SCOTLAND
HEALTH CARE SYSTEM

Closer Care. Better by Far.

Completion of this orientation self-study packet satisfies requirements and objectives for Scotland Health Care System Orientation.

Contents

This self-study packet must be completed before assuming any duties at SHCS.

Orientation Self-study Instructions

1. **Review** the N.E.W. Orientation Packet.

2. **Complete** the following forms:
   (a) N.E.W. Packet Answer Sheet – page 34
   (b) Participate Evaluation Form – page 35

3. **Sign** the following forms:
   (a) Consent for Minor to Participate in Shadow Activities (as applicable)
       – page 36

Submit To:
Scotland Health Staff Development Department: (choose one method of submission)   • Fax to 910-291-7948   • Mail to Staff Development Department Scotland Health Care System, 500 Lauchwood Drive, Laurinburg NC 28352
Students also need to give copy to faculty.

4. Contact the Staff Development Department to confirm job shadowing activities have been arranged.
5. Contact the Department Manager and/or assigned Preceptor for Department Specific Orientation.

> **If you have any questions about this self-study, contact Scotland Health Care System Staff Development 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.

MISSION, BELIEFS, VISION, AND VALUES STATEMENT

Mission:

The Mission of Scotland Health Care System is to work with our health care partners to create and operate a patient centered, integrated system to provide *Safe, High Quality, Compassionate, and Sustainable* health care to the people we serve.

Our Beliefs About the Future:

- To successfully accomplish our Mission and Vision our transformation must include creative and innovative changes in what we do and how we do it.

- We must change from a hospital and provider-centric model to a patient-centered, ambulatory model.

- There will be a continued focus on moving the industry to an increasingly ambulatory based delivery model focused on the health of the individual patient and the overall health of the population we serve.

- New payment models will incent us to better coordinate our patient's care along the continuum of services. This includes both how our patients are treated and how their treatment information flows.

- New partners, arrangements, and competitors will emerge for us as a result of the new treatment and payment models. We will be strategically advantaged by coordinating access to a comprehensive continuum of care.

- Patients and their families will behave more like Consumers, expecting more Value, Convenience, and Access, in addition to caring and compassionate Service.

- Limited opportunities to pursue Smart Growth will necessitate us focusing our strategic efforts and resource allocation decisions.

Vision:

Scotland Health Care System will be recognized and chosen by patients and their families throughout our region for the quality and value of services we provide. This value will be demonstrated through the highest level of Quality and Service, along with the Safest environment. We will lead efforts to improve the health and well-being of the citizens in our region.

Values:

- We accept and are proud of our role as the safety net provider of essential services for our region.

- As a community-owned health care system, we believe in transparency and accountability to our community for the decisions we make. These decisions will be made collaboratively and with the utmost integrity.

- Our associates, physicians, other providers, and volunteers are our most important assets. We treat each other, along with our patients and families, with care, compassion, dignity and respect at all times.

- We carry out all these principles in a financially prudent and sustainable manner to ensure we stay focused on our Mission.

Approved by the Scotland Health Care System Board of Trustees May 22, 2015

The Joint Commission (TJC)

