PPE Correctly

SEQUENCE FOR REMOVING PERSONAL PROTECTIVE EQUIPMENT (PPE)

Except for respirator, remove PPE at doorway or in anteroom. Remove respirator after leaving patient room and closing door.

1. GLOVES

- Outside of glove is contaminated!
- Grasp outside of glove with opposite gloved hand; peel off
- Hold removed glove in gloved hand
- Slide fingers of ungloved hand under remaining glove at wrist
- Peel glove off over first glove
- Discard gloves in waste container



2. GOGGLES OR FACE SHIELD

- Outside of goggles or face shield is contaminated!
- To remove, handle by head band or ear pieces
- Place in designated receptacle for reprocessing or in waste container



3. GOWN

- Gown front and sleeves are contaminated!
- Unfasten ties
- Pull away from neck and shoulders, touching inside of gown only
- Turn gown inside out
- Fold or roll into a bundle and discard



4. MASK OR RESPIRATOR

- Front of mask/respirator is contaminated — DO NOT TOUCH!
- Grasp bottom, then top ties or elastics and remove
- Discard in waste container



PERFORM HAND HYGIENE IMMEDIATELY AFTER REMOVING ALL PPE

SECUENCIA PARA QUITARSE EL EQUIPO DE PROTECCIÓN PERSONAL (PPE)

Con la excepción del respirador, quítese el PPE en la entrada de la puerta o en la antesala. Quítese el respirador después de salir de la habitación del paciente y de cerrar la puerta.

1. GUANTES

- ¡El exterior de los guantes está contaminado!
- Agarre la parte exterior del guante con la mano opuesta en la que todavía tiene puesto el guante y quíteselo
- Sostenga el guante que se quitó con la mano enguantada
- Deslice los dedos de la mano sin guante por debajo del otro guante que no se ha quitado todavía a la altura de la muñeca
- Quítese el guante de manera que acabe cubriendo el primer guante
- Arroje los guantes en el recipiente de deshechos

2. GAFAS PROTECTORAS O CARETA

- ¡El exterior de las gafas protectoras o de la careta está contaminado!
- Para quitárselas, tómelas por la parte de la banda de la cabeza o de las piezas de las orejas
- Colóquelas en el recipiente designado para reprocessar materiales o de materiales de deshecho

3. BATA

- ¡La parte delantera de la bata y las mangas están contaminadas!
- Desate los cordones
- Tocando solamente el interior de la bata, pásela por encima del cuello y de los hombros
- Voltee la bata al revés
- Dóblela o enróllela y deséchela

4. MÁSCARA O RESPIRADOR

- La parte delantera de la máscara o respirador está contaminada — ¡NO LA TOQUE!
- Primero agarre la parte de abajo, luego los cordones o banda elástica de arriba y por último quítese la máscara o respirador
- Arrójela en el recipiente de deshechos

EFFECTÚE LA HIGIENE DE LAS MANOS INMEDIATAMENTE DESPUÉS DE QUITARSE CUALQUIER EQUIPO DE PROTECCIÓN PERSONAL

Biohazard – Regulated Waste



Linen Guidelines

- Soiled (dirty) linen is placed in yellow bags.
- Linen bags should be tied and placed in the laundry chute.
- Do not place dirty linen on the floor.
- Do not drag yellow bags down the hall.

Trash



- Regular trash should be placed in regular trash bags that are brown or clear in color.
- Contaminated trash should be placed in RED BAGS.
- Red bags should be placed in the red bins on your unit. (Usually found in the Soiled Utility Room).



Sharps

- Place all sharps (needles, syringes, scalpels, anything with a sharp edge or point) in a sharps container.

Tuberculosis (TB)

- Tuberculosis (TB) is a disease caused by the microorganism *Mycobacterium tuberculosis*.
 - Southeast Health has a TB exposure control plan that is based on guidelines from OSHA and the CDC
 - TB spreads **through the air** by coughing, sneezing, talking, or anytime air is forcibly expelled from the lungs
 - People can become infected when they breathe in air containing TB germs.
 - A sputum smear & culture is the **ONLY definitive** test for TB.
- Southeast Health employees, contract employees, students and instructors **are required to have a negative TB test within one year of employment.**
 - Acceptable TB tests include: TB Skin Test, T-spot, & QuantiFERON.
 - The TB skin test determines if you are infected with the TB germ.
 - It does NOT determine if you have ACTIVE TB.

