



N.E.W. Orientation Packet
For Non-Employed Workers



Completing this orientation self-study will satisfy the requirements and objectives for Scotland Health Care System Orientation.

This orientation is suitable for:

Contract Personnel, Students, Interns, Agency employees, Volunteers and Consultants in our organization.

Please do not write on this packet. If you don't have an answer sheet, please use notebook paper. Thank you.

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**This self-study needs to be completed
before you begin working in your department.**

Orientation Self-study Instructions

1. **Review** the Orientation Self-study material.
2. **Complete** the Orientation Questionnaire.
3. **Sign** the following forms and submit them to Scotland Health Care System, where they will be kept on file:
 - (a) Orientation Roster
 - (b) Security and Confidentiality Form
4. **Complete** the following forms:
 - (a) Orientation Evaluation Form
 - (b) Orientation Checklist

Group	Submit To:
Consultants, volunteers, contract and agency personnel	Scotland Health Education Department: (choose one method of submission) <ul style="list-style-type: none"> • Interdepartmental envelope • Fax to 910-291-7948 • Mail to Education Department Scotland Health Care System, 500 Lauchwood Drive, Laurinburg NC 28352
On-site contract groups Student and intern groups	Education Department Students also need to give copy to faculty

5. **Send** the completed **Evaluation Form** to the Education Department (see options above).
6. Contact the Department Manager for Department Specific Orientation.

If you have any questions about this self-study, contact Brenda Sangster, Scotland Health Care System Education Department, at 910-291-7316.

Objectives for Orientation

After reviewing the following information, learners will be able to:

- Describe Scotland Health Care System’s Mission, Vision, and Values.
- Discuss customer service expectations.
- Identify infection control and safety principles related to the environment of care.



Shared mission, vision, and values.

Mission: *We provide high quality, compassionate health care.*

Vision: *We are the community's healthcare provider of choice.*

Values: *We stand for Excellence, Integrity, and Community Accountability.*

Joint Commission on Accreditation of Healthcare Organizations (JCAHO)

The Importance of Accreditation

- Important public statement of accountability
- Required by most third-party payers
- Required by Medicare/Medicaid
- Managed Care
- Employers
- Other Third-Party Payers
- Aids in recruitment of high-quality staff and physicians
- Bond ratings and financial options enhanced
- Fulfills state licensure requirements

JCAHO Representatives from:

- The American College of Surgeons
- The American Medical Association
- The American College of Physicians
- The American Dental Association
- The American Hospital Association

The Role of Scotland Health Care System Staff

- Know and abide by the organization's policies and procedures
- Comply with Federal Laws and Regulations
- Be able to talk about your role in the organization
- Participate in improvement efforts
- Perform appropriately during emergencies
- Prompt reporting of:
 - Equipment failures
 - Errors
 - Non-properly functioning equipment
 - Spills

Customer Service Standards

THE CUSTOMER

Any individuals with whom we come in contact, including the patient, patient family, physician, employee, volunteer, vendor, or other visitor or contact of Scotland Health Care System.

ALL INTERACTIONS

In all interactions with customers, we are expected to:

- Address the customer with respect, use proper name, and avoid terms of endearment such as “sweetie”, “dear”, “honey”
- Focus on the customer being served
- Respect the customer’s privacy
- Demonstrate understanding for the customer’s anxiety
- If interrupted when providing service, apologize to the customer
- When an error in service is discovered, correct the error without a negative reflection on the person or department responsible for the error
- If unable to meet the customer’s need, offer alternative solutions
- Keep promises made to the customer, or if unable, explain the reason to the customer
- Do not offer opinions, information or expressions that reflect negatively on Scotland Health Care System or any other healthcare provider or organization
- Recognize that our customers’ perceptions of Scotland Health Care System are influenced by our conduct, whether on or off duty

FACE TO FACE INTERACTIONS

In all face-to-face interactions, we are expected to:

- Smile
- Introduce self and explain role
- Greet with a “Hello, how may I help you?”
- Maintain eye contact
- Apologize to the customer for waits or other service inconvenience
- Offer assistance to any customer appearing to need assistance, including escort assistance
- Do not be defensive

TELEPHONE INTERACTIONS

In telephone interactions, we are expected to:

- Limit use of voice mail during regular service hours by offering alternatives for service
- Answer telephones promptly by the third ring
- Answer call bells in an appropriate and timely manner
- Identify self and department
- Maintain a pleasant tone throughout the conversation
- When placing a customer on hold, explain the reason
- When returning to a customer on hold, apologize for any delay and thank them for holding
- When transferring a call, advise the customer, and advise the receiving party who is being transferred and why
- If the person needed to serve the customer is not available, advise the customer and offer alternatives, including referral to another person or taking a message

FACILITY/ENVIRONMENT

We are expected to:

- Maintain a neat, clean and safe work area
- Advise supervisor when equipment and furnishings are in need of repair or replacement
- Accept responsibility for safety and cleanliness of any area in which they come in contact – everyone picks up
- Keep noise, including verbal communications, to a minimum

Corporate Compliance

CORPORATE COMPLIANCE INVOLVES:

- Helping employees apply laws and regulations to our workplace
- A way to prevent, detect, and keeping us on the “right track”
- Disciplinary action for failure to follow requirements

YOUR ROLE

- Take responsibility for what you do
- Follow policy and procedure
- Ask questions
- Report problems
- Participate in compliance education programs
- Follow the Code of Ethics

REPORTING CONCERNS

- Contact your supervisor or
- Contact the compliance official (Ruth Glaser, VP of Operations) at **910-291-7502** or
- Call the anonymous, confidential 24-hour Corporate Compliance Hotline at **910-291-7025.**

These phone lines help you to:

- Forward concerns for review so appropriate action can be taken
- Report issues such as employee relations, patient rights, discrimination, conflicts of interest, theft and fraud, compromised professional standards of practice, billing and/or coding problems

LOCATION OF CORPORATE COMPLIANCE POLICY:

- Located in the Administrative Policy Manual in the Right to Know Station

Confidentiality

INFORMATION CONFIDENTIALITY

You may have contact with confidential (private) information about Scotland Health Care system patients, employees, doctors or visitors.

Examples of confidential information include:

- Details about illnesses or conditions
- Conversations between a patient and health-care provider
- Patient demographics – name, address, phone number
- Patient insurance and financial information

PROTECTING CONFIDENTIALITY

Here are some guidelines to keep information secure and confidential:

- Don't talk about patients in public
- Be careful not to put confidential information in the trash
- Use a cover sheet when faxing confidential information
- Don't leave files with confidential information in open view

Remember: If you think that certain information might be confidential, treat it as such.

ACCESS TO AND REQUESTS FOR CONFIDENTIAL INFORMATION

Access to confidential information (medical records, on-line laboratory results, x-rays or other imaging procedures, financial information, addresses, phone numbers, etc.) is limited to employees who need the information **in order to perform their job duties.**

COMPUTER USE

- Never let others use your computer log-on or password
- Never write down or post your password
- Never display confidential information on a computer screen in public view

CONFIDENTIALITY VIOLATIONS

- Failure to follow Scotland Health Care System's privacy or security policies and procedures can lead to disciplinary action, including termination
- Anyone who witnesses a breach of confidentiality should report the incident to the Scotland Health Care system Privacy Official.

WHAT IS HIPAA (HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT)?

HIPAA is a federal law enacted to protect patient health information in all forms which includes written, verbal (what is spoken and heard), and electronic.

WHY WAS HIPAA CREATED?

- To protect the privacy and security of all health care information
- To provide our patients with a series of rights for their health information

WHAT HAPPENS IF PRIVACY RIGHTS ARE VIOLATED?

