

BERT FISH MEDICAL CENTER

SELF-LEARNING ORIENTATION PACKET



This self-learning orientation packet is designed to meet hospital regulatory and policy requirements for new volunteers, students, and others as designated by hospital administration.

TABLE OF CONTENTS

Mission, Vision and Values	3
Patient Centered Care	4
Organizational Chart.....	5
Hospital Services	5
Quality and Safety Program	5
Risk Management	6
Ethics and Compliance	9
Patient Rights.....	10
Privacy and Security of Patient Information (HIPAA)	10
Cultural Diversity and Sensitivity	11
Violence in the Workplace	13
Material Safety Data Sheets (MSDS) and Hazardous Materials	14
Electrical Safety	14
Fire Safety	15
Emergency Management.....	15
Back Safety	16
Infection Control	17
Harassment and Discrimination	22
Personal Appearance	22
Smoking.....	23
Hospital Parking.....	23
Important Contact Numbers.....	23

Mission, Vision and Values

MISSION

At Bert Fish Medical Center the Employees, Medical Staff, and Volunteers through their concerted effort, provide all the necessary services to improve the health, well-being and quality of life of those in Southeast Volusia County.

VISION

Bert Fish Medical Center is the leading provider of choice for the people of Southeast Volusia County and is a focal point for the community in the promotion of health, wellness and the seamless delivery of integrated and comprehensive health care. Through its efforts, the health of the community and the quality of life are enhanced.

The hospital will be operated in a sound fiscal manner, in order to provide funds for indigent care, replacement and investment in new and improved facilities, equipment and programs.

OUR VALUES

SERVICE:

Bert Fish Medical Center has made a commitment to our community to provide comprehensive high-quality and compassionate health care services.

TEAMWORK:

We are committed to Bert Fish Medical Center's mission and with our collaborative efforts – together as one organization, we are a team working toward a common objective: to enhance the quality of life for those we serve.

COMMITMENT TO EMPLOYEES:

We recognize that providing an environment conducive to mutual respect and dignity attracts and retains superior employees. Bert Fish Medical Center stands by its volunteers and employees – our most important asset.

LEADERSHIP:

The key to success...Management is entrusted to focus on the "big" picture and monitor hospital's activities effectively. Our ability to excel over the years is a tribute to our management and community leaders, who strive to set a tone of integrity and optimism.

EXCELLENCE:

We are committed to providing excellent care and services that extend beyond the walls of the hospital. Excellence is best defined through the extraordinary health care services we provide to our greater community.

PRUDENT FISCAL MANAGEMENT:

We manage our financial resources wisely by choosing business practices that are cost-effective and productive. We are committed to operating efficiently without compromising quality.

Patient Centered Care

AT BERT FISH MEDICAL CENTER, WE STRIVE TO CARE FOR THE MIND, BODY AND SPIRIT OF ALL OF OUR PATIENTS. OUR COMPASSIONATE HEALTH CARE PROFESSIONALS ARE DEDICATED TO PROVIDING PATIENTS WITH THE INDIVIDUAL ATTENTION THAT THEY DESERVE.

Bert Fish Medical Center offers a full range of patient services right here in New Smyrna Beach, located in Southeast Volusia County, Florida. Patients are not required to drive all the way to Daytona Beach, Orlando or Jacksonville for most of their health care needs.

At Bert Fish Medical Center, emergency physicians are on staff 24-hours a day, seven days a week. The Radiology Department provides a wide range of diagnostic testing services with premier technology and patient-centered care. The Oncology Department provides life-saving chemotherapy and radiation treatments in an environment where patients and the healing process always come first. The Department of Rehabilitation works with patients in a caring atmosphere that helps to restore strength and mobility. The Bert Fish Same Day Surgery Center has a new and improved laparoscopic program that allows many patients a shorter hospital stay and less recovery time.

A Planetree Partner

Bert Fish Medical Center is proud to be a Planetree Affiliate Member. Since its founding in 1978 as a non-profit organization, Planetree has been a pioneer in personalizing, humanizing and demystifying the health care experience for patients and their families.

The Planetree Model is patient-centered rather than hospital-focused, and is committed to improving medical care from the patient's perspective. It empowers patients and families through information and education, and encourages healing partnerships with care givers.



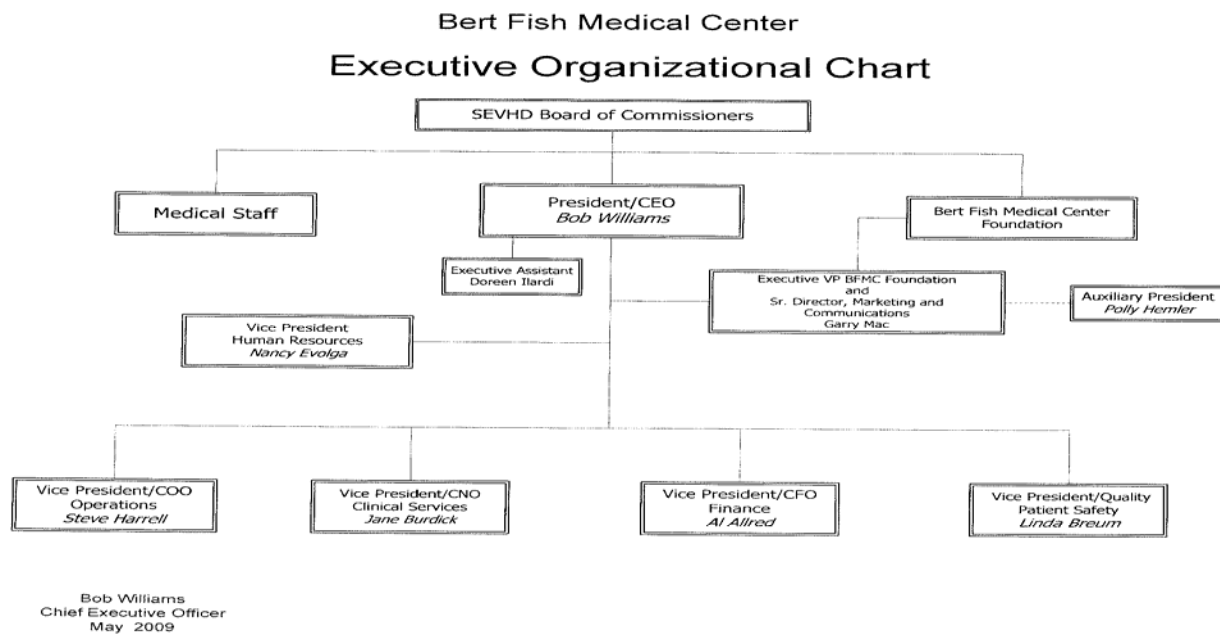
The Planetree approach is holistic and encourages healing in all dimensions — mental, emotional, spiritual and social, as well as physical. It seeks to maximize health care outcomes by integrating optimal medical therapies. Access to arts and nature are also incorporated into the healing environment.