Tuberculosis (TB)

What to do if you have a patient with TB or suspected TB:

- ALWAYS notify the **Infection Prevention Nurse!**
- Place patient in a special **NEGATIVE-PRESSURE** room.
- Must notify **Plant Services** when a TB patient is admitted so they can monitor the negative pressure room.
- Provide as many services in the isolation room as possible (i.e. x-ray). Elective procedures should be delayed if possible.
- Place a surgical mask on the PATIENT if they must leave their room.
- All staff that enter the room of a TB patient **MUST** wear a correctly fitted N95 respirator mask.
 - Employees must be fit-tested **EVERY YEAR** for the correct size of TB respirator mask.

Tuberculosis (TB)

What should you do if you think you have been exposed to TB while working at Southeast Health?

- Follow our policy for post-exposure procedures
- Go see the Employee Health & Wellness nurse
- Have a baseline TB skin test (PPD test) — followed by another PPD in ten (10) weeks
- Follow the recommendations given by healthcare provider and have any required treatments and follow-up procedures

Bloodborne Pathogens

- Bloodborne pathogens are **infections** spread by contact with blood or body fluids.
- Healthcare workers are at risk of exposure to bloodborne pathogens at work which include: HIV, Hepatitis B, and Hepatitis C

What is an Exposure?

- An incident involving contact with blood or body fluids via non-intact skin, eyes, nose, mouth or parental (IV).
 - Even **one (1) exposure** to a bloodborne pathogen can lead to serious and disabling diseases.
-
- Tasks and activities that may involve exposure to blood and body fluids:
 - a) Phlebotomy procedures (drawing blood)
 - b) Starting an IV
 - c) Sputum collection or suctioning
 - d) Cleaning of environmental surfaces
 - e) Handling of urine or stool
 - f) Surgery
 - g) CPR



Bloodborne Pathogens

- Southeast Health has an **Exposure Control Plan** that provides ways to reduce the risk of contracting bloodborne diseases.
- **What should you do if you think you have been exposed to a bloodborne pathogen while working at Southeast Health?**
 - **IMMEDIATELY** wash the wound or site with soap and water.
 - Report the exposure incident to your immediate supervisor.
 - Fill out the Employee Exposure Report of Injury
 - Report to Employee Health & Wellness with report of injury:
 - After Employee Health & Wellness hours, immediately notify the Shift Coordinator for further instructions

Coronavirus Plan

- All patients should be screened for respiratory symptoms **and/or** travel to areas experiencing SARS-COV-2 (causes COVID-19) **or** contact with any possible COVID-19 patient.
- For persons with suspected infection - - Implement respiratory/cough hygiene protocols, **isolate in an Airborne Infection Isolation Room (AIIR)/negative pressure room.**
- Inform infection control nurse regarding presence of patient under investigation for COVID-19. After hours and on weekends notify the house supervisor.
- **A patient with known or suspected COVID-19 should be placed in an Airborne Infection Isolation Room (AIIR).**
 - AIIRs are negative pressure rooms.
 - If an AIIR is not available the patient should be transferred to a facility with available AIIRs.
 - Once the patient is in the AIIR, they may remove the face mask.

Coronavirus Plan

Patient Placement

- Personnel entering the room MUST wear PPE.
- Dedicated or disposable noncritical patient care equipment should be used. Such as disposable BP cuffs etc
- Staff will order **CONTACT** and **AIRBORNE** isolation.

When entering the room AFTER the patient has been discharged/vacated from the room- **RESPIRATORY PROTECTION MUST BE USED.**

Coronavirus Isolation Precautions

Staff will order **CONTACT** and **AIRBORNE** isolation for patients with known or suspected COVID-19

Remember - Airborne Isolation requires the use of an N-95 mask.



CONTACT PLUS AIRBORNE PRECAUTIONS

CONTACTO MÁS PRECAUCIONES EN EL AIRE

STOP
To prevent the spread of infection, **anyone** entering this room **MUST**:

ALTO
Para prevenir el esparcimiento de infecciones, **todas las personas*** que entran en esta habitación **TIENEN** que usar:

 HAND HYGIENE HIGIENE DE LAS MANOS	 GLOVES GAUNTES	 GOWN DELANTAL	 GOGGLES OR FACE SHIELD GAFAS O CARETA AND  N-95 OR PAPR RESPIRATOR RESPIRADOR N-95 O PAPR
--	---	--	--

Applies whether or not contact with the patient or the patient's environment is anticipated. Esta regla se aplica aunque no anticipa contacto con el paciente o con el ambiente del paciente.