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

Your Role in the Scotland Health Care System
- 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
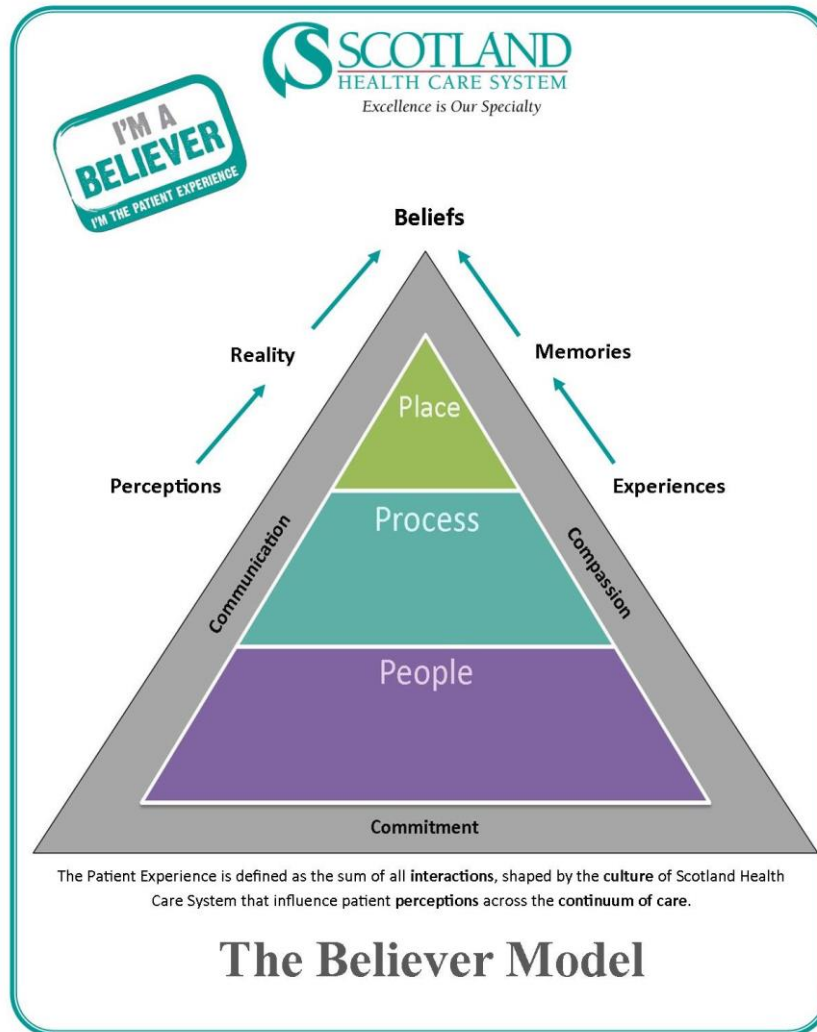 - Spills

Patient Experience

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.

Patient Rights
Every patient has rights. Patient rights outline expectations for health care and provide each patient with knowledge regarding the care to which he or she is entitled.
Each patient has the right to:
- Expect considerate, safe, and respectful care that supports dignity
- Expect care that is free from abuse, neglect, and exploitation
- Have his or her condition assessed and a plan of care developed and implemented
- Make decisions regarding the plan of care
- Have an advance directive concerning treatment and the knowledge that this directive will be honored
- Expect that the health care facility, within its capacity, will make reasonable responses to requests for care

The Patient Experience is defined as the sum of all **interactions**, shaped by the **culture** of Scotland Health Care System that influence patient **perceptions** across the **continuum of care**.

The Believer Model

A- Acknowledge
Acknowledge the patient and their needs
I- Introduce
Introduce yourself and your role
D- Duration
Give time expectations and update patients as necessary
E- Explanation
Encourage patients to ask questions and explain
T- Thank You
Thank the patient for choosing Scotland Health Care System

Behaviors of Compassion, Communication & Commitment

Purpose: To serve as the behavioral framework to support a culture of strong, compassionate, interpersonal relationships, demonstrating to our patients and families that associates, providers and volunteers of Scotland Health Care System are actively working together to care for every person, every encounter, every time.