Patients have the right to complain if they feel their privacy rights have been violated

- All privacy complaints should be reported to the Scotland Health Care system Privacy Official
- The Privacy Official has been designated to respond to privacy complaints
- If you have questions about HIPAA, call the Privacy Official (910-291-7502) or Security Official (910-291-7525)

Incident Reporting

An Incident Report Form should be completed to report any incidents:

- Fill it out legibly
- Be brief, factual, and objective
- Don't be judgmental or opinionated

REMEMBER!

The Incident Report Form...

- Is confidential
- Is NOT part of the medical record and should not be referenced in the medical record
- Is never copied or printed
- Is not placed in an employee's personal record

Be sure to appropriately report adverse reactions.

If something happens to a visitor, notify Risk Management/Customer Relations and complete the appropriate Incident Report Form.

Emergency Preparedness

There are three policies in the Environment of Care Manual which relate to Scotland Memorial Hospital's emergency preparedness. These three policies are:

- Emergency Preparedness Management Plan
- Emergency Preparedness – “Dr. Big”
- Family Practice Centers' Emergency and Disaster Preparedness

Our Emergency Preparedness Management Program is designed to provide guidance, resources and training that will be necessary to fulfill our roles in the event of a disaster or other situation that affects operations of the hospital.

The Emergency Preparedness Management Plan may be activated in response to a variety of emergency situations including:

1. Fires
2. Hurricanes, tornadoes, and other forms of threatening weather
3. Bomb threats
4. Any external disaster that creates a large number of casualties

The Emergency Management Preparedness Plan will be tested at least twice annually by means of a drill where “Dr. Big is in effect” will be announced three times by an overhead paging system. You may be involved in such a drill.

The Disaster Control Center is the Hospital's Board Room. The phone extension is 7503.

Any department that is not specifically mentioned in the Disaster Plan Policy will be on STANDBY.

Ergonomics

ERGONOMICS is the science of fitting jobs to the people who work in them.

THE GOAL of Ergonomics is to reduce work related ***musculoskeletal disorders (MSD's)***.

- Injuries and illnesses that affect muscles, nerves, tendons, ligaments, joints, or spinal discs.
- Possible signs and symptoms include:
 - Painful joints
 - Back or neck pain
 - Tingling or numbness
 - Burning sensation
 - Shooting or stabbing pains in arms or legs
 - Swelling or inflammation
 - Stiffness
 - Pain in wrists, shoulders, knees or forearms

MSD RISK FACTORS

- Repetition
 - ◆ Doing the same motions over and over
- Forceful Exertions
 - ◆ Amount of physical effort needed to do a task
- Awkward Postures
 - ◆ Body position during work
 - ◆ Risk depends on what is done and repetition of awkward postures
- Contact Stress
 - ◆ Pressing a body part against a hard or sharp surface
- Vibration
 - ◆ Operation of vibrating tools

AVOID SUSTAINED POSTURES

- Vary position and activities frequently
- Take stretch/movement breaks every 30-60 minutes

PROPER LIFTING

- Plan the move
- Keep weight close
- Use a wide base of support
- Avoid twisting or jerking
- Bend knees & lift with legs
- Get help when needed (co-worker, instruct patient)
- Use devices when needed (mechanical patient lift, dolly, cart)
- Maintain curve in low back and neck

TRANSPORTING HEAVY OBJECTS

- Use wheels when possible
- Push instead of pull
- Roll or slide instead of pull

ERGONOMIC COMPUTER WORKSTATION DESIGN

- Place monitor in front of keyboard and chair with top of screen at eye height
- Documents and monitor at equal distances
- Phone on non-dominant side – do not cradle phone between shoulder and ear
- Keyboard, mouse, and phone placed so elbows are close to side during use – do not reach away for these items
- Sit back in chair to get low back support
- Adjust seat height so knees are at the height of hips or slightly lower

Safety and Security

Scotland Health Care system strives to provide a safe and secure environment for its customers and staff. Workers take an active role in the security program to insure its success.

TIPS FOR STAYING SAFE

- Be aware of your surroundings
- Recognize potentially dangerous situations
- Lock your vehicle and keep valuables out of sight
- Walk to parking areas in groups
- Leave valuables at home or secured at work
- Property should be secured or attended

SECURITY IS EVERYONE'S RESPONSIBILITY

- Wear your I.D. badge
- Report visitor problems
- Do not prop exterior doors open
- Report theft or incidents
- Report suspicious persons, vehicles, and activities

Dial Security at extension 7007 to report a non-medical emergency.

Off-site facilities dial 911 for emergencies.

Scotland Health Care System strives to maintain a work environment free from intimidation, threats, or violent acts. Disciplinary measures and/or legal action will be taken when appropriate. ***No violent act will be tolerated.***

Weapons of any type are prohibited from any property owned or leased by Scotland Health Care System

- Signs are posted for visitors and staff
- Notify security if you suspect anyone is carrying a weapon
- Any employee who violates this policy will be terminated

Do not tolerate threats. They may be the first step before action is taken!

Dr. Search

Scotland Health Care System is very concerned about the safety of our patients, visitors, and associates. Any call reporting a bomb threat must be treated very seriously. If you receive such a phone call, remain calm and follow these guidelines:

- Keep the caller on the line as long as possible
- Note any voice characteristics
- Identify if they are male or female
- Recognize any special speech dialects
- Listen for any background noises
- Record the time of call
- Ask where the bomb is and what type of bomb it is
- **Call Security at extension 7007 IMMEDIATELY**

Code Pink

If you see anyone who looks suspicious or if you think a baby has been stolen, dial the hospital operator (0) and ask to have a “Code Pink” announced on the overhead page. Give the location of the suspicious person and any other information you may have.

When a Code Pink is announced overhead, all available hospital associates are instructed to go to the nearest exit or hallway. Anyone seen carrying an infant should be reported to the Security Department. Associates are to remain in their positions until the “All Clear” announcement is made by the switchboard operator.

Family Domestic Violence

Some **signs** that may indicate violence or abuse include but are not limited to:

CHILDREN

- Overly quiet or passive behavior
- Bruise pattern on arms, back
- Frequent visits to the Emergency Center for trauma
- Multiple dislocations/broken bones
- Lack of supervision
- Inappropriate clothing
- Poor hygiene

CRIMINAL DOMESTIC VIOLENCE

- Choke marks on throat
- Suicide attempt
- Defensiveness, anger
- Lack of or fearful eye contact

DISABLED ADULTS/ELDERLY

- Decubiti
- Medication misuse
- Hunger, soiled clothing, malnutrition

Report any neglect, abuse, or suspicion to your manager, social worker, or local agency.

Fire Safety

We Are the First Line of Defense! You should know:

- The location of fire pull stations, emergency exits, and fire extinguishers
- How to report a fire
- The emergency number to call in case of fire
- How to respond to a fire alarm

FIRE HAZARDS INCLUDE

- Smoking
- Oxygen, compressed gases
- Flammable substances
- Faulty electrical equipment or wiring
- Improper use of extension cords
- Patient's appliances from home
- Combustibles (i.e., rubbish, latex gloves, rags, linens)
- Grease from cooking
- Lint from laundry

PREVENTION

- Inspect your work area for hazards regularly
- Report hazards to your supervisor or safety manager
- Help enforce smoking rules
- Do not leave microwave cooking unattended, especially popcorn
- Use of personal and portable electric heaters are prohibited
- Fire/smoke doors must not be blocked, propped, or obstructed in any way
- Follow policy for surgical procedures involving oxygen and a heat source
- Keep equipment that can spark away from areas with oxygen
- Storage cylinders must be in an approved rack or cart at all times
- Do not store combustible materials within 5 feet of oxygen

Suspect a fire? Smell smoke?