*Approved visitors must wash hands, wear gloves, gown, goggles or face shield and surgical mask upon entering and leaving this room. Los visitantes aprobados deben lavarse las manos, usar guantes, bata, gafas o careta y máscara quirúrgica al entrar y salir de esta habitación.

Patient Transport: Patient wears surgical mask during transport. Check with Nurse for assistance. Paciente lleva mascarilla quirúrgica durante el transporte. Consulte con la enfermera para asistencia.

Ensure that the door to the patient's room remains closed at all times. Asegúrese de mantener la puerta de esta habitación cerrada todo el tiempo.

Isolation shall not be discontinued without the notification of Infection Prevention & Control: Ext 5680
Preguntas? Llame al Departamento de Prevención y Control de Infecciones at: Ext 5680

Coronavirus Isolation Precautions

- **Employees MUST BE FIT TESTED** prior to using the N-95 mask.
 - Employees that have not been fit tested for N-95 mask may **NOT** enter a patient's room with known or suspected Coronavirus Disease (COVID-19).
- **Employee should visually inspect mask prior to each use.**
- **The N-95 mask may be re-used by the employee on the same patient.** *Store in paper bags. Label bag with the employee's name.*
- **Do NOT use the N-95 mask if:**
 - It becomes soiled or damaged
 - It gets wet
 - Unable to achieve a proper seal during the fit check



Coronavirus Emergency Medical Situation

- Emergency medical situations with confirmed or suspected COVID-19 patients:
 - If the patient has a cardiopulmonary arrest situation (no breathing, no heartbeat), a code should be called by dialing 5555.
 - Tell the operator you have a **Code BLUE-YELLOW**.
 - This alerts all responding staff of the patient's situation so they can use proper PPE.

**CONTACT PLUS
AIRBORNE PRECAUTIONS**
CONTACTO MÁS PRECAUCIONES EN EL AIRE

STOP
ALTO

To prevent the spread of infection, **anyone** entering this room **MUST**:

Para prevenir el esparcimiento de infecciones, todas las personas que entran en esta habitación TIENEN que usar:*

HAND HYGIENE
HIGIENE DE LAS MANOS

GLOVES
GAUNTES

GOWN
DELANTAL

GOGGLES OR FACE SHIELD
GAFAS O CARETA
AND
N-95 OR PAPR
RESPIRADOR N-95 O PAPR

Applies whether or not contact with the patient or the patient's environment is anticipated.
Esta regla se aplica aunque no anticipe contacto con el paciente o con el ambiente del paciente.

*Approved visitors must wash hands, wear gloves, gown, goggles or face shield and surgical mask upon entering and leaving this room.
Los visitantes aprobados deben lavarse las manos, usar guantes, bata, gafas o careta y máscara quirúrgica al entrar y salir de esta habitación.

Patient Transport: Patient wears surgical mask during transport. Check with Nurse for assistance.
Paciente lleva mascarilla quirúrgica durante el transporte. Consulte con la enfermera para asistencia.

Ensure that the door to the patient's room remains closed at all times.
Asegúrese de mantener la uerta de esta habitación cerrada todo el tiempo.

Isolation shall not be discontinued without the notification of Infection Prevention & Control: Ext 5680
Preguntas? Llame al Departamento de Prevencion y Control de Infecciones at: Ext 5680

Self-Contained Breathing Apparatus (SCBA)

- If there is a circumstance where an **employee** who has **not** been fit tested or **cannot** be fit tested (*for example: has facial hair or medical condition*) has to care for a patient on Airborne precautions, they **MUST** wear a special breathing system called a Self-Contained Breathing Apparatus (SCBA).
 - *Staff refer to it as the “TB hood” - but it may be used for any airborne isolation patient.*
 - *An instructional video on how to use this system can be found on “Inside”. Look for “CAPR Training Video” under “Clinical Quick Links”*
- If there is a STUDENT or INSTRUCTOR who has not been fit tested or cannot be fit tested, they will not be allowed to care for patients on isolation where N95 mask are required to be worn in the isolation room in the hospital. We currently don't have enough SCBA's to use with non-employees.