As a Planetree Member, we believe:

- We are human beings, caring for other human beings.
- We are all caregivers.
- Care giving is best achieved through kindness and compassion.
- Safe, accessible, high quality care is fundamental to patient-centered care.
- In a holistic approach to meeting people's needs of body, mind and spirit.
- Families, friends and loved ones are vital to the healing process.
- Access to understandable health information can empower individuals to participate in their health.
- The opportunity for individuals to make personal choices related to their care is essential.
- Physical environments can enhance healing, health and wellbeing.
- Illness can be a transformational experience for patients, families and caregivers.

For more information about Planetree, please see their website at: www.planetree.org or *contact the Planetree Coordinator at ext. 6355.*

Organizational Chart



Hospital Services

Bert Fish Medical Center is a 112 bed community hospital that offers a wide range of medical and surgical services for the community of Southeast Volusia including:

- Cardiology (Medical, Surgical and Interventional)
- Endocrinology
- Gastroenterology
- Oncology and Radiation Therapy
- Nephrology
- Neurology
- Pulmonology
- Gynecology
- Orthopedics
- General, Thoracic, and Vascular Surgery
- Urology

The hospital does not provide inpatient psychiatric, obstetric or pediatric services.

Quality and Safety Program

Providing patients quality care in a safe environment is important to the staff at Bert Fish Medical Center. It is our mission to provide services that will improve health, well-being and quality of life of the patients we serve. We want to ensure that patient's are well taken care of during their stay and a safe environment provided.

What is Quality? It is a product or service that meets or exceeds the patient expectations. All BFMC staff take pride in their work, their profession and our reputation. Occasionally, there are obstacles in place that restrict or hinder our ability to meet and exceed a patient's expectations. It is estimated that 80% of the time these obstacles are found in the process of getting things done and only 20% of the time it was the people; that is where process improvement comes in.

Some of the key elements of process improvement are:

1. At Bert Fish Medical Center, we utilize the **DMAIC** principle for improving processes.
 - a. We **define** what we are looking to improve and why.
 - b. We then **measure** the current state of the process via observation, time studies, flow diagramming and other tools.
 - c. It is then that we **analyze** the results to determine the best way to fix the problem.
 - d. It is then time to **implement** your plan to improve the process.
 - e. We ensure that the process stay in **control** and doesn't revert back to the way it was.
2. There is a Quality Improvement Council (QIC) that is made up of different departments, physicians, administration and board of commissioners. It is there that processes are presented, solutions discussed and timelines developed for the improvement.
3. The "Voice of the Customer" must always be sought, whether it is the patient, their family, the physician or the staff member to understand their perspective of the process.
4. We know we have improved the process by measurement and observation. We need the "Voice of the Customer" to let us know that we have achieved our goal and satisfied their needs. We look for best practices and national benchmarks to gauge ourselves against along with improvement percentages from historical data from the hospital.
5. An important element in the process is choosing the right team. The people involved with the process must be involved in the solution. They are the ones most familiar with the issues involved and may be the first ones to come up with solutions to it.
6. In an improvement team environment, it is important for each member to be able to express their thoughts and opinions. All members of the team form a unit that is capable of breaking down the issues to its core components to then find creative solutions for improving them.

At BFMC, all departments have ongoing Process Improvement projects in effect. They may be required by regulations such as Medicare or the Joint Commission. They may also be in place to meet the particular needs of the department. Ask your Supervisor/Manager what is being worked on in your department and become involved in improving BFMC.

Risk Management

An Incident report (Risk Notification) is required to be completed for every happening that is outside the usual, routine, normal, customary or ordinary activities of the facility by the end of the shift in which the event occurred.

Incident report (Risk Notification)s are non-punitive, and confidential, for internal quality improvement and risk reduction purposes and are not subject to admission as evidence in any civil or administrative proceeding. Incident reports (Risk Notifications) are not to be printed, copied or transmitted by any method to any unauthorized person, including the patient or the patient's authorized representatives.

While the facts of the event are to be objectively noted in the patient record, no mention of the completion of an Incident report (Risk Notification) is to appear in any patient record or note.

Reportable events include but are not necessarily limited to, patient, visitor, staff, volunteer or Auxilian injuries; medication, treatment or diagnostic variances, planned or unplanned removal of implanted medical devices; adverse incidents or sentinel events; damage to or loss of facility or personal property, or any event that might cause embarrassment to the hospital or affiliated entities.

Incident reports (Risk Notifications) are entered on the Incident report (Risk Notification) form (Meditech). Each notification shall be completed accurately and objectively and include sufficient detail to provide a clear understanding of the event and the extent of injuries, if any.

The Department Managers that receive referrals through the Incident report (Risk Notification) System will promptly review each notification and initiate corrective action as indicated and appropriate.

The Risk Manager will review all Incident reports (Risk Notifications) within the time frame prescribed by Florida Law, initiate analysis, corrective actions as appropriate and necessary and trend for frequency and severity of the events.

The Risk Manager, Administrator-On-Call and Nursing Supervisor will be notified immediately, including after hours and on weekends, by the most expeditious means available, in the event of any of the following events:

1. Any mysterious or unexplained patient death;
2. Any employee, visitor, Auxilian, volunteer or medical staff work related accident resulting in death;
3. Any employee, visitor, Auxilian, volunteer or medical staff work related accident resulting in admission to the hospital;
4. Any disaster or civil disturbance that disrupts hospital operations;
5. Any significant damage to the facility from any cause that results in, or may result in, evacuation of patients or interruption of services;
6. Any accident involving a company owned or leased vehicle that results in the hospitalization of any person;
7. Any other incident that might cause embarrassment to, or damage the reputation of the hospital or any of its affiliated entities.