Perform R.A.C.E.

Remove anyone from a place of immediate danger to the nearest safe area.

- Do not go through closed fire doors
- Never use the elevators unless the fire department tells you to do so

Alert or Alarm others

- Pull the red fire alarm pull box
- Call 811 and give exact location of fire. The Operator will page "Dr. Red"

Contain the fire

- Close doors & windows
- Ask visitors to stay where they are

Extinguish the fire

- Get closest fire extinguisher
- Use only if safe to do so using the **PASS** method:
 - P**ull the pin on the fire extinguisher
 - A**im the fire extinguisher hose at base of fire
 - S**queeze handle
 - S**weep hose/nozzle from side to side

Electrical Safety

Everyone shares the responsibility of electrical safety to reduce shocks, burns, fires, and outages.

Workers should follow the following electrical principles:

- Equipment in patient care areas should be grounded (i.e. a plug with 3 prongs), and UL-listed
- **DO NOT** use extension cords in patient care areas
- **Turn equipment off** before unplugging
- **Disconnect cord** from outlet by grasping and pulling the PLUG

BIOMEDICAL (PATIENT CARE) EQUIPMENT

- All employees must be in-serviced prior to use
- If the power goes out, ensure that all essential equipment is plugged into the emergency outlets. (Red or Orange in the Operating Room or C-Section area)
- Some equipment should always be plugged into a red outlet.
 - Ventilators
 - Suction machines
 - Specialty beds
 - Defibrillators
 - Nurse Call System
- When equipment is identified as a potential hazard or problem, be sure to turn the equipment off, unplug, mark or label as out of service, and report it to engineering.

PROBLEMS MAY INCLUDE

- cut or frayed wires or plugs
- feels or smells like overheating
- shock felt during use
- dropped or physically damaged
- liquid spilled on electrical components
- any other equipment problems or failures

Hazard Communication

Your “**right to know**” protects you as a worker.

INVENTORY LIST OF CHEMICALS

An **inventory list** of all current chemicals (including gases and products containing chemicals) is available in each department. Be familiar with your list of chemicals.

MATERIAL SAFETY DATA SHEETS

Provided by the manufacturer and describe the chemical composition, characteristics, potential health, physical hazards, and other information on their product. **Material Safety Data Sheets** are located in the Environment of Care Manual and must be readily available to you.

LABELING

Required on all hazardous chemicals entering our facilities. This includes:

- Name of product
- Specific hazard warnings (i.e. do not get in the eyes)
- Name and address of manufacturer

Re-label containers when removing chemicals from the original

- Name of product
- Specific hazard warnings
- Date transferred
- Name of person who transferred the material

LABEL ALL CONTAINERS – even water. No one should guess what’s inside.

The National Fire Protection Association’s (NFPA) diamond is used for quantities of dangerous chemicals. The danger is identified by the number inside the color diamond on the sign. The higher the number, the greater the hazard (between 4 and 0). The type of hazard is identified by the color.

Other Health Hazard Symbols:

Identifies materials that are **Radioactive**.



Identifies hazardous **Biological** materials.



Gas Cylinders

Many gases, such as nitrogen and oxygen, are used in our facilities. In order to transport, store, and use these gases, they are "bottled" under great pressure in tanks called gas cylinders.

- Store in the approved rack or cart at all times
- Handle carefully to prevent damage when moved or used
- Never put the tank in the bed with a patient
- Read the warning label and the MSDS for safe handling

Controlling Physical and Health Hazards

Product Substitution: Less toxic chemicals can be substituted to do similar jobs. For example, the replacement of mercury containing products.

Engineering Controls: Well-designed work areas minimize exposure to materials that are hazardous. Examples are exhaust systems and fume hoods.

Safe Work Practices: Use safe work practices to ensure that chemicals are used correctly and safely.

Personal Protective Equipment: Masks, eye protection, gowns, gloves, aprons, and other protective equipment and clothing are designed to protect you while you work.

Training and Communication: You have a “**right to know**”, but you also have a responsibility to use the knowledge and skills to work safely!

Environmental Monitoring: Some departments perform environmental monitoring to ensure hazardous chemicals do not exceed established acceptable exposure limits.

Personal Monitoring: Some departments perform personal monitoring. You can also monitor yourself by watching for physical symptoms that indicate overexposure to any hazardous chemical. Symptoms, such as skin rashes, dizziness, eye or throat irritations, or strong odors, should be reported to your supervisor.

Personal Awareness: Make an effort to know the location of an Eye Wash Station close to or within your area. In case of a personal injury, eye wash stations are provided throughout our facilities.

Hazardous Spills Procedure

- Contain the spill if it can be done safely
- Check the MSDS before taking additional steps

If you don't know how to handle the spill, don't try. Call the operator and ask to have a “Code Yellow” announced on the overhead paging system.

Common Chemicals at Scotland Health Care System

Office:	Copier toners, white out, cleaners
Clinical Areas:	Disinfectants, alcohol, chemotherapeutic agents, medical gases
Central Supply:	Ethylene oxide, chemosterilants, disinfectants
Environmental Services:	Cleaners, disinfectants
Laboratory:	Acids, bases, solvents, toxic materials
Plant Engineering:	HVAC chemicals, degreasers, paint
Radiology:	Film fixer, developers
Surgery:	Anesthetic agents

Infection Control Basics

In the healthcare setting, patients, employees, and visitors are at risk for infections.

INFECTION CONTROL AND PREVENTION

Measures are set to minimize the risk of the spread of infections including:

- Proper Hand Hygiene
- Staying healthy

UPDATING DEFINITIONS

- **Hand Hygiene** – a general term for washing with soap, antiseptic agent, or using an antiseptic handrub (waterless product - Alcare)
- **Hand Antisepsis** – refers to either antiseptic handwash or antiseptic handrub
- **Antiseptic Agent** – antimicrobial substances to reduce the number of microbial flora. For example: alcohols, chlorine, hexachlorophene, triclosan
- **Handwashing** – washing hands with plain soap and water

GUIDELINES FOR USE

- Routine use of waterless antiseptic products is recommended if hands are not visibly soiled
- When visibly soiled, wash hands with soap and water
- Use waterless products when time or access to handwashing facilities is an issue

ROUTINELY PRACTICE HAND HYGIENE

- When the hands are visibly soiled
- After performing personal hygiene activities (i.e., toileting, sneezing, coughing, and combing hair)
- Before eating, drinking, or handling food
- As outlined in Standard Precautions

HOW TO WASH YOUR HANDS

- Turn on water to comfortable temperature
- Have paper towel available
- Wet hands
- Apply soap
- Use friction rubbing for at least 10-15 seconds
- Rinse hands well under running water
- Dry hands thoroughly with paper towel
- Use paper towel to turn off faucet and discard

How To Use A Waterless Product

- Apply the product to the palm
- Rub hands together, covering all surfaces of hands and fingers until hands are dry (12-25 seconds)

Do not report to work if you have any communicable disease.

Standard Precautions

- Are designed for the care of **all** patients, regardless of a known infection status
- Are to be followed for contact with: blood, all body substances, non-intact skin, mucous membranes, contaminated items
- Are used in all healthcare settings
- Are used for known and unknown infection sources

Standard Precautions Include:

Handwashing or Hand antisepsis

There are additional times to use hand hygiene in the patient care areas. Use the provided **hospital approved** lotion to prevent chapping and drying of hands.