Self-Contained Breathing Apparatus (SCBA)

If the self contained system is needed, staff should:

- Call and notify Central Supply.
- Go to Central Supply to sign out and pick up the suit/hood.

When finished with the suit/hood staff should:

- Place it in a red bag. (Do NOT put in soiled utility room!)
- Return it to Central Supply and sign it back in.



Sharps Safety

- Needle recapping creates a **risk of exposure** to bloodborne disease. **Do not recap needles!**
- **Sharps (syringes & needles)** should be placed in proper sharps containers.
- Containers should be promptly replaced when full!
- **DO NOT** try to:
 - bend or break needles
 - remove needles from sharps containers



Medical Equipment Management

Biomedical Equipment Technicians are available to install, repair and calibrate diagnostic, therapeutic and monitoring equipment.

Equipment should be inspected **BEFORE** it is used on a patient.

They also repair certain:

- lab equipment
 - nurse call systems
 - pneumatic tube system
 - patient beds.
-
- All equipment is inspected periodically. Reports are available to departments as a record of:
 - preventive maintenance completed
 - unscheduled repairs
 - parts used.



Emergency Power System

• Emergency Power System

- Power for this facility is provided by the local utility company.
- When normal power is interrupted, an emergency power system takes over.
- The hospital has **three (3)** diesel-fueled generators that **come on-line within eight (8) seconds.**



- Receptacles and Wall Outlets are coded in the following manner:
 - **Red** = emergency outlets, typically 120 volts
 - Regular = typically normal power, general service circuits



Utilities Management

- Look for the following hazards when working with **electrical equipment**:
 - Electrical cords that are damaged or have broken insulation
 - Loose electrical connections or lack of grounding
 - Electrical cords or connection in or near water or other liquids
 - Electrical devices that spark, shock or smoke due to damage or defect
- **Water**
 - If we have a water outage, follow the Emergency Water Supply Plan.



Utilities Management & Fire Safety

- **Fire Detection and Suppression**

- ❖ We have fire protection & detection systems throughout with **sprinkler** systems in all areas.
- ❖ **Know where your fire extinguishers & pull stations are!**
- ❖ **Know where the shut-off valves and zone valves are located when working with oxygen, vacuum and medical air.**
- ❖ Be prepared to shut off valves as instructed during a fire.



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Fire Safety - Elements of a Fire

- Three (3) elements in every fire:
 - Oxygen, heat and fuel.



- General Precautions:
 - Firewalls separate buildings into smoke compartments.
 - Each stairwell is a separate smoke compartment.
 - Patient rooms are within smoke compartments.
 - **The door to a patient room protects from smoke and fire for about 20 minutes.**
 - Shutoff valves for oxygen lines are provided in patient areas.
 - **DO NOT use elevators during a fire alarm situation!**
 - Do not panic and yell “fire”

Fire Safety

*In case of a FIRE, remember **RACE**:*

Remove anyone in immediate danger

Activate the alarm (always near exits and stairwells)

Contain the fire (close doors)

Extinguish the fire and/or evacuate



*Think **P.A.S.S.** to help you remember how to use a fire extinguisher!*

Pull the pin

Aim at the base of the flame

Squeeze the handle

Sweep from side to side

Lock-out or Tag-out

- Engineering must safely work on equipment with its energy turned “**off**”.
- To prevent others from turning the energy source “on”, **lock-out or tag-out** procedures are used.
 - When **lock-out** is not possible, **apply a tag** warning others not to generate or “**turn on**” the equipment.
- The tag is signed by the person who is working on the device.
- The tag may *only* be removed by the engineer that signed the tag.



Hazardous Materials – Safety Data Sheets

- The Hazard Communication Standard requires that the maker, distributor or importer of chemicals must provide **Safety Data Sheets** on each hazardous chemical.
- **How to find the Safety Data Sheets:**
 - Go to “*InsideSEH*”
 - click on **Online Access**
 - then click on **Safety Data Sheets**
- All employees should be aware of how to find the Safety Data sheets.
- If you are a contract employee that does not have computer access, find any employee with computer access – they can pull up the SDS sheets.
- All SDS sheets have emergency and 1st aide procedures for each chemical.