Volunteer Occurrence (incident) Reporting / Risk Notification

*****This section applies to BFMC Volunteers ONLY*****

If an on the job-injury occurs:

- Notify department head or volunteer liaison immediately.
- Complete the Non-Patient Occurrence (incident) Report in Meditech. Report to the Emergency Department if medical treatment is needed.
- Inform the ER registrar that you are a volunteer who had a work related injury.
- If referred for treatment, you should remain there until treated.
- If you refuse medical treatment you or your department manager must still complete the occurrence report (Risk Notification).
- For information regarding payment of services following an on duty injury, see the policy "Non-Employed Workforce – Work related Injuries and Illnesses" in Policy Manager.

If you have been exposed to blood or body fluids, you must do the following:

- Clean exposed area well with soap and water. If eyes or mucous membrane is involved rinse the area with copious amount of water.
- Report blood exposure immediately as above.
- Report to Emergency Department promptly for medical evaluation, documentation of the exposure and treatment. **YOU SHOULD NOT DELAY TREATMENT.**
- Schedule follow-up counseling per policy.
- If exposure is a known AIDS or Hepatitis patient you will be referred to your primary physician, or Infectious disease physician for appropriate follow-up and test results and your medical records will be submitted to the physician assigned to your care.

Student Occurrence (incident) Reporting / Risk Notification

*****This section applies to Students ONLY*****

If an on the job-injury occurs:

- Notify your instructor, department head and/or school liaison immediately.
- Complete the Non-Patient Occurrence (incident) Report in Meditech. Report to the Emergency Department if medical treatment is needed. Note: Some school programs may require student to be treated elsewhere if not a medical emergency.
- Inform the ER registrar that you are a Student who had a work related injury.
- If referred for treatment, you should remain there until treated.
- If you refuse medical treatment you must still complete the occurrence report (Risk Notification).
- You may be required to report to the laboratory for a mandatory drug screen per the school protocol. Your instructor will advise you on this process.
- If you are referred to an outside physician, do not go until it has been cleared by your school. Appointment must be authorized and arranged for you.
- Do not go to another hospital for follow-up for an injury that has occurred at Bert Fish Medical Center, unless instructed to do so by your school representative.
- Prompt follow-up and treatment is dependent upon student's action post injury.
- If prescriptions are given check with your instructor or school representative for instructions for filling the prescription.

If you have been exposed to blood or body fluids, you must do the following:

- Clean exposed area well with soap and water. If eyes or mucous membrane is involved rinse the area with copious amount of water.
- Report blood exposure immediately as above.
- Report to Emergency Department promptly for medical evaluation, documentation of the exposure and treatment. **YOU SHOULD NOT DELAY TREATMENT.**
- Schedule follow-up counseling per school policy.
- By Florida State law, the injured person must be tested for HIV, or provide a negative test result obtained within 6 months before the source patient can be requested to consent for HIV testing.
- If exposure is a known AIDS or Hepatitis patient you will be referred to your primary physician, worker's comp physician or Infectious disease physician for appropriate follow-up and test results and your medical records will be submitted to the physician assigned to your care.

Ethics and Compliance

Welcome to the Compliance Alliance!

We value an ethical, honest and positive work place, and putting these values into action depends on every member of our organization. You can help us maintain the highest standards of ethical excellence and corporate citizenship by being alert to any situation that harms patients, staff, visitors or the organization. It is important for all members of the workforce to have a general understanding of the Code of Conduct including Patient Privacy Regulations, especially the areas that apply to their job. Here is a summary:

- We will comply with all laws, rules and regulations and we will follow our own internal policies and procedures to the best of our ability.
- We will respect the rights of our patients.
- We will not transfer emergency patients nor restrict access to care inappropriately.
- We will respect patients' decisions about their end-of-life care.
- We will deal honestly with customers, suppliers and consultants including governmental agencies.
- We will be honest in our marketing and advertising.
- We will refrain from business practices that reduce competition.
- We will not make or receive payments to influence patient referrals.
- We will prepare and submit claims for reimbursement only in accordance with applicable laws and regulations.
- We will not knowingly submit a claim that is false. We will not knowingly submit a claim for services that were not rendered at all or not rendered as described on the claim.
- We will not use BFMC resources for political or personal purposes.
- We will not offer courtesies such as money, gifts, or entertainment in exchange for favorable treatment or unfair business advantage.
- We will not accept courtesies from others when it would result in a conflict of interest, such as education or research grants, charitable contributions, money, meals, gifts, travel, lodging or entertainment.
- We will report courtesies received of more than nominal value (\$50) and we will not accept courtesies from others offered in exchange for favorable treatment.
- We will submit accurate time sheets and we will not misrepresent time worked.
- We will keep accurate books and records, and we will protect the property of BFMC.
- We will avoid situations where personal interests may conflict with the interests of BFMC.

- ☑ We will not use alcohol or illegal drugs directly before or during the workday, and we will not consume, possess, or purchase alcohol on BFMC property, except in conjunction with approved meetings or recreational activities.
- ☑ We will provide an environment that is safe for patients, visitors, employees, volunteers and medical staff.
- ☑ We will maintain a workplace that is free from harassment and discrimination.
- ☑ We will safeguard all confidential, restricted or proprietary information, even after the period of our training ends. This means we will respect the confidentiality of information relating to patients, fellow employees, medical staff, the organization, vendors, contractors, and government agencies. We will also comply with special restrictions on information about drug or alcohol abuse, mental health, HIV/AIDS and other communicable diseases.

Everyone has a duty to report suspected violations of the Code of Conduct including Privacy Regulations. Reports regarding Privacy concerns can be made to your supervisor or others as listed below:

- The BFMC Privacy Official, 424-5116
- The BFMC Information Security Officer, 424-6483
- The BFMC Director of Ethics and Compliance, 424-6355

Other Compliance related concerns should be reported to the **Director of Ethics and Compliance** or to any member of the Compliance Committee. Reports can also be made anonymously through the Hotline at **800-273-8452**.

Patient Rights

Our facility as well as all other healthcare facilities have developed and fine tuned a "Patient Bill of Rights." It is important to the patient, patient's family, you, other staff and the institution as a whole to communicate, instill, and follow your patient rights criteria. The Patient Bill of Rights is available in the Patient Welcome Guide (obtained through Patient Registration) and in Policy Manager.