Gloves are an adjunct to, not a substitute for hand hygiene

Wearing Personal Protective Equipment (PPE)

Wear the appropriate PPE for suspected exposure.

Equipment Handling and Cleaning

Environmental Controls

Preventing exposure to Bloodborne diseases

Transmission-Based Precautions

Used in addition to Standard Precautions for patients who have important nosocomial infections, highly contagious infections, or patients with weak immune systems.

There are three categories of precautions:

Contact Precautions

Most of these diseases are spread when healthcare workers fail to perform good hand hygiene!

Airborne Precautions

Droplet Precautions

Your role in helping to prevent the spread of infections is to
FOLLOW INSTRUCTIONS POSTED ON THE PATIENT'S DOOR

Bloodborne Pathogens

- Bloodborne pathogens (BBPs) are disease-causing germs carried by blood and other body fluids and can cause disease in humans.
- Human immunodeficiency virus (HIV), hepatitis B virus (HBV), and hepatitis C virus (HCV) are the most common bloodborne pathogens.

BLOODBORNE PATHOGENS ARE SPREAD BY:

- Puncture wounds/needlesticks
- Splash to mucous membranes or open areas of skin
- Sexual contact
- Mother to baby

HIV - the virus that causes AIDS

The average risk for healthcare workers after exposure to HIV is about 1 in 300.

Symptoms include

- Flu-like symptoms
- Fever
- Diarrhea
- Fatigue
- Swollen lymph nodes
- Night sweats

HEPATITIS B VIRUS – is the greatest risk to healthcare workers after exposure

May cause severe illness, liver damage, and death. Hepatitis B virus can live up to 7 days at room temperature on an environmental surface in dried blood.

Symptoms include

- Fatigue
- Jaundice
- Abnormal liver tests
- Nausea
- Abdominal pain
- Loss of appetite

HEPATITIS C VIRUS

Recognized as an important bloodborne pathogen in healthcare workers. Previously known as non-A, non-B hepatitis.

Symptoms include

- Anorexia
- Vague abdominal discomfort
- Nausea
- Vomiting
- Jaundice

Personal Protective Equipment (PPEs)

PPE = Special clothing or equipment worn by an employee for protection against a potential hazard. Use PPE when there is a potential for exposure.

REMEMBER

- If blood or body substances penetrate PPE, remove it immediately or as soon as possible
- Remove all personal protective equipment prior to leaving the work area

HAZARD COMMUNICATION

- The universal biohazard symbol is used to identify biohazardous materials.
- Workers need to place material with potential bloodborne disease in containers marked with the biohazard symbol.

INADVERTENT EXPOSURES

EXPOSURE INCIDENT: Specific eye, mouth, other mucous membrane, non-intact skin, or parental contact with blood or other potentially infectious materials (OPIM) that result from the performance of an employee's duties.

Steps to follow for a Suspected Exposure

1. Immediately wash the affected area with soap and water
2. Notify your supervisor
3. Complete an Incident Form
4. Report to appropriate area (Employee Occupational Health or Emergency Department) as soon as possible to start recommended treatment when indicated. There will be a confidential medical evaluation after exposure.

Immunizations – Hepatitis B Protection

It is safe and effective against Hepatitis B

Tuberculosis (TB)

TB is primarily a lung disease caused by the Mycobacterium tuberculosis bacteria

SPREAD BY

- Coughing, sneezing, talking, singing, etc.
- Carried in airborne particles
- Air currents can keep them in the air

PEOPLE WHO ARE AT RISK FOR TB INCLUDE

- Those in close contact with a TB infected person
- AIDS/HIV infected persons
- Elderly persons
- Alcoholics and IV drug abusers
- Long term care and correctional facility residents
- Foreign born persons from high prevalence countries
- Medically underserved, low income population, high risk minorities

TB Infection means that an individual has inhaled the TB germ and has become infected. However, the body fights the bacteria to stop them from growing. The infected person:

- Cannot spread TB to others
- Has a positive TB skin test
- Does not have symptoms

The bacteria may become active later and cause TB disease.

TB Disease means an individual has inhaled the TB germ and has become infectious. The infectious person:

- Is contagious and can spread TB
- Has a positive TB skin test
- Has an abnormal chest X-ray
- Has bacteria (*Mycobacterium tuberculosis*) in sputum
- May have any of the following:
 - Night sweats
 - Cough (which can sometimes bring up blood)
 - Fever and Chills
 - Weight Loss
 - Fatigue

TREATMENT

Differs for persons with active or inactive disease. There are strains of TB that are drug resistant. People with these are more contagious and difficult to cure.

The TB exposure Control Plan protects you against exposure to TB and includes:

- Early recognition and identification
- Management of TB patients
- Engineering controls
- Respiratory protection
- Healthcare worker screening/counseling



HIPAA Privacy & Security Rules

Corporate Privacy, Information Security, and Employee Development

This self-directed learning module contains information you are expected to know to protect our patients, our guests, and yourself.

Target Audience: All Scotland Health Care System associates, students, volunteers and physicians

Contents

- Learning Objectives
- Privacy Module Content
- Security Module Content
- Post Test

"Keep It To Yourself"

INSTRUCTIONS

This module provides general information and procedures about safeguarding patient health information. Please:

- Read this module
- Ask your supervisor if you have any questions about the material
- Complete the post test for this module.
- Return the post test to the Education Department
- Contact your supervisor after completing this module to obtain information about department specific policies and procedures

LEARNING OBJECTIVES

When you finish this module, you will be able to:

- Define “HIPAA Privacy” & “HIPAA Security”
- Name several examples of patient identifiers
- Describe the function of information security
- Describe your role/responsibilities for HIPAA Privacy and Security compliance
- Know the Scotland Health Care System Privacy Official and Security Official
- List ways to ensure a patient’s privacy/confidentiality and protect their electronic patient information
- Discuss the steps to follow if you have a question or concern about the privacy standard
- Locate the Scotland Health Care System HIPAA Privacy and Security Policies and Procedures Manual
- List precautions to take when transmitting patient information via the Internet

What is HIPAA?

The Health Insurance Portability and Accountability Act (HIPAA) is a federal law enacted by Congress in 1996. The Act requires the Department of Health and Human Services (DHHS) to issue rules for the following:

- Transaction Standards
- Standard Code Sets
- Unique Health Identifiers
- Privacy – the patients right to keep their health information private
- Security – the means (process and technology) by which an entity protects electronic health information from tampering, destruction, or inappropriate access

WHAT IS THE HIPAA PRIVACY RULE?

HIPAA is a federal law implemented in part to safeguard patient information. The law governs the protection of patient information in any form: written, electronic, or oral.








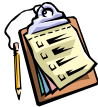
Protected Health Information (PHI) is Individually Identifiable Health Information. In other words, it is medical information that can be tied directly to a particular patient. Patient Identifiers are those items that tie a patient to health information, and conversely, are those items used to “de-identify” health information. Some examples of patient identifiers are:

- Name
- Address (including street address, city, county, and last two digits of the zip code)
- Names of relatives and employers
- Birth date
- Telephone numbers
- Fax number
- E-mail address
- Social Security number
- Medical record number
- Health plan beneficiary number
- Account number
- Certificate/License number
- Serial number of any vehicle or other device
- Electronic mail addresses
- Web Universal Resource Locators – URLs
- Fingerprints
- Voice recordings
- Photographic images
- Any other characteristics which may identify the person

Patient identifiers may not be limited to the previous list especially where the volume of patients is small or unique. Examples may include the following:

- Referring to the patient by diagnosis where the patient is the only one treated for that specific diagnosis.
- Indicating a certain individual is seen at a particular practice or clinic when the diagnosis is sensitive or unique, such as infertility or infectious disease.
- Referencing “a patient who underwent a laparoscopic cholecystectomy last week” may not individually identify a patient at a large healthcare facility where the procedure is performed many times a day on many different patients. However, a similar statement at a small facility might specifically identify one patient, since the procedure has only been performed once in the last six months.