Hazardous Materials – Safety Data Sheets

The chemical container must have the following information on the label, **regardless of the container:**

- **Product Identifier** (Chemical name)
- **Signal word** (Danger, Warning, Caution or None, depending on the Hazards of the Chemical)
- **Pictograms** (nine (9) different pictures that display specific hazards)
- **Hazard statement** (Physical, Health or Environmental Hazards of the Chemical)
- **Precautionary statements** (General, Prevention, Response, Storage & Disposal)
- **Company Information** (Manufacturer or Distributor Information (i.e.. name, address and phone number)



Hazardous Materials – Safety Data Sheets

You must properly label all secondary containers that are being used in the workplace.

After reviewing the necessary information from the **parent container label**, please **fill out the label that you will apply to the secondary container** with the following:

- Product ID or Chemical Name.
- Mark the appropriate Signal Word.
- Select the appropriate Pictogram or multiple Pictograms. Take a marker and outline the proper pictogram or mark out all the others that don't apply.
- Enter the Hazard/Precautionary information.
- Enter the PPE code.
- In the Blue, Red and Yellow areas on the label identified as Health, Fire and Reactivity. Enter the appropriate GHS Hazard Rating as identified by the SDS Sheet.

Hazardous Materials - Spills

- **Spills or leaks of known substance:**



- Immediately secure the area
- Begin specific spill plans as written for type of spill
- Request assistance from additional personnel by calling an alert.
 - **Call 5555 from any hospital phone.**
 - **Tell operator that answers that you have a FACILITY ALERT and the location of the spill.**
- Send personnel to obtain special equipment (spill kits, mops, towels)
 - Direct clean-up efforts
 - Dispose of wastes according to federal, state and/or local laws
- Secure medical attention for persons exposed or injured
- Complete the appropriate reports
 - Notify the proper department for assistance.

Hazardous Materials - Spills

• Blood or Body Fluid Spills:

- Contain, remove and disinfect all blood or body fluid spills as quickly and effectively as possible
 - **Wear gloves** and other appropriate protective equipment
- Use a dry absorbent material (i.E. Isolyzer) to solidify larger fluid volumes.



• Cleanup of Blood and Body Fluid Spills:

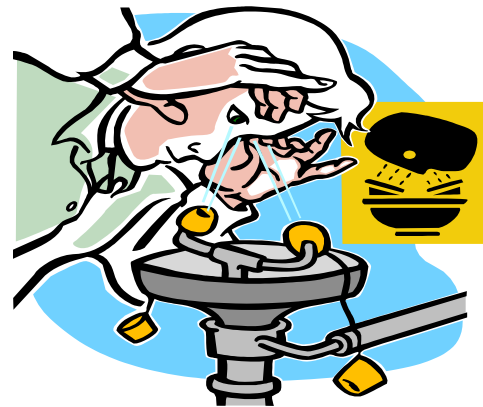
- Completely remove solidified material with a spatula, scoop or other pick-up device and place waste in a color-coded biohazard disposal bag
 - Clean the area with detergent and water
 - Decontaminate the area with an approved disinfectant (bleach solution)
- Wash hands thoroughly with soap and water after cleanup and removal of gloves.

Hazardous Materials – Eyewash Station

Eyewash Station

- For chemical splashed to the eyes:
 - hold both eyelids open
 - roll the eyeballs so water flows on all surfaces in the folds surrounding the eyeballs.

- A minimum of **15 minutes** is recommended for initial first aid irrigation and dilution of a chemical splash to the eyes, face and body.



Security



Function of Security is to:

- Serve & protect staff, patients, visitors and property
- Investigate & record incidents, thefts, disturbances, vandalism, accidents and traffic accidents
- Provide special services including escorts, battery boosts, lock & unlock doors, inflate vehicle tires
- Respond to emergencies such as fire, disasters, bomb threats, visitor falls, threatening situations, etc.
- Issues parking decals
- Secure Valuables – contact Security to log in patient valuables and secure them to avoid theft

Weapons and Prisoners

- **NO weapons (firearms, clubs, knives with long blades, etc.) may be carried on property except for law enforcement officials**
- If a prisoner is brought in as a patient, notify Security and cooperate with the patient's guard

Security

- **Security is on duty 24 hours a day, 7 days a week.**
- The main dispatch office is located inside the Emergency Department.
 - **Phone number = 793-8014**
 - **In-house extension 8014**

Access to Locked Areas

- For someone other than the occupant or Department Manager to enter a locked area, Security must receive advance notice including the name of the person to gain access, the date, time and the area they may enter.
 - If it is a vendor, the company name is also required.
 - The person given access must have some form of picture identification.