Privacy and Security of Patient Information (HIPAA)

Florida law and federal regulations under the Health Insurance and Portability and Accountability Act (HIPAA) provide important standards to protect individuals' medical records and other personal health information. As part of the healthcare work force, you have an ethical and legal responsibility to keep patient information confidential and secure. Here are a few things BFMC wants you to be aware of:

- Protected Health Information (PHI) can be written, verbal or electronic and includes demographic (Social Security Number, Date of Birth) as well as clinical information.
- BFMC provides locked storage bins to dispose of confidential information in key locations. Documents to be discarded which contain PHI must be placed in these bins for shredding.

- BFMC provides each inpatient a PIN number. They may give this 4 digit number to family and friends who they wish to have more information than a condition and location. The PIN number must always be verified by BFMC before more detailed information is provided.
- Strong passwords should be at least 8 characters long and include numbers, letters (some capitalized), and symbols. Passwords may NEVER be shared.
- It is important that Computers on Wheels (COWS) are kept secure. Never leave a screen containing patient information unattended. Be conscious of those who may be around you. Always log off or end session before leaving your workstation.
- If you happen to see a patient that you know or recognize while serving in your role at BFMC, you must respect that patient's right to privacy and keep knowledge of that hospital visit confidential.
- HIV test results, mental health treatment and diagnosis, substance abuse treatment and diagnosis, genetic testing information are all considered Super-Confidential under Florida Law and should never be released by volunteers or students.
- If a patient requests that no one know that they are at patient at BFMC, contact Patient Access for removal from the public patient directory. Should someone inquire as to that patient's presence in the hospital, the answer would be "That patient is not currently listed in our directory".
- Members of the community clergy may receive a list of patients by denomination only. Volunteer chaplains, specially trained by the hospital, may receive a listing of all patients in order to conduct visitation.
- All HIPAA Privacy or Security Incidents must be promptly reported and documented in the Risk Notification system. These include but are not limited to:
 - a lost USB device/thumb drive with hospital data
 - a stolen hospital lap top
 - inappropriate (paper or electronic) chart access by any staff
 - provision of patient documents to the wrong patient
 - lost documents containing Protected Health Information (records, lists, etc.)
 - mis-faxes (wrong recipient received patient info.)

If you have any question regarding what you can or cannot do with patient information, ask a supervisor or the Privacy Officer.

Cultural Diversity and Sensitivity

Culture is any patterned set of behaviors, knowledge, values, beliefs, experiences and traditions shared by a particular group of people.

Cultural Diversity refers to the mosaic of individuals and groups with varying backgrounds, experiences, styles, perceptions, values and beliefs.

- Culture is best used to *understand* behavior, rather than to *predict* it, since variation within a culture is usually greater than that between cultures.

- It is impossible to predict which aspects of culture any specific individual will have adopted, whether from their traditional culture or from their current environment.

Issues in Diversity are often related to:

- Physical disabilities
- Gender
- Special Needs
- Language Groups
- Race
- Mental disabilities
- Ethnicity
- Religion
- Appearance
- Rural / Urban

Stereotype vs. Generalization

We should strive to stay away from stereotyping. A stereotype is an ending point. No attempt is made to learn whether the individual in question fits the statement. A generalization, on the other hand, is a beginning point. It indicates common trends, but further information is needed to ascertain whether the statement is appropriate to a particular individual.

Cultures Vary Along Several Dimensions:

There are four major dimensions along which cultures vary in ways that will impact the provision of medical care:

- Nonverbal communication
- Desire for information
- Decision making
- Emotional expressiveness

Key Variables for Consideration:

Communication: Gestures

Communication issues often lead to misunderstandings based on cultural differences in the meaning of behavior. Misunderstandings can be caused by the slightest things, for example, gestures, where a common American gesture can be insulting to someone of another country.

Communication: (Lack of) Eye Contact

Eye contact -- or lack thereof -- is another common source of misunderstanding. If a patient or family member is avoiding direct eye contact, you should consider among the possible explanations ones that might be appropriate for their culture.

Personal Space

The appropriate and comfortable distance for standing with someone, known as “personal space,” varies from culture to culture, and affects the way we feel about other people, without even recognizing the source. For example, in the U.S., people tend to stand about 3 feet apart, whereas in other countries, the distance may be greater or smaller.

To Ensure We are Providing Culturally Responsive Care, We Should

- Learn about the beliefs and practices of the patient populations you serve
- Develop a tolerant accepting attitude about views different from your own
- Keep in mind that there is always individual variation within a group
- Ensure we don't make assumptions; we *ask*

Violence in the Workplace

Per the Occupational Safety and Health Administration, violence in the workplace is a serious safety and health issue. Environmental conditions associated with workplace assaults have been identified and control strategies implemented in a number of work settings. Education of the workforce can help to reduce worker exposures to this hazard.

Threats of Violence

Threats of violence have increased due to an overall increase in violence in society. Threats of violence can occur anywhere in the hospital not just emergency room. Often, a nurse is a primary target for violence. Violence is generally initiated by patients and can erupt as a result of a misunderstanding or the stress of a situation.

Should the situation arise, there are five steps to de-escalation:

- Listen
- Empathize
- Clarify
- Problem solve
- Close

Use the following verbal strategies to assist with de-escalation:

- Keep communication open
- Personalize communication. Use their name
- Give choices. “Please stop or I will have to”
- Use “Yes, I understand and I’m going to try to do something about it”
- “What else is upsetting you? What can we do?”
- Beat the person to the punch... accept responsibility and apologize in advance

Should the circumstances escalate to a point where verbal de-escalation techniques are not working and prompt assistance is needed, the employee should call a code Gray. When a code Gray is called, a response team, according to policy, will immediately come to the designated area for assistance.

Material Safety Data Sheets (MSDS) and Hazardous Materials

MSDS are prepared and distributed by each manufacturer and contain information regarding their chemical. Information includes name, physical characteristics, fire and explosion information, reactivity, health hazards, any special protection precautions, and use, handling, and storage information. MSDS are located in each work area and are specific for the chemicals used in that area. All employees should have access to this information. It is important for you to know where the MSDS are located in your area and how to use the information. There is a master copy of all MSDS located in the Emergency Department. There is also a web site where this information can be accessed. www.hazards.com/msds.