COMMON NON-COMPLIANT PRACTICES

<p>Patient name left on answering machine.</p> 	<p>Sign-in sheets that reveal a patient's diagnosis by requesting reason for visit or doctor's name.</p> 	<p>Discussion of PHI in waiting room with patient.</p> 
<p>Inappropriate disposal of PHI.</p> 	<p>Patient's first & last names used when paging.</p> 	<p>Shred bin not locked or emptied</p> 
<p>Unattended Workstations with PHI.</p> 	<p>Logs/schedules left unattended.</p> 	

A COUPLE OF OTHER TERMS

Authorized use. Health care providers may use a patient's protected health information for the purposes of treatment, payment or health care operations. These are considered authorized uses, and no accounting of these uses has to be made.

Disclosure. Generally speaking, disclosures of PHI are not authorized uses. All disclosures must be accounted for. A patient has a right to know when his PHI was disclosed, and for what purpose. We are not required to track authorized uses of PHI, but we are required to track disclosures.

Inadvertent disclosure. Sometimes, an unauthorized person will gain access to PHI – they might overhear a conversation, or accidentally see some piece of patient information. If there is no willful intent to disclose the information, this might be considered an inadvertent disclosure, and no further action taken.

How does this law apply to me?

As health care employees, students, volunteers, etc (workforce), we hear, see, speak, and have access to patient information on a daily basis. It is our responsibility to help protect a patient's privacy by safeguarding the information in which we come in contact. For example, a conversation in a waiting room area between a health care provider and a patient's family about the patient's impending surgery which could be overheard by other patients in the waiting room could be a violation of the Privacy law. This conversation more appropriately should be conducted in a manner to prevent a third party from overhearing. You can prevent further disclosure by not discussing the overheard information with other staff, friends, family, and etc., and by reporting such an event to your supervisor.

Follow these guidelines to avoid the unauthorized disclosure of protected patient information in your day-to-day activities:

Hearing



- Avoid discussions concerning patient information in public areas such as the cafeteria, elevator, or hallways or on mobile phones or in electronic mail messages.
- Speak in hushed tones particularly in curtained and open treatment areas, registration areas, semi-private rooms, etc.
- Do not discuss patient, family, or employee medical information with anyone who is not involved in the patient's care without specific authorization from the patient to do so.

Seeing



- Avoid faxing patient health information to unsecured locations.
- Immediately remove faxed information from the fax machine.
- Position computer screens to protect against casual viewing by third parties.
- Shred or dispose of patient information using confidential bins provided throughout your facility.
- Appropriately limit the patient information used on sign-in sheets, etc. Diagnosis or chief complaint should never be included by inference or out right.

Talking



- Do not leave messages which:
 - Contain laboratory and test results.
 - Link a patient's name with clues about his/her diagnosis or medical condition.
- Avoid leaving detailed appointment reminders or information that might indicate the diagnosis, type of test, type of clinic or specialist the patient is seeing.

- Exercise caution when leaving a message for a patient particularly if the condition or treatment involves issues that are often more personal (i.e., those related to psychotherapy, infertility, substance abuse, pregnancy, or HIV)
- When a companion accompanies the patient to the treatment area and sensitive information is to be discussed, ask the patient if you can discuss the information in front of their companion.

Access



- Do not leave patient files, reports, or other information unattended or uncovered where staff or the public, without a need to know, can access the patient information.
- Limit access to the patient's chart and medical record to the medical team involved in the patient's care.
- Obtain or verify written authorization prior to releasing patient information.
- Seek advice from Corporate Privacy before disclosing patient medical records and related patient-identifiable health information to anyone other than the patient or the patient's designee.
- Do not use or share patient information for your own professional or personal use.
- Do not look up your records, records of a friend or other patients' records unless you are involved in treatment, payment or healthcare operations for that patient.
- Keep computer passwords confidential.
- Do not leave computer programs or e-mail programs open in the event another individual may gain unauthorized access.
- When disposing of old computers, remove all patient records, billing information, and patient health information stored in the computer.
- Ensure computer disks with patient health information are maintained, used and destroyed in such a manner that no one will use the information improperly, such as selling the data to a marketing or pharmaceutical company. Should you have questions regarding the disposal process, please contact Information Systems.
- Secure computer stations to minimize the ability to view and read the computer screen.
- Misuse and non-patient authorized disclosures must be reported to your supervisor. The supervisor will then notify the Privacy and Security official for completion of a Security Incident Report.

HIPAA PRIVACY LAW SINCE APRIL 14, 2003

"Keep It To Yourself"
"Keep It To Yourself"

Provisions of the Privacy Law

Each Scotland Health Care System facility is required by law to provide each patient with a copy of the Scotland Health Care System **Notice of Privacy Practices**. Each patient will then be asked to sign a **written acknowledgment** demonstrating he or she has received a copy or had access to a copy of this Notice.

A copy of Scotland Health Care System current Notice of Privacy Practices is available on the internet web site, as well as at every point of entry for each of the Scotland Health Care System facilities.

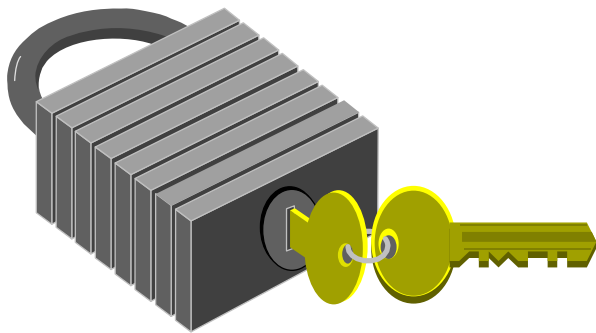
The Notice describes how a patient's health information may be used or disclosed by Scotland Health Care System to carry out Treatment, Payment, or health care Operations (TPO), as well as describing an individual's **rights** regarding their health information.

The rights an individual has regarding his or her health information include:

- Right to inspect and obtain a copy of their health information.
- Right to request an amendment to their health information.
- Right to request restrictions regarding the use and disclosure of their health information.
- Right to request confidential communications regarding their health information.
- Right to an accounting of disclosures concerning their health information.
- Right to file a complaint when a patient believes his or her Privacy Rights have been violated.

Policies detailing each of these Patient Rights are located in the Administrative Policy and Procedure Manual (Refer to HIPAA Privacy and Security portion of Admin P&P Manual)

EFFECTIVE APRIL 21, 2005 – HIPAA SECURITY RULE



What is the HIPAA Security Rule?

The HIPAA Security Rule is a federal law designed to safeguard a patient's electronic health information. How does this differ from the privacy rule? Simple, the security rule applies to protected health information stored in electronic form on hard drives, removable media, etc. or while it is being transmitted over the Internet, e-mail, or by other means. Some examples of electronic storage devices are:

- Hard drives
- Floppy disks
- CDROM
- PDA (Personal Digital Assistant)
- Dictaphones
- Magnetic Tapes
- USB "Thumb" Drives
- Flash Memory
- Cellular phone with built-in camera
- Any future technology that has the ability to store and send data

What is information security?