Security Tips

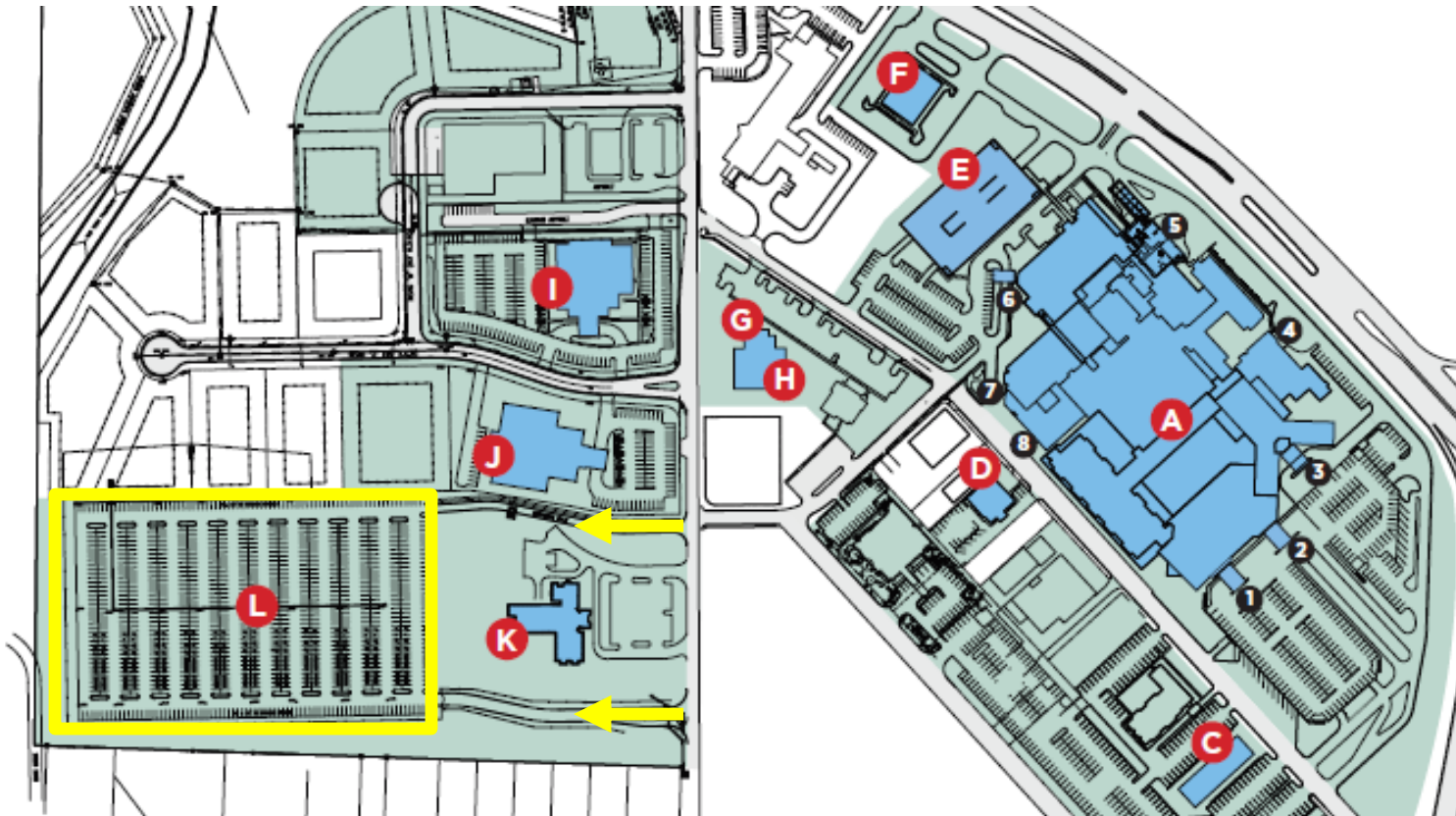
- Always try to walk with a group, rather than alone, to your vehicle.
- Have keys **in your hand** when walking to your car.
- Always **look around** when traveling to and from your car.
- Check under your car from a distance and then check in your car before entering it.
- Keep valuables out of sight when they are in your car (either lock them in the trunk or place them under the seat of your car)
- Report any suspicious persons or activities immediately.
- Lock valuables in your office, a desk drawer, a filing cabinet or your locker.