Hazardous materials: Labels must not be removed or defaced. Labels must contain the following information

- The identity of the hazardous chemical
- Relevant health and physical hazards

Labels for any chemicals not prepared in house must contain the manufacturer's name and address, emergency phone number, instructions for proper use, storage and handling, and basic protective clothing, equipment and procedures that are needed to work safely with the chemical.

Personal Protective Equipment (PPE) is available for your protection when dealing with potential hazardous chemicals. Proper PPE includes:

- Respirator or masks to prevent being exposed to dangerous vapors, gases or aerosols
- Protective apron/gown for working with disease causing substances or harmful chemicals
- Proper footwear: low-heeled, non-skid, shoes or boots. Non-spark soles or water resistant footwear may be necessary
- Goggles with side shields for handling chemicals or other substances which may splash into your eyes. Full-face shields may also be needed
- Protective gloves for working with infectious materials or body fluids, removing glassware from autoclaves, or handling chemical cleaning solvents

As an employee you have the right to:

- Be informed of potential exposure to hazardous chemicals. Know what you are handling
- Have access to the workplace chemical list and MSDS
- Be trained on the hazards of chemicals to which you may be exposed
- Be informed on the necessary protective measures and be provided with the appropriate PPE
- Register a complaint without fear of reprisal

Electrical Safety

Electricity is everywhere. It is all around us. We use it without even thinking about it. It is important that we do not take electricity for granted. It can injure and kill if not used properly. So stay safe around electricity. Follow these safety rules.

- Remove any defective electrical equipment from service replace/report any defective electric plugs or equipment to the BioMed Department
- Investigate and report any unusual odors coming from electrical equipment or appliances
- Pull out plug by the cord cap, not by the cord
- Do not overload electrical circuits
- No extension cords
- Patients are not to use any personal electrical equipment from outside. Some things, like shavers will have to be approved by BioMed Department
- Report any damaged equipment to the BioMed Department

- Report any shock from equipment and take it out of service immediately
- All critical care patient equipment should be plugged into red outlets

Fire Safety

Fire is Fast!

- A small, contained fire, such as in a trash can, may turn into a huge, out-of-control fire in a matter of seconds.
- You must act quickly when smoke or flames are visible.
- Always use the RACE and PASS mnemonic guides when a fire is discovered.

RACE

- R – Rescue anyone in immediate danger
- A – Alarm; Pull the nearest fire alarm station AND call 5911 to give the exact location and nature of the fire.
- C – Confine the fire by closing all doors and windows.
- E – Extinguish or Evacuate

PASS (Using a fire extinguisher)

- P – Pull the pin using a twisting motion
- A – Aim the nozzle at the base of the fire from 6-10 feet away
- S – Squeeze the handles together
- S – Sweep the nozzle from side to side

If the fire is not extinguished after ONE extinguisher is empty – EVACUATE THE AREA.

The Triangle of Fire

- Fire requires OXYGEN, HEAT AND FUEL.
- If any of the three points off the triangle are absent, there will be no fire.
- Hospitals have a higher fire danger than other industries due to the possibility of higher than normal oxygen concentrations.

Oxygen Storage

- Oxygen canisters cannot be stored with and combustible materials such as linens, cardboard, paper, flammable chemicals or accelerants such as gasoline or alcohol.
- Oxygen canisters must be stored upright in an approved holder or strapped to the wall.

Other Flammable Materials

- Must be stored in an approved fire safe cabinet.
- Flammable or combustible materials cannot be used for cleaning.

Emergency Management

The hospital maintains a comprehensive all-hazards emergency preparedness and management plan. Workforce members are expected to be knowledgeable about their role in an emergency response. Each hospital department also maintains a departmental emergency plan. You should be familiar with the hospital's emergency codes:

RED: Fire	WHITE: Hostage
BLUE: Cardiac Arrest	YELLOW: Lockdown
PINK: Child Abduction	GREEN: Disaster Alert
BLACK: Bomb	BROWN: Weather
ORANGE: Hazmat	CODE M: Elopement
GRAY: Security Alert	ASSIST: Medical Assistance

You will receive an easy access badge add-on to wear with these codes while at BFMC.

Back Safety

Your back is the main supporting structure of your entire body. Knowing the basics of back care can make the difference between a healthy back and an aching one.

A number of physical conditions, such as curvature of the spine (scoliosis) arthritis, and herniated discs can cause back pain. The majority of backaches are due to poor posture and weak supporting muscles. By utilizing proper posture when you sit, stand, lift, move, and recline, you can decrease the incident of back pain. With exercises that strengthen and increase flexibility, you can prevent the most common causes of backaches. The result is freedom from back pain and a stronger healthier back.

Lifting correctly is very important. Safe lifting is easy to learn, simple to do, and may be one of the most important skills you'll ever learn. Safe lifting techniques keep your back in balance and can protect you and your back from accidental strain and overload.

Here is how to lift safely:

1. Visualize the lift
 Think – Can I lift it by myself?
 Can I hold it close to my body?
 If the answer is no, get help
2. Tuck your pelvis
 By tightening your stomach muscles, you can “tuck “your pelvis to keep your back in balance
3. Bend your knees
 Bend at your knees instead of your waist. Use the large muscles of your legs to support your back and carry the weight
4. Hug the Load
 Hold the object you're lifting as close to your body as possible. Then gradually straighten your legs to a standing position
5. Avoid twisting
 Twisting while you lift or carry increases the load on your back and can lead to serious injury. Be sure your knees and torso are facing the same direction when lifting and carrying.

Note: You may utilize available LIFTING DEVICES provided that you

- obtain training before using it on a patient
- have adequate supervision
- ensure that it is appropriate for the patient.

Consider utilizing lifting devices in non- patient care areas as well, which can help move equipment and furniture and minimize the need to lift. Consult the department manager for strategies to minimize

risk of injuring your back and on safe handling techniques that contribute to patient and employee safety.

Infection Control

Infection Control is Everyone's Business, including Physicians, Volunteers, Staff, Patients, Students, and Visitors. If you have questions about Infection Control or anything during this training, *call the Nursing Supervisor (5102) or call the IC office at 424-5185.*

CHAIN OF INFECTION

Sources of Infection:

- Patient, volunteer, visitor, or employee either infected or colonized.
- Environment – Bacteria & viruses
- Equipment – If not cleaned, disinfected or sterilized properly.