SHCS Mission	Behavioral Expectations & Commitments	Practices/Tools to Support Behavior
Safe	**Behavioral Expectation:** ❖ **Promote and maintain a safe environment for patients, families and staff.** *Commitment:* • *I will speak up for the safety of our patients, my coworkers and myself by stopping the line for patient safety.* • *I will wash/sanitize my hands carefully to avoid the spread of infection and monitor others to ensure compliance.*	**Hand washing** **Event Reporting** **Stop the Lines** **Just Culture**
High Quality	**Behavioral Expectation:** ❖ **Ensure high quality care and performance by doing the <u>right thing</u> at the <u>right time</u> in the <u>right way</u> with each and every encounter.** *Commitment:* • *I will address patient, family, and coworker needs by responding promptly to requests and/or concerns or by directing the request or need to the appropriate channel or person.* • *I will demonstrate professionalism & integrity through my appearance and actions by following standard work and policies & procedures.*	**Five Rights** **Policies & Procedures**
Compassionate	**Behavioral Expectation:** ❖ **Begin and end each interaction with key words and actions that demonstrate caring for patients, families and staff.** *Commitment:* • *I will connect with each individual through the use of empathy and compassion by utilizing AIDET (Acknowledge, Introduce, Duration, Explanation, Thank You) and ending each interaction by asking "Is there anything else I can do for you?"* • *I will exhibit courtesy and respect for our patients, families and my coworkers by making eye contact and ensuring a caring and considerate tone of voice.*	**AIDET** **Rounding** **Quiet For You** **Complaint Management** **Service Recovery** **Patient Feedback** **Empathy**
Sustainable	**Behavioral Expectation:** ❖ **Demonstrate commitment and accountability for performance through effective communication and team collaboration.** *Commitment:* • *I will utilize my resources appropriately and efficiently by identifying waste using Lean Principles and/or communicating improvements with my supervisor.*	**Audits** **Rounding** **Huddles** **Lean/RIEs**

Cultural Competence

Can the patient understand?

- The hospital provides information to the patient who has vision, speech, hearing, or cognitive impairments in a manner that meets the patient's needs.
- The hospital provides information in a manner tailored to the patient's age, language, and ability to understand
- The hospital provides language interpreting and translation services through external vendor.

Providing Age Appropriate Care

Health care needs are met through competent and thorough assessment of client needs at all stages of life. A client's age impacts how care is to be given. It is the policy of this facility to provide appropriate care, treatment, and services that meet the needs of each client.

Knowledge about age-related norms assists in giving proper care, but be aware that clients within groups may show a wide range of growth and development.

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
- Don't discuss patients unless you are involved in their care or treatment
- 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
- Never leave your computer unattended when logged into patient information

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 POTENTIALLY 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 (910-291-7930) or Security Official (910-291-7525), or call the 24/7 confidential Compliance/Privacy Hotline at 910-291-7087.

Taking Data Offsite

You should never take patient information offsite without 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:	
• Questions about HIPAA?	Ask your supervisor/manager
Contacting Privacy or Security:	
• Privacy Questions?	Contact SHCS Privacy Official at 7930
• Security Questions?	Contact SHCS Security Official at 291-7525

Policy:	
• To review all HIPAA Policies	Privacy and Security Policy Manual
Reporting Concerns:	
• To report potential viruses or malicious software	Contact the SHCS Help Desk at 291-4357
• To report a possible privacy/security violation	Contact your supervisor Call the Privacy Hotline 291-7087

Abuse, Neglect, and Exploitation

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.

Team Communication and Collaboration

Team communication and collaboration among disciplines is vital for safe patient care. It is important to immediately report abnormal values upon finding. Stop the Line is a safe and non-threatening method for all team members to prevent actions that may harm a patient. The Stop the Line process shifts responsibility for quality, safety, and appropriate care and business practices into the hands of team members who are empowered and expected to speak up when problems or concerns are identified.

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
- Follow the Code of Ethics

REPORTING CONCERNS

- Contact your supervisor or
- Contact the compliance official at **910-291-7930** or
- Call the anonymous, confidential 24-hour Corporate Compliance Hotline at **910-291-7087.**
  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 section in PolicyStat

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 <u>Environment of Care Manual</u> which relate to Scotland Memorial Hospital's emergency preparedness. These three polices 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 causalities

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.

Safety and Security

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

In case of emergency dial 811

Code Blue	Cardiac/Respiratory Arrest
Code Yellow	Hazardous Material Spill
Code Pink	Infant Abduction
Code Purple	Need Lifting Assistance
Code Gray	De-escalation Team
Code Silver	Person with weapon or hostage
Code Orange	EC Restricted Access
Dr. Red	Fire
Dr. Strong	Behavior Assistance
Dr. Big	Disaster Plan
Dr. Search	Bomb Threat