Do NOT bring expensive/valuable items to work!

Parking: Weekdays on Dayshift

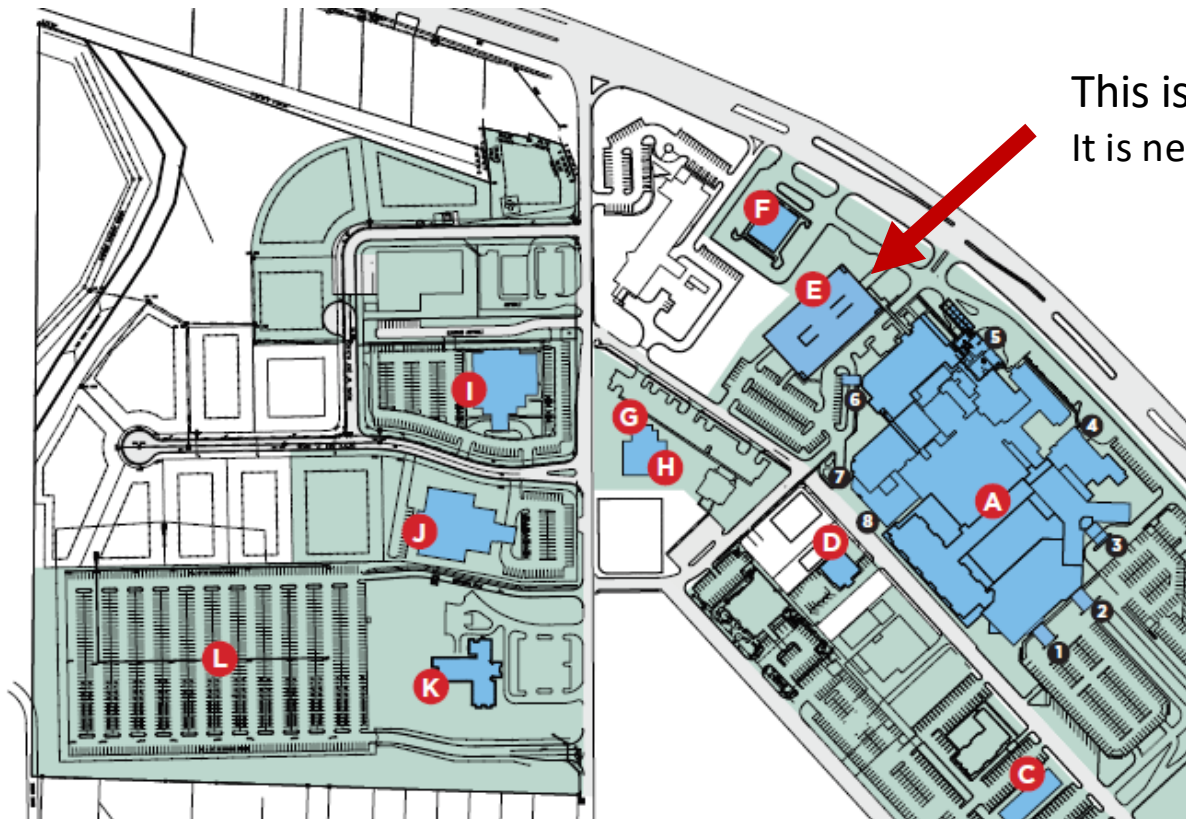
All staff, instructors, and students working on **dayshift** (7am-7pm) must park in the employee parking lot Monday – Friday.

The Employee parking lot is building **L** below. It is off Haven Drive behind the Child Development Center (building **K**).



Parking: Weekends & Nightshift

Staff or students that are working on the weekends and/or on night shift (7pm – 7am) **may park in the WEST PARKING GARAGE** on levels 2, 3, and 4. *(Do not park on the first level – that is part of E.R.'s parking)*



This is the WEST parking garage.
It is near the E.R. and Outpatient.