Method of Transmission:

Infections are spread from the source to the susceptible host in very specific ways. Standard Universal Precautions and isolation can help break the chain of infection.

Do not work when sick with:

- Nausea, vomiting, or diarrhea
- Acute upper respiratory infections
- Flu-like symptoms
- Rashes (including shingles)
- Skin infections (especially MRSA)

Report infections and exposures to infections such as meningitis, TB, scabies, and hepatitis to the Employee Healthline **424-5105**.

Proper hand hygiene is VITAL to Infection Prevention

- *Use hand hygiene, even if gloves have been worn*
 - Before patient contact
 - After contact with used patient care equipment
 - Between contact with different patients
 - During patient care (per procedures)
 - before and after invasive procedure
 - before and after contact with wound
 - between procedures on different body parts of the same patient
 - Between glove changes
 - Immediately, if skin is contaminated or an injury occurs
 - Before eating

What is required for proper hand hygiene?

- In non-patient care areas and activities, the hospital-approved regular soap should be used.
- For patient care activities, use hospital-approved antimicrobial soap (Hibiclens®).
- For visible soiling use soap and water or Hibiclens®.
- For best results when using soap and water, use friction and lather for a minimum of 15 seconds.

* As a supplement to or in place of hand washing, use hospital-approved alcohol-based hand rinse – IF hands are not visibly soiled. Squeeze generous amount (at least a teaspoon) into cupped hands. Rub vigorously until dry - - about 10-15 seconds.

Bloodborne Pathogens Exposure Control Plan

OSHA requires an Exposure Control Plan (ECP) and education to provide a safe working environment and reduce the risk of exposure to bloodborne pathogens. For further information on any OSHA standards, go to <http://www.osha.gov/>

The BFMC Bloodborne Pathogen Exposure Control Plan is in the BFMC Infection Control Manual on Policy Manager.

Personal Protective Equipment (PPE)

- ◆ Gloves
- ◆ Gown
- ◆ Protective Eye and Face Shield
- ◆ Masks
- ◆ Others
 - ◆ Boots, shoe covers
 - ◆ CPR shield

To protect yourself, you *must*:

- ◆ Wear PPE appropriately
- ◆ Anticipate the type of PPE needed and make sure it is available.
- ◆ Remove PPE before leaving the work area.

Respiratory Hygiene/ Cough Etiquette

- Cover nose/mouth when coughing or sneezing
- Use tissues to contain secretions
- Dispose of tissues in wastebasket
- Use hand hygiene afterwards
- Keep materials available in waiting rooms for patients, visitors and staff
- Provide surgical mask for persons who are coughing and not covering their cough
- Cough into sleeve if hand hygiene is not readily available.

BE CAREFUL WITH SHARPS

- Do not recap by hand
- Use one-hand technique or a recapping device--only if recapping is unavoidable.
- Use safety syringes, needle-less IV system and other safety products whenever possible.
- Replace sharps containers when 3/4 full
- Immediately dispose of sharps in sharps container
- Be observant for sharps in dressing, linens and when picking up trash.

Work Practice Controls

- Hand washing
- Do not recap needles by hand

- No food/drink in refrigerators with blood or other infectious materials
- Do not drink, eat, apply cosmetics/lip balm, or handle contact lenses in areas where blood/body fluids may be present
- Keep work area clean and decontaminated
- Use proper cleaning/disinfecting/sterilization practices for equipment and work areas
- Label potentially contaminated equipment

Prevention Strategies

- Don't pass sharp instruments blindly; verbally communicate with receiver before passing.
- Let patient know what is about to happen; get help to hold patient still.
- Avoid recapping contaminated needles.
- Use blood transfer device to transfer blood from syringe to fill a blood tube.
- Hepatitis B Vaccine.

Waste Management

Definition of Biohazardous Waste: "any solid or liquid waste which may present a threat of infection to humans."

For the "*Biohazardous Waste Management Plan*", see the Environment of Care Manual and the "*Waste Management*" policy in the BFMC Infection Prevention & Control Manual, Section 7.

Biomedical Waste Containers for "Regulated Waste Disposal"

- Replace waste containers when $\frac{3}{4}$ full.
- All Biohazardous waste containers must be labeled with biohazard label.
- Wear gloves to handle contaminated waste.
- All containers must be labeled according to U.S. Dept. of Transportation rule and Florida Statutes.

Key Points for Cleaning & Disinfection of Patient Care Surfaces/ Equipment

- Use proper PPE (gloves, gown, eyewear)
- First remove gross debris and organic matter by cleaning
- Then, use "approved" hospital disinfectants
- For blood contamination, Bleach is the cheapest & best disinfectant. However disinfectants with an EPA label as "Tuberculocidal", "hepacidal", or for "bloodborne pathogens" may be used.

Key Points for Cleaning & Disinfection of Patient Care Surfaces/Equipment

- Reusable patient care equipment must be properly disinfected after each use between different patients. This includes stretchers, wheelchairs, stretcherbeds, etc.
- Follow the contact time on the label for the longest time listed.
- Hepatitis can live on environmental surfaces for longer than a week.
- HIV is very fragile and is easily inactivated by most disinfectants in a short contact time. However, some bacteria require a longer contact time such as staph.
- Therefore, the longest time listed on the label should be followed.
- Volunteers are to contact staff members to clean items contaminated with blood or body substance.

TB Exposure Control Plan

- TB control requires early recognition of persons with tuberculosis and prompt isolation.
 - Early Recognition
- Screen all patients for signs and symptoms
- Recognize signs and symptoms
 - Place surgical mask on coughing patient with symptoms of TB
- Adequate specimen testing
- Report AFB smears within 24 hours of collection
- Initiate and maintain AIRBORNE Infection Isolation
- TB testing occurs at the time of employment. Testing would occur if an employee is exposed to a High Risk environment (BFMC is considered a low risk environment).