Facility Specific Information Sheet

Emergencies to Report				
Situation	**Scotland Memorial Hospital**	**W.R. Dulin Center**	**Outlying Clinics**	**Scotland Urgent Care**
Reporting a Fire	➢ Pull the pull box ➢ Call 811 and give location ➢ Operator will announce "Dr. **RED**" and location	➢ Pull the pull box ➢ Call 811 and give location ➢ Operator will announce "Dr. **RED**" and location	➢ Pull the pull box ➢ Call 911	➢ Pull the pull box ➢ Call 911
Reporting a Cardiac or Respiratory Arrest	➢ 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"**	➢ Dial 4112 ➢ Announce Code Blue and Location	➢ Call 911	➢ Call 911
Reporting an Infant/ Child Abduction	➢ Call 811 ➢ Operator will announce "Code Pink" and location	➢ Call 811 ➢ Operator will announce "Code Pink" and location	➢ Call 911	➢ Call 911
Reporting a Bomb Threat	➢ 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)	➢ 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)	➢ Call 911	➢ Call 911
Reporting Behavior Assistance	➢ Call 811 ➢ Operator will announce " Dr. Strong" and location	➢ Call 811 ➢ Operator will announce " Dr. Strong" and location	➢ Call 911	➢ Call 911
Reporting a Hazardous Materials Spill	➢ Call 811 ➢ Operator will announce " Code Yellow" and location	➢ Call 811 ➢ Operator will announce " Code Yellow" and location	➢ Call 911	➢ 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

Situation	Scotland Memorial Hospital & W.R. Dulin Center	Outlying Clinics	Scotland Urgent Care
Emergencies to Respond To			
Responding to a Fire	➢ **R**escue anyone in danger ➢ **A**larm ➢ **C**ontain ➢ **E**xtinguish the fire with an extinguisher ➢ **P**ull the Pin ➢ **A**im the hose at the base of the fire ➢ **S**queeze the handle ➢ **S**weep side-to-side	➢ **R**escue anyone in danger ➢ **A**larm ➢ **C**ontain ➢ **E**xtinguish the fire with an extinguisher ➢ **P**ull the Pin ➢ **A**im the hose at the base of the fire ➢ **S**queeze the handle ➢ **S**weep side-to-side	➢ **R**escue anyone in danger ➢ **A**larm ➢ **C**ontain ➢ **E**xtinguish the fire with an extinguisher ➢ **P**ull the Pin ➢ **A**im the hose at the base of the fire ➢ **S**queeze the handle ➢ **S**weep side-to-side
Responding to a Bomb Threat	➢ 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	➢ Return to your department ➢ Search the area ➢ Report any suspicious objects to supervisor	➢ Return to your department ➢ Search the area ➢ Report any suspicious objects to supervisor
Responding to a Hazardous Materials Spill	➢ 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
Responding to an Infant/Child Abduction	➢ Block all exits and stairwells ➢ Notify Security of any suspicious persons ➢ Wait for "All Clear"	➢ Block all exits ➢ Notify Security of any suspicious persons ➢ Wait for "All Clear"	➢ Block all exits ➢ Notify Security of any suspicious persons ➢ Wait for "All Clear"
Responding to Disaster (Tornado, Hurricane, Fire, Flood, Civil Disturbances)	➢ The Patient Care Supervisor will notify the switchboard ➢ The Operator will announce "Dr. Big", three times ➢ Wait for "All Clear"	➢ 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)	➢ 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

14

- 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

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

- 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

16

$\rightarrow$ Specialty beds
$\rightarrow$ Defibrillators
$\rightarrow$ 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

$\rightarrow$ cut or frayed wires or plugs
$\rightarrow$ feels or smells like overheating
$\rightarrow$ shock felt during use
$\rightarrow$ dropped or physically damaged
$\rightarrow$ liquid spilled on electrical components
$\rightarrow$ 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

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

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)

Antimicrobial Stewardship

WHY IS ANTIMICROBIAL STEWARDSHIP IMPORTANT?

- 20-50% of all antibiotics prescribed in U.S. acute care hospitals are either unnecessary or inappropriate.
- Any medication can have serious side effects. For antibiotics, those side effects can include adverse drug reactions and Clostridium difficile infection (CDI).
- Patients who are unnecessarily exposed to antibiotics are placed at risk for serious adverse events with no clinical benefit.
- The misuse of antibiotics has also contributed to the growing problem of antibiotic resistance, which has become one of the most serious and growing threats to public health.