The Student Role (Student Job Description)

Reports to: College Instructor or Southeast Health assigned preceptor/personnel

Role Summary: Under the direct supervision of an assigned faculty member or preceptor the student is responsible for providing limited care to those patients assigned by the faculty or preceptor.

Student Responsibilities

Students:

- should notify their clinical instructor if they are unable to meet their scheduled clinical rotation.
- **MUST** sign a confidentiality statement and **MUST** always maintain patient confidentiality.
- must have their school identification badges visible at all times while on hospital premises.
- must verify procedures/treatments with the nurse/Southeast Health preceptor prior to implementing the procedure or treatment.
- must inform the nurse/Southeast Health preceptor whenever they are off the unit/floor for breaks, meals, classes or any other reason.
- must inform the nurse/Southeast Health preceptor when they leave for the day/shift.
- must wear lab coats and name tags on non-clinical days when gathering patient information. Jeans are NOT allowed.
- should identify the patient prior to the implementation of ANY procedure (use patient's name and account number).
- adhere to Southeast Health policies and procedures, including dress code, personal hygiene and impaired healthcare provider)
- maintain professional conduct and exhibit Southeast Health 5 Priorities and 6 Ground Rules at all times while on clinical rotation within the hospital or on hospital property
- immediately notify faculty or preceptor of any personal illness, injury or accident while performing clinicals.

The Student Role

Student Restrictions

The student **CANNOT**:

- Witness any legal documents
- Ask nursing staff to enter their codes to perform CBGs or to chart in our computerized charting system
- Confirm medication orders
- ***Write verbal/telephone/Appropriate Physician (APO) orders***
- Discontinue medications
- Set up or refill PCA/Epidural equipment
- Administer chemotherapy agents
- Take verbal or phone orders
- Administer or discontinue blood or blood products
- Be a witness to the wasting of medications
- ***Give a medication unless they are in the presence of their college instructor or a Southeast Health licensed employee***
- ***Perform a procedure unless supervised by their college instructor, Southeast Health licensed personnel or Southeast Health assigned preceptor***

Note: Southeast Health will make every effort to meet clinical rotations/preceptor requests; however, we reserve the right to grant or deny schedule requests based on, but not limited to, patient census, staff assignments or the Director's discretion.

The Student Role

Student Description

Student Qualification

Currently enrolled in an education program to attain a health care or related degree/certificate.

Typical Working Conditions

The student must be able to function in a variety of environmental conditions which include: biohazards, infectious diseases, electrical hazards associated with patient care equipment, working with hands in water, and working with or near the deceased.

Typical Physical Requirements

Requires full range of body motion including handling and lifting patients, manual and finger dexterity/sensation, and reaching and hand-eye coordination. Requires standing and walking for an extensive period of time. Occasionally lifts, carries and pushes items weighing up to 50 pounds. Requires corrected vision and hearing to normal range. Requires working under stressful conditions or working irregular hours.

The student must meet the essential physical demands of the assigned job.

The Student Role

Student/Instructor Health Record

The following health information *should be on record with the college/school*.

It should be available within a four (4) hour period upon request from Southeast Health:

- Copy of college's professional liability insurance (that covers the student)
- Immunization records that must include:
 - Tdap, rubella, measles, mumps vaccinations
 - Hepatitis B vaccination or an acceptable titer (or may sign our waiver)
 - Flu shot verification (or S.E.H exemption) AND Covid Vaccine (or S.E.H exemption)
 - TB Testing (TB skin test, T-spot, QuantiFERON-TB Gold)
 - *Proof that it was done within one year of the student's first clinical rotation at Southeast Health; NOT repeated yearly.*
- Statement from physician attesting to physical fitness
- Criminal background check (within one year)
- Drug test clearance (within one year)
- Proof of successful Fit-test for N95 or KN95 (if caring for patients in the main hospital campus)

Summary – Agreement

Summary - Agreement

While working or having a clinical experience at Southeast Health, I understand that I will be expected to follow the policies, procedures and guidelines of the organization.

If I violate any of these expectations I could be dismissed from clinical rotations or work at Southeast Health and this could impact future employment opportunities.

Questions?

Please contact Organizational Development at 793-8008 or Human Resources at 793-8001.



Welcome to the team!