Information security refers to all the precautions and safeguards implemented to ensure that information is kept confidential, that it has not been altered or destroyed, and that it is accessible when needed by those that are authorized to do so. It also involves ensuring that any media used to store electronic protected health information (ePHI) is disposed of in a proper manner so that patient information cannot be recovered. SHCS maintains information security by effectively employing the following:

- Computer hardware and software (i.e. Firewalls, Virus Software, etc.)
- Policies and procedures
- Physical security
- Disaster recovery preparedness
- Oversight of all of these areas above

All employees should be aware of the Scotland Health Care System Internet and Email Use Policy, (Policy 1300.09-2) which specifically details what is considered acceptable use within our computer environment.

What type of patient information are we protecting?

Individually Identifiable Health Information stored or transmitted in electronic form.

What happens if I violate a patient’s right to privacy as mandated by HIPAA?

Failure to adequately ensure the security of our customer’s PHI can result in disciplinary action being taken against you, up to and including dismissal, termination of business contract, and reporting the violation to licensing agencies and law enforcement officials.

Security Awareness

You will receive additional security reminders over time via e-mail or newsletters to reinforce this training. You should pay close attention to these reminders to stay current with the latest security policies and procedures, as they may change over time.

If you have any questions regarding this information security training, notify your manager or contact the Security Official for Scotland Health Care System.

Security Official	Larry Pergerson	910-291-7525
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The Security Official should be notified if information security policies and procedures are being violated. If you discover a potential security violation or notice something out of ordinary that may represent a security risk, you should report the problem to the Help Desk, and follow the steps outlined in the Reporting Privacy and Security Violations policy # 1000.36 in the Privacy and Security Manual.

Taking data offsite



You should never take patient information offsite with proper permission from the Director of Health Information Management (HIM) or unless your job specifically requires you to do so. If you must take patient information offsite, be sure to safeguard with the proper security measures. When using a laptop or PDA offsite that contains patient information, remember the following:

- Never store patient information on a device that is not password protected.
- Never store your passwords or access codes to patient data on your PDA
- Consider how the data you store on your device will be backed up in the event of a catastrophic failure. Will patient information be lost?
- Ensure your virus software is up-to-date and working normally.

Getting Help

Topic:	Contact Information:
Questions:	
<ul style="list-style-type: none"> • Questions about HIPAA? 	Ask your supervisor/manager
Contacting Privacy or Security:	
<ul style="list-style-type: none"> • Privacy Questions? 	Contact SHCS Privacy Official at 7502
<ul style="list-style-type: none"> • Security Questions? 	Contact SHCS Security Official at 291-7525
Policy:	
<ul style="list-style-type: none"> • To review all HIPAA Policies 	Blue Privacy and Security Policy Manual
Reporting Concerns:	
<ul style="list-style-type: none"> • To report potential viruses or malicious software 	Contact the SHCS Help Desk at 291-4357
<ul style="list-style-type: none"> • To report a possible privacy/security violation 	Contact your supervisor Call the Privacy Hotline 291-7087

Self-Study Questionnaire

Name:	Date:
Scotland Department/Unit/Facility	Agency/Employer/School

Directions:

- Complete the statements below by selecting the best multiple choice answer.
- The answer sheet needs to be turned in to Education.

1. The mission of Scotland Health states
 - a) We provide high quality, compassionate health care.
 - b) We are the community's healthcare provider of choice.
 - c) We stand for Excellence, Integrity, and Community Accountability.
 - d) All of the Above

2. If I work in the hospital, the number I would dial in the event of a fire is _____.
 - a) 811
 - b) 910
 - c) 843
 - d) 911

3. An internal customer thanks you for your extra effort in offering help. You remember service excellence includes all **except** which of the following:
 - a) Each person deserves to be treated with respect, kindness, compassion, and dignity.
 - b) Utilizing customer service standards and actions makes each person in our community feel important.
 - c) Sometimes we are just too busy to practice service excellence.
 - d) We want people to know that how we deliver their care is as important to us as being technically competent caregivers.

4. You are describing Scotland Health's Mission, Vision, and Values to a co-worker. You know that our core values include all the following except:
 - a) Personality
 - b) Excellence
 - c) Integrity
 - d) Community Accountability

5. If you believe there is a corporate compliance issue, you should:
 - a) Discuss it with your manager or supervisor
 - b) Discuss it with the Corporate Compliance Official if not comfortable discussing with manager
 - c) Ignore
 - d) Both A and B

6. When discussing your role in compliance, you could say:
 - a) I have a responsibility to ask questions and report problems.
 - b) I have to take responsibility for what I do.
 - c) I must follow the Code of Ethics.
 - d) All of the above.

7. Examples of confidential information include:
 - a) Patient insurance and financial information.
 - b) Details about illnesses or conditions.
 - c) Patient demographics which include name, address and phone number.
 - d) All of the above

8. Another worker in your department asks why HIPAA is so important. You explain that....
 - a) HIPAA is the government's way to control health care.
 - b) HIPAA protects an individual's right to privacy and the confidentiality of medical information.
 - c) It's not a big deal since our processes are well protected anyway and the medical records couldn't fall into the wrong hands.
 - d) Protected Health Information (PHI) does not include patient identification numbers and billing information.

9. There is a box on the floor that you need moved to the table. You should:
 - a) Shove it under the table to get it out of the way.
 - b) Plan your move, stand close to the object, squat with bent knees, lift while maintaining normal curves, and keep the object close to your body.
 - c) Ask a co-worker to do it instead.
 - d) Pick the box up and place it on the table without giving thought to your action.

10. Everyone in your office is talking about Ergonomics and MSD's.
 - a) They are concerned about injuries and illnesses that affect muscles, nerves, tendons, ligaments, joints, or spinal discs.
 - b) They have been educated on the science of fitting jobs to the people who work in them.
 - c) They are aware of the risk factors that lead to musculoskeletal disorders.
 - d) All the above.

11. Security is everyone's responsibility. Employees should:
 - a) Prop exterior doors open.
 - b) Report suspicious persons, vehicles, and activities.
 - c) None of the above.
 - d) All of the above

12. A visitor to the Emergency Room is angered over waiting for treatment. He kicks the counter, slams his fist, raises his voice, and threatens physical harm to the employee unless he gets seen right away. You are passing by and witness this event.
 - a) You think of your safety and quickly get out of the way.
 - b) You immediately report the incident to security.
 - c) You go back to your department and ignore the incident.
 - d) You report to your work area and tell all your co-workers.

13. The letters that will help you remember what to do in a fire are:
- RACE
 - RAT
 - RUN
 - RAKE
14. Who is the first line of defense against a fire at Scotland Health Care System?
- All employees
 - The local fire department.
 - Your manager.
 - Public Safety.
15. If the power goes out you should make sure that all essential equipment is...
- Unplugged.
 - Plugged into the emergency outlet.
 - Turned off.
 - None of the above.
16. There are many ways to prevent the spread of infection, but the single best way is to...
- Rinse hands with water.
 - Perform proper hand hygiene.
 - Wear gloves all the time.
 - None of the above.
17. You sneezed and recognized the need to wash your hands. You should:
- Apply soap, scrub, and dry your hands
 - Rinse hands and dry them.
 - Wet hands, apply soap, use friction for 10-15 seconds, rinse and dry your hands.
 - Rinse hands; scrub for 20 minutes, dry the faucet with the paper towel.
18. The use of an alcohol based hand sanitizer is recommended....
- Instead of washing your hands.
 - When hands are not visibly dirty or when time and access to handwashing facilities is an issue.
 - Instead of wearing gloves.
 - For all hand hygiene.
19. The following are all categories of Precautions except...
- Indirect.
 - Contact.
 - Airborne.
 - Droplet.
20. TB can be spread by:
- Coughing.
 - Sneezing.
 - Talking.
 - All of the above.