ANTIMICROBIAL STEWARDSHIP PROGRAM

- Hospital-based programs dedicated to improving antibiotic use, commonly referred to as "Antibiotic Stewardship Programs (ASPs)", can optimize the treatment of infections and reduce adverse events associated with antibiotic use.
- Benefits of Antimicrobial Stewardship Program
    - Improve the quality of patient care
    - Improve patient safety through increased infection cure rates
    - Reduce treatment failures
    - Increase frequency of correct prescribing for therapy and prophylaxis
    - Reduce hospital rates of C-Diff and antibiotic resistance

YOUR ROLE IN PREVENTING ANTIBIOTIC RESISTANCE: INFECTION PREVENTION

- Wash your hands often to prevent the spread of infection
- Disinfect equipment between each patient use
- Practice cough etiquette
- Educate visitors about isolation precautions
- Protect yourself and others by getting the flu vaccine

Do not report to work if you have any symptoms of a 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

- Wearing Personal Protective Equipment (PPE)

- 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.

Categories of precautions:

Contact Precautions

Contact Enteric

Airborne Precautions

Droplet Precautions

Protective 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 (PPE)

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 Exposure means that an individual has been exposed to the TB germ. The body fights the bacteria to stop them from growing. A person in the latent stage:
- 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 (latent) disease. There are strains of TB that are drug resistant. People with resistant strains 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

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- 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

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

PROPER LIFTING
o Plan the move
o Keep weight close
o Use a wide base of support
o Avoid twisting or jerking
o Bend knees & lift with legs

o Get help when needed (co-worker, instruct patient)
o Use devices when needed (mechanical patient lift, dolly, cart)
o Maintain curve in low back and neck

Preventing Patient Falls

The agency for Healthcare Quality and Research estimates that in the US between 700,000 to one million people fall within hospitals, resulting in fractures, lacerations or internal bleeding.

THE GOAL at Scotland Health Care System is to reduce the number of hospital acquired falls.

There are several ways SHCS has committed to the safety and quality care of patients by implementing the following guidelines:
- All patients are to receive education on fall precautions
- All patients are be provided non-skid socks upon admission and as needed.
- Frequent audits will be completed to address the accuracy of the Hendrick's fall assessment and initiation of the falls bundle.
- All inpatient rooms have "Call, Do Not Fall" signs posted in the rooms and bathrooms
- Bed alarm signs have been created to use as reminders to ensure bed/chair alarms are on at all appropriate times.

Falls precautions include:
- Perform rounds and address the 4 P's: pain, positioning, personal care and possessions.
- Assist to toilet before bedtime and frequently while awake, do not leave unattended in bathroom. Bedside commode PRN.
- Communicate fall risk with frequent observation.
- Use assistive devices as appropriate.
- Relocate for improved visibility, as appropriate.
- Assist patient when ambulating or transferring.
- Family/other at bedside as indicated.
- Bed/chair alarm if available.

All associates are expected to assist with preventing falls by notifying proper personnel if patient is need.

Operational Excellence

Scotland Health Care System is transforming our culture and improving performance using a proven process improvement methodology, Lean, to help us meet our mission and vision in a drastically and rapidly changing healthcare environment.

Lean is about having the right resources in place to do the right work for the customer (patient), with the right quality, at the right time.

Guiding us in this Transformation are 9 Transformational Principles that support Safe, High Quality, Compassionate, and Sustainable Health Care.

1. Make Decision Based on Data and Facts
2. Go and See
3. Practice Scientific Thinking
4. Create Standardized Work

5. Visual Management Creates Transparency
6. Patient Centered Process Improvement Creates Value
7. Respect Every Individual
8. Practice *Always Behaviors*
9. Be Accountable

Utilizing two techniques, the 8 Wastes in Healthcare and "Go and See", we/you can make incremental improvements that collectively will transform our Health Care System.

8 WASTES in Healthcare: DOWNTIME
• **D efects** – mistakes and errors
• **O verproduction**- working ahead, too much too soon
• **W aiting** – idle time patient**,** employee, or process
• **N on Value Added Processing** – effort which adds no value to a service
• **T ransportation** – movement of patients, paperwork or equipment
• **I nventory** – excess, supplies, equipment
• **M otion** – unnecessary movement of people
• **E mployees** – underutilization of staff talents and capabilities

Gemba: Go and See - Gemba: Japanese word of which the literal translation is "the real place." Where the actual services are provided or where the work is done. Go and see the work

How You Can Help with Our Transformation:
• Always focus on the customer and patient's needs
• Stop the Line
• Gemba: Go and See
• Be a problem solver
• Transparency- Make problems visible
• Use data to define problems

Activating Resuscitative Efforts

When a patient is exhibiting deteriorating changes, appropriate response and resuscitative efforts should be activated.

Scotland Memorial Hospital
(Rapid Response Team and Code Team)
811

Dulin
Center
(Code Team)
4112 & 911

Scotland Physician Network Practices and Outlying areas
(Emergency Medical Services)
911

RAPID RESPONSE TEAM

A Rapid Response Team or RRT is a team of clinicians who bring critical care expertise when a patient is experiencing distress.

Scotland Memorial Hospital has a RRT that responds to the following areas:
•Cancer Center
•Imaging Services
•Preadmission Testing
•Outpatient Surgery
•Women's Services
•Telemetry
•Med/Surg/Peds
•PCU
•ICU

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.

Self-Study Questionnaire

Directions:
Provide the best answer for each question on the Self-Study Questionnaire Answer Sheet.

1. I have read the Security and Confidentiality Agreement and understand that violation of this agreement could result in disciplinary action, including suspension of rotation/assignment.
   a) True
   b) False

2. 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. 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

5. 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.

6. 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/or phone number.
   d) All of the above

7. 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.

8. 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.

9. 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

10. 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.

11. The letters that will help you remember what to do in a fire are:
    a) RACE
    b) RAT
    c) RUN
    d) RAKE

12. Who is the first line of defense against a fire at Scotland Health Care System?
    a) All employees
    b) The local fire department.
    c) Your manager.
    d) Public Safety.

13. If the power goes out you should make sure that all essential equipment is…
    a) Unplugged.
    b) Plugged into the emergency outlet (red or orange).
    c) Turned off.
    d) None of the above.

14. There are many ways to prevent the spread of infection, but the single best way is to…
    a) Rinse hands with water.
    b) Perform proper hand hygiene.
    c) Wear gloves all the time.
    d) None of the above.

15. If you see patient information out in the open, what should you do?
    a. Cover it.
    b. Move it to a secure location and report your findings.
    c. Read it first to see what it says.
    d. Do nothing.
    e. A or B.

16. The following are all categories of Precautions except…
    a) Indirect.
    b) Contact.
    c) Airborne.
    d) Droplet.

17. TB can be spread by:
    a) Coughing.
    b) Sneezing.
    c) Talking.
    d) All of the above.

18. 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

19. You do not have to log off of your computer if you are leaving it for a few minutes.
    a) True
    b) False

20. When you first encounter a patient, your conversation should begin with:
    a) Introducing yourself and your role
    b) Acknowledging the patient and their needs
    c) Thanking the patient for choosing Scotland Health Care System
    d) Encouraging the patient to ask questions

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

22. 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.

23. Who do you contact to report a privacy violation?
     a. Your supervisor/manager, Security if needed.
     b. Your co-worker
     c. Health Information Management
     d. The Department of Human Services

24. How do you assist in preventing falls?
     a) Catch the falling patient
     b) Notify the proper personnel if the patient is in need
     c) Carry the patient to the nurse's station
     d) Do nothing

25. You can share your computer password if you know you can trust the person you are sharing it with.
     a) True
     b) False

Self-Study Questionnaire
ANSWER SHEET

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

1.	6.	11.	16.	21.
2.	7.	12.	17.	22.
3.	8.	13.	18.	23.
4.	9.	14.	19.	24.
5.	10.	15.	20.	25.

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

Date_____Signature_____

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 completed forms to Scotland Health Care System Staff Development Department.

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

Send completed forms to Scotland Health Care System Staff Development Department.