Tuberculosis (TB)

- Agent -- Mycobacterium tuberculosis (acid fast bacillus -- AFB)
- Reservoir - man
- Transmission – airborne droplet nuclei

TB -- Signs and Symptoms

- Bloody sputum
- Weight loss
- Loss of appetite
- Night sweats

Isolation

“Standard” versus “Transmission- Based” Precautions

- “Standard Precautions” means to assume that everyone has something infectious, wear the appropriate protective equipment if you might have contact with the infective source, and use hand hygiene after contact with all patients and items in their environment.
- Some diseases need an additional level of precautions based on how they are transmitted or spread – therefore use the appropriate category of “Transmission-Based Precautions”.

Transmission-Based Precautions

- Transmission-based precautions apply to patients with documented or suspected infections or colonizations that are highly transmissible and include:
 - AIRBORNE Infection Isolation
 - DROPLET Precautions
 - CONTACT Precautions
- They are used in addition to Standard Precautions.
- Volunteers are not to enter rooms of patients on isolation precautions.

Airborne Precautions

- Persons infected with active Tuberculosis, Measles, and Chicken- pox expel droplet nuclei which carry the infectious organism that can be released into the air and carried by air currents. Airborne Infection Isolation should also be used for patients with SARS and Avian Influenza.

- Negative pressure ventilation is required for diagnosed or suspected airborne-transmitted organisms.

Droplet Precautions

- Droplets are formed when a person coughs, sneezes, speaks, spits, sings, or undergoes tracheal/bronchial suctioning.
- Diseases transmitted by the droplet route include influenza, meningococcal meningitis, among others.
- Droplets do not remain suspended in the air and only travel about 3 feet, but may contact another person's conjunctivae or mucous membranes of eyes, nose or mouth.

Droplet Precautions Require

- Private room (except as directed by Infection Control)
- STOP sign marked "Droplet Precautions", Door may remain open
- Wear surgical mask when within 3 feet of patient
- Wear gloves and isolation gown if contact with respiratory secretions or contaminated environment is anticipated
- Patients to wear surgical mask for transport out of room
- Education of patients and visitors regarding Respiratory Hygiene/Cough Etiquette and droplet transmission
- Remove Personal Protective Equipment before exiting room
- Wash hands with antimicrobial soap and water or use hand sanitizer after removal of PPE

Contact Precautions

- Contact or touch is the most common and most significant mode of transmission of infectious agents.
- Contact precautions are used for all patients with colonization or infection due to multi-drug resistant organisms (MDROs), infection due to *Clostridium difficile*, and other significant pathogens.
- MRSA (Methicillin Resistant *Staph aureus*) in the respiratory track requires both Contact and Droplet Precautions.

Contact Precautions Require

- Private room or roomed with another patient with the same infection, but no other infection.
- Use of PPE (gowns and gloves) to enter the room and removed just before exiting
- STOP sign on door, marked "Contact".
- Dedicate equipment for the patient's exclusive use.
- Disinfect all transport vehicles after patient use.
- Educate patient (or responsible family member)
- Dedicate equipment for the patient's exclusive use (stethoscope, sphygmomanometer, glass thermometer, tourniquet, bedside commode, B/P cuff).

Contact Precautions Require

- Minimize transport of patients. If transport is necessary, make sure that gown and linens are clean and not soiled with diarrhea before transporting.
- Ancillary departments to meticulously clean all horizontal surfaces with hospital disinfectant and Clorox.

- High touch surfaces/items needing daily cleaning include: bed-rails, bedside tables, IV pumps & buttons, monitor buttons, light switches, grab-bars, flush controls, doorknobs, bedside commode handles, call-lights, and TV controls.

MULTIDRUG-RESISTANT ORGANISMS (MDROs)

- Any patient with a previously identified infection with MRSA, VRE, other MDRO, or *C. difficile* will have that information noted on the bottom of the registration form for subsequent admissions.

***Clostridium Difficile* - associated disease**

- Wear gowns and gloves when entering the room, for every entry.
- Wash with soap and water or antimicrobial soap and water after removal of PPE.
- Change gloves after contact with infectious material.
- Daily clean all high touch surfaces in the patients room with Clorox germicide wipes.
- Maintain contact precautions for entire admission unless discontinued by Infection Control.

Remember: Everything you touch has been touched by someone else! Finally, please remember that hand washing is your most important means for preventing infection in YOU!

Thanks for washing your hands!

Harassment and Discrimination

BFMC supports a work environment free of discriminatory practices or sexual harassment involving patients, visitors or co-workers. It is the policy of BFMC that employees and their work environment shall be free from all forms of harassment. These behaviors include inappropriate jokes, slurs, and intimidation.

Sexual harassment in any form is not tolerated, including unwelcome sexual advances, request for sexual favors, and other verbal or physical conduct of a sexual nature. Any employee, who believes an employee, manager, supervisor or physician is subjecting him/her to sexual harassment, or their employment is being adversely affected by such conduct, should report such incidents to their supervisor, department manager, the employee relations supervisor, human resources manager, or the compliance officer. The full harassment policy can be found in Policy Manager.

Personal Appearance

Personal appearance, hygiene, and attire are very important. A professional image must be maintained to instill confidence in the minds of our patients, vendors and visitors. Your appearance should be consistent with good hygiene, safety and what our hospital considers appropriate business or clinical attire.

Guidelines:

- Hair: Must be clean and neat; facial hair, neat and trimmed
- Nails: Should be well groomed; colors and length appropriate to job duties
If performing patient care, artificial nails are not allowed
- Make-up: Appropriate and not excessive makeup is allowed
- Perfume/cologne/aftershave: No fragrances are allowed
- Jewelry: Wedding rings, watch, a simple necklace and earrings are allowed.
- Shoes: Should comply with departmental dress code; clean and neat no backless shoes
- Clothing: Should be clean, neat, in good repair and properly fitting. No shorts or denim pants (blue jeans)

In addition to adhering to the Personal Appearance policy which may be read in more detail via Policy

Manager, volunteers, and students are also required to comply with other established dress code requirements imposed by their governing body.

Smoking

Bert Fish Medical Center is proud to be a tobacco-free environment. Tobacco usage is not permitted anywhere on the hospital campus. Patients who smoke are encouraged to speak with their caregiver about available options such as smoking cessation materials that can be ordered by their physician.

Hospital Parking

Student parking is located south of the employee parking in the First Presbyterian Church parking lot at the corner of Anderson and Magnolia. Volunteers may park in the employee parking lot on the east side of Live Oak across from the Emergency Department.