21. People who are at risk for TB include:
 - a) People with close contact with a TB infected person
 - b) AIDS/HIV infected Persons
 - c) Elderly persons
 - d) All of the Above

22. You would know that the Emergency Management Preparedness Plan is in effect when you hear an announcement through overhead paging. That announcement will be:
 - a) Code Pink is in effect
 - b) Code Yellow is in effect
 - c) Dr. Big is in effect
 - d) Dr. Search is in effect

23. All policies related to the Emergency Management Preparedness Plan are located in the:
 - a) Administrative Policy Manual
 - b) Human Resource Policy Manual
 - c) Education Services Policy Manual
 - d) Environment of Care Policy Manual

24. Code Pink means:
 - a) Fire
 - b) Bomb threat
 - c) Disruptive patient or visitor
 - d) A baby may have been stolen

25. Which color indicates emergency outlets?
 - a) Red or Orange
 - b) Purple
 - c) Blue
 - d) Green

26. On a Material Safety Data Sheet (MSDS) you would find the following information.
 - a) What to do if a chemical splashes in your eye.
 - b) What (if any) health problem contact with a chemical would cause.
 - c) What to do if you swallow a chemical.
 - d) All of the above.

27. The HIV virus causes the disease.
 - a) Hepatitis B
 - b) Measles
 - c) Pneumonia
 - d) AIDS

28. Hepatitis B affects primarily which organ in the body?
 - a) Heart
 - b) Pancreas
 - c) Brain
 - d) Liver

29. The HIPAA Privacy law is a federal law that is designed to protect patient information.
- True
 - False
30. Some examples of individual identifiers which can link patients to their health information are: (check all that apply)
- _____ Name
 - _____ Address
 - _____ Birth Date
 - _____ Email Address
 - _____ Social Security Number
 - _____ Driver's License Number
 - _____ All of the Above
31. It is a violation of the HIPAA Privacy law if you have a private discussion about a patient with another staff member related to the patient's treatment.
- True
 - False
32. It is okay to talk about a patient's condition in a crowded elevator.
- True
 - False
33. Who do you contact to report a privacy violation?
- Your supervisor/manager, Security if needed.
 - Your co-worker
 - Health Information Management
 - The Department of Human Services
34. A patient's health information can be disclosed if it is related to:
- Treatment, payment, and health care operations.
 - Public health activities.
 - Cause of death.
 - All of the above.
35. Where are the policy and procedures related to HIPAA Privacy and Security kept?
- Patient Care Manual
 - Human Resources Manual
 - HIPAA Privacy and Security Policy Manual
 - None of the above
36. You can share your computer password if you know you can trust the person you are sharing it with.
- True
 - False
37. You do not have to log off of your computer if you are leaving it for a few minutes.
- True
 - False

38. If you see patient information out in the open, what should you do?
- Cover it.
 - Move it to a secure location and report your findings.
 - Read it first to see what it says.
 - Do nothing.
 - A or B.
39. Generic user names and passwords are allowed under the HIPAA Privacy and Security regulations.
- True
 - False
40. Everyone at Scotland Health Care System is responsible for doing his or her part to ensure the protection of patient information.
- True
 - False

Non-Employed Workers Orientation Roster

I have completed the orientation self-study and am responsible for the content.

Date _____ Signature _____

Department _____

Agency/School/Employer _____

PRINTED NAME _____

The following documents need to be **submitted** and kept on file:

- Orientation Roster
- Security and Confidentiality Agreement

Group	Submit To:
Consultants, contract and agency personnel, students, intern groups	Scotland Health Care System Education Department: (choose one) <ul style="list-style-type: none"> ➤ Interdepartmental envelope ➤ Fax to 910-291-7948 ➤ Mail to Education Department, Scotland Health Care System, 500 Lauchwood Drive, Laurinburg, NC 28352

Participant Evaluation Form

Title of Activity: Orientation Self-study for Non-Employed Workers					Date:
We are interested in your evaluation of this program. Your feedback is extremely important in planning future educational offerings.					
	Strongly Agree	Agree	Disagree	Strongly Disagree	NA
I am satisfied with this educational activity.					
Educational activity objectives were met.					
I am leaving today with specific ideas I can apply to my work within Scotland Health Care System facilities.					
This was an effective learning experience for me					
The information was given in a clear and concise way.					
For those items you marked “Agree”, what would it take to move to “Strongly Agree”?					
What aspects of this learning experience were helpful?					
What did you learn that you plan to use in your work setting?					

Send this form to Scotland Health Care System Education Department.

Security and Confidentiality Agreement

As a non-employee of Scotland Health Care System and as a condition of my rotation and/or assignment, I agree to the following:

1. I understand that I am responsible for complying with the HIPAA policies, which were provided to me.
2. I will treat all information received in the course of my employment with Scotland Health Care System which relates to the patients of the health care system, as confidential and privileged information.
3. I will not access patient information unless I have a need to know this information for my assignment.
4. I will not disclose information regarding the health care system's patients to any person or entity, other than as necessary to perform my rotation and/or assignment, and as permitted under the HIPAA policies.
5. If applicable, I will not log on to any of the health care system's computer systems that currently exist or may exist in the future using a password other than my own.
6. If applicable, I will safeguard my computer password and will not post it in a public place, such as the computer monitor or a place where it will be easily lost, such as on my ID badge.
7. If applicable, I will not allow anyone, including other associates, to use my password to log on to the computer.
8. If applicable, I will log off of the computer as soon as I have finished using it.
9. If applicable, I will not use e-mail to transmit patient information unless the appropriate security safeguards are in place and approved by my immediate supervisor.
10. I will not take patient information from the premises of the health care system in paper or electronic form without first receiving permission from the Privacy Officer.
11. Upon separation of my rotation/assignment with the health care system, I agree to continue to maintain the confidentiality of any information I learned while a non-employee and agree to turn over any keys, access cards/identification badge, or any other device that would provide access to the health care system or its information.

I understand that violation of this agreement could result in disciplinary action, including suspension of rotation/assignment.

Name (print & sign)

Date

Parent/Guardian

Date

CONSENT FOR MINOR TO PARTICIPATE IN SHADOW ACTIVITIES

This will authorize my/our child/ward _____, a minor to participate in such shadow activities at Scotland Health Care System, Laurinburg, NC, as from time to time may be prescribed by the hospital's Education Director or the designated representative. I (We) understand that my (our) child or ward services are donated to the hospital without contemplation of compensation or future employment.

I (We) release Scotland Health Care System and its employees from any claim of liability for any damages, injury or illness resulting to said minor, not occasioned by any fault or neglect on the part of the hospital, while participating in such shadow activities.

In the event said minor is in need of emergency medical treatment, I (we) authorize the Emergency Department physicians as my (our) agent to consent to any X-ray examination, anesthetic, medical or surgical diagnosis or treatment and hospital care which is deemed advisable by, and is to be rendered under the general or special supervision of any physician and/or surgeon licensed under the provisions of the Medical Practice Act on the medical staff of the hospital, whether such diagnosis or treatment is rendered at the office of said physicians or at said hospital. This authorization is given to provide in advance of any specific diagnosis, treatment, or hospital care being required, but is give to provide authority and power on the part of my (our) aforesaid agent(s) to give specific consent to any and all diagnosis, treatment or hospital care which the aforementioned physician in the exercise of his or her best judgment may deem advisable.

Name (print & sign)

Date

Parent/Guardian Signature

Date

Facility Specific Information Sheet

Emergencies to Report					
Situation	Scotland Memorial Hospital	W.R. Dulin Center	Outlying Clinics	Scotland Urgent Care	Edwin Morgan Center
Reporting a Fire	<ul style="list-style-type: none"> ➤ Pull the pull box ➤ Call 811 and give location ➤ Operator will announce "Dr. RED" and location 	<ul style="list-style-type: none"> ➤ Pull the pull box ➤ Call 811 and give location ➤ Operator will announce "Dr. RED" and location 	<ul style="list-style-type: none"> ➤ Pull the pull box ➤ Call 911 	<ul style="list-style-type: none"> ➤ Pull the pull box ➤ Call 911 	<ul style="list-style-type: none"> ➤ Pull the pull box ➤ Call 911
Reporting a Cardiac or Respiratory Arrest	<ul style="list-style-type: none"> ➤ Call 811 and give location ➤ Operator will announce "Code BLUE" and location ➤ If 18 years or under it will be announced as a "Code Blue Pediatric" 	<ul style="list-style-type: none"> ➤ Dial 4112 ➤ Announce Code Blue and Location 	<ul style="list-style-type: none"> ➤ Call 911 	<ul style="list-style-type: none"> ➤ Call 911 	<ul style="list-style-type: none"> ➤ Call 911
Reporting an Infant/ Child Abduction	<ul style="list-style-type: none"> ➤ Call 811 ➤ Operator will announce "Code Pink" and location 	<ul style="list-style-type: none"> ➤ Call 811 ➤ Operator will announce "Code Pink" and location 	<ul style="list-style-type: none"> ➤ Call 911 	<ul style="list-style-type: none"> ➤ Call 911 	<ul style="list-style-type: none"> ➤ Call 911
Reporting a Bomb Threat	<ul style="list-style-type: none"> ➤ Call 811 ➤ Operator will announce "Dr. Search" ➤ Keep the person on the phone as long as possible, Be sure to listen for distinguishing sounds (Ex. Voice, background noise) 	<ul style="list-style-type: none"> ➤ Call 811 ➤ Operator will announce "Dr. Search" ➤ Keep the person on the phone as long as possible, Be sure to listen for distinguishing sounds (Ex. Voice, background noise) 	<ul style="list-style-type: none"> ➤ Call 911 	<ul style="list-style-type: none"> ➤ Call 911 	<ul style="list-style-type: none"> ➤ Call 911
Reporting Behavior Assistance	<ul style="list-style-type: none"> ➤ Call 811 ➤ Operator will announce " Dr. Strong" and location 	<ul style="list-style-type: none"> ➤ Call 811 ➤ Operator will announce " Dr. Strong" and location 	<ul style="list-style-type: none"> ➤ Call 911 	<ul style="list-style-type: none"> ➤ Call 911 	<ul style="list-style-type: none"> ➤ Call 911
Reporting a Hazardous Materials Spill	<ul style="list-style-type: none"> ➤ Call 811 ➤ Operator will announce " Code Yellow" and location 	<ul style="list-style-type: none"> ➤ Call 811 ➤ Operator will announce " Code Yellow" and location 	<ul style="list-style-type: none"> ➤ Call 911 	<ul style="list-style-type: none"> ➤ Call 911 	<ul style="list-style-type: none"> ➤ Call 911

*The Newborn Safe Surrender Policy states that any newborn under seven days of age that is dropped off at any facility will be received- **no questions asked.** Further details can be found in the Environment of Care Manual.

FACILITY SPECIFIC INFORMATION SHEET

Emergencies to Respond To

Situation	Scotland Memorial Hospital & W.R. Dulin Center	Outlying Clinics	Scotland Urgent Care	Edwin Morgan Center
Responding to a Fire	<ul style="list-style-type: none"> ➤ Rescue anyone in danger ➤ Alarm ➤ Contain ➤ Extinguish the fire with an extinguisher ➤ Pull the Pin ➤ Aim the hose at the base of the fire ➤ Squeeze the handle ➤ Sweep side-to-side 	<ul style="list-style-type: none"> ➤ Rescue anyone in danger ➤ Alarm ➤ Contain ➤ Extinguish the fire with an extinguisher ➤ Pull the Pin ➤ Aim the hose at the base of the fire ➤ Squeeze the handle ➤ Sweep side-to-side 	<ul style="list-style-type: none"> ➤ Rescue anyone in danger ➤ Alarm ➤ Contain ➤ Extinguish the fire with an extinguisher ➤ Pull the Pin ➤ Aim the hose at the base of the fire ➤ Squeeze the handle ➤ Sweep side-to-side 	<ul style="list-style-type: none"> ➤ Rescue anyone in danger ➤ Alarm ➤ Contain ➤ Extinguish the fire with an extinguisher ➤ Pull the Pin ➤ Aim the hose at the base of the fire ➤ Squeeze the handle ➤ Sweep side-to-side
Responding to a Bomb Threat	<ul style="list-style-type: none"> ➤ Return to your department ➤ Search the area ➤ Report any suspicious objects to supervisor ➤ Someone from each area should call the (command center) and report findings –even if nothing found 	<ul style="list-style-type: none"> ➤ Return to your department ➤ Search the area ➤ Report any suspicious objects to supervisor 	<ul style="list-style-type: none"> ➤ Return to your department ➤ Search the area ➤ Report any suspicious objects to supervisor 	<ul style="list-style-type: none"> ➤ Return to your department ➤ Search the area ➤ Report any suspicious objects to supervisor
Responding to a Hazardous Materials Spill	<ul style="list-style-type: none"> ➤ Response teams to area specified by operator, lockdown procedures implemented 	Response teams to area specified, lockdown procedures implemented	Response teams to area specified, lockdown procedures implemented	Response teams to area specified, lockdown procedures implemented
Responding to an Infant/Child Abduction	<ul style="list-style-type: none"> ➤ Block all exits and stairwells ➤ Notify Security of any suspicious persons ➤ Wait for “All Clear” 	<ul style="list-style-type: none"> ➤ Block all exits ➤ Notify Security of any suspicious persons ➤ Wait for “All Clear” 	<ul style="list-style-type: none"> ➤ Block all exits ➤ Notify Security of any suspicious persons ➤ Wait for “All Clear” 	<ul style="list-style-type: none"> ➤ Block all exits ➤ Notify Security of any suspicious persons ➤ Wait for “All Clear”
Responding to Disaster (Tornado, Hurricane, Fire, Flood, Civil Disturbances)	<ul style="list-style-type: none"> ➤ The Patient Care Supervisor will notify the switchboard ➤ The Operator will announce “Dr. Big”, three times ➤ Wait for “All Clear” 	<ul style="list-style-type: none"> ➤ Director or staff member in charge will call 911. ➤ Director of staff member in charge will call the Administrator on call. ➤ If patients need transport to SMH, call Scotland EMS at 910-276-1313 ➤ If emergency is of security nature, at first opportunity engage the duress button(s) 	<ul style="list-style-type: none"> ➤ Director or staff member in charge will call 911. ➤ Director of staff member in charge will call the Administrator on call. ➤ If patients need transport to SMH, call Scotland EMS at 910-276-1313 ➤ If emergency is of security nature, at first opportunity engage the duress button(s) 	<ul style="list-style-type: none"> ➤ Director or staff member in charge will call 911. ➤ Director of staff member in charge will call the Administrator on call. ➤ If patients need transport to SMH, call Scotland EMS at 910-276-1313 ➤ If emergency is of security nature, at first opportunity engage the duress button(s)

*Details can be found in the Environment of Care (EOC) manual in every department