Important Contact Numbers

POSITION	TELEPHONE
Staff Development Coordinator	424-6356
Biomed	424-5194
Ethics and Compliance	424-6355
Information Security Officer	424-6483
Infection Control	424-5185
Nursing Supervisor	424-5255
Planetree Coordinator	424-6355
Privacy Officer	424-5116
Risk Manager / Safety Officer	424-5052
Quality and Patient Safety	424-5103

Please complete the attached quiz and turn it into your instructor.

BFMC STUDENT SELF LEARNING ORIENTATION QUIZ

Risk Management

1. An incident is "Any happening that is outside the usual, customary or ordinary activities of the facility."
 - a. True
 - b. False
2. If there is an allegation of sexual misconduct brought to your attention, you must contact the facility Risk Manager immediately, by the most expeditious means available, including after hours and on weekends.
 - a. True
 - b. False
3. Incident reports (Risk Notification) are internal confidential documents and cannot be released, copied or transmitted to anyone other than through Risk Management and must be completed and forwarded directly to Risk Management by the end of the shift in which the event occurs.
 - a. True
 - b. False
4. No workforce member will ever be reprimanded for completing an incident report (Risk Notification).
 - a. True
 - b. False

Ethics and Compliance

1. What is the Code of Conduct?
 - a. Guidelines for ethical behavior for employees of BFMC
 - b. Steps for disciplinary action
 - c. Procedures to follow in case of a disaster
2. What kind of information would you consider reporting to Ethics and Compliance?
 - a. Actions that are potentially against policy, law or regulation
 - b. Personality conflicts with a co-worker
 - c. Questions about benefits
3. How can you report a compliance concern?
 - a. Hotline
 - b. Email
 - c. Telephone
 - d. All of the above

Privacy and Security of Patient Information (HIPAA)

1. Patient information must be WRITTEN to be considered confidential and protected.
 - a. True
 - b. False

2. It is acceptable to dispose of a document containing only patient name and social security number in the general trash, as it provides no diagnosis or treatment information.
 - a. True
 - b. False

3. If a friend asked me to look up medical information on a relative who was once a patient, it would be appropriate for me to utilize the computer system to provide this information since I am authorized for this type of access to assist me in performing my job responsibilities.
 - a. True
 - b. False

4. A patient can ask to be removed from the hospital directory so their presence would not be available to callers/visitors.
 - a. True
 - b. False

Violence in the Workplace

1. Violence has filtered into the hospital setting due to:
 - a. An increase in mental illness
 - b. Stress of healthcare issues
 - c. An increase of violence in society
 - d. Cost of healthcare

2. Warning signs for threat of violence are:
 - a. Fear of the unknown
 - b. Perceived threat to one's well being
 - c. Lack of fulfillment of one's goals
 - d. Threat to one's personal space
 - e. All of the above

Material Safety Data Sheet and Hazardous Materials

1. MSDS Stands for:
 - a. Most Significant Daylight Schedule
 - b. Material Safety Data Sheet
 - c. Money Saving Detail Sheet
 - d. Moving Safely Device Summary

2. A MSDS contains which of the following:
 - a. The name of the manufacturer.
 - b. The procedures for large and small spills.
 - c. The treatment required if exposed to the substances
 - d. All of the Above

Fire Safety

1. The mnemonic RACE stands for:
 - a. React, Activate, Calibrate, Evaluate
 - b. Rescue, Alarm, Confine, Extinguish or Evacuate
 - c. Return, Answer, Create, Enable
 - d. Rescue, Announce, Cancel, Extinguish

2. The mnemonic PASS is used to remember:
 - a. Pull, Aim, Squeeze, Sweep
 - b. Point, Act, Scream, Scurry
 - c. Participate, Announce, Slam, Sweep
 - d. Pull, Alarm, Set-up, Sweep

3. The three points of the Triangle of Fire are:
 - a. Observation, Heat, Gasoline
 - b. Fuel, Heat, Flames
 - c. Oxygen, Fuel, Heat
 - d. Fuel, Heat, Observation

4. Hospitals have a higher risk of fire than many other industries due to:
 - a. The possibility of higher than normal oxygen levels in hospital air
 - b. The type of construction used in Hospital buildings
 - c. Hospitals use natural gas to operate boilers
 - d. There are no fire alarms in hospitals

Emergency Management

1. A code RED signifies:
 - a. Fire
 - b. Lockdown
 - c. Hazmat
 - d. Weather

2. A code BLUE signifies:
 - a. Violence
 - b. Hostage
 - c. Cardiac Arrest
 - d. Child Abandonment

3. A code GRAY signifies:
 - a. Elopement
 - b. Security Alert
 - c. Bomb
 - d. Sale in the Gift Shop

Back Safety

1. Prior to lifting a patient, you need to do the following
 - a. Do a mental lift and plan your move including getting help as needed
 - b. Identify if the lift can be done using mechanical devices while maintaining safety and dignity of the patient.
 - c. Ensure that you follow body mechanics to minimize risk of injury to your back
 - d. All of the above

2. When do you use mechanical lifting devices?
 - a. When patients are heavy and cannot be hugged, in this case a mechanical lifting device may be a better choice provided you are trained and it is appropriate for the type of lift
 - b. When you cannot find help provided that you have been trained on the use of the mechanical lift and it is appropriate for the type of move. Ensure that you maintain safety by utilizing proper body mechanics while using patient lift.
 - c. None of the above, mechanical lifting devices are not patient centered
 - d. a and b

Infection Control

1. At BFMC, hand hygiene is expected:
 - a. Before and after patient contact
 - b. After touching used patient care equipment
 - c. Before eating
 - d. After removing gloves
 - e. All of the above

2. Respiratory Hygiene means:
 - a. Covering coughs
 - b. Washing hands
 - c. both a & b

3. If you are stuck with a contaminated needle you should:
 - a. Immediately wash the exposed area
 - b. Pull the Blood Exposure Packet and follow the directions
 - c. Go immediately to the ED with the appropriate paperwork.
 - d. File a Risk Management Report within 24 hours.
 - e. All of the above

4. Both Contact and Droplet Precautions should be used for patients with MRSA in the respiratory track.
 - a. True
 - b. False

Please Print:

Name:	Date:
School (if applicable):	Signature:
Program (if applicable):	Instructor Initials: