Portneuf Health Partners
Volunteer Program

Portneuf
HEALTH PARTNERS

All together **better**

Table of Contents

ORIENTATION SELF-STUDY GUIDE

Welcome to Portneuf Medical Center. This orientation self study program is designed to quickly get you acquainted with Portneuf Medical Center. Please read the booklet and then take the post test. Give your completed post test to your instructor.

OBJECTIVES:

After completing the self study guide the reader will be able to:

» Identify the Mission of Portnuef Medical Center.

» Understand the role of leadership in our organization.

» Understand the importance of the Environment of Care Plan.

» Understand the staff role in keeping Portneuf Medical Center safe.

» Understand the staff role in emergencies.

» Identify unsafe conditions and reporting methods.

» Identify the how, what, why and where of standard precautions.

» Understand patient / resident rights and responsibilities.

» Understand how to recognize abuse.

» Understand hospital policies regarding limited English proficiency patients.

» Identify two rules of back safety.

» Identify staff role in customer service.

MISSION STATEMENT

Portneuf Medical Center provides compassionate, quality health care services needed by the people of Eastern Idaho in collaboration with other providers and community resources.

VALUES STATEMENT

Our shared core values:

» Confident – We draw on knowledge and compassion to provide the highest level of care.

» Uncompromising – We work together to do the job right.

» Resourceful – We seek out ideas, tools, and solutions to deliver a better patient experience.

» Respectful – We treat our patients and each other with dignity and respect.

» Generous – We give of ourselves and give back to our community.

PRIVACY INFORMATION

Healthcare workers are continually exposed to information concerning patients and their health status. We should all know and have been trained that this information is very sensitive and should be protected from incidental disclosure.

In 1996, the federal government enacted the Health Insurance Portability and Accountability Act (HIPAA) as a law designed to reform healthcare by ensuring the provision of certain benefits and rights to patients.

In 2001, a section of the law, now known as the Privacy Rule, established regulations identifying patients' rights and ensuring protection against the misuse or inappropriate disclosure of individually identifiable information (known as Protected Health Information or PHI). The Privacy Rule has been in effect since April 14, 2003.

The Privacy Rule provides guidance and limitation on the use and disclosure of patient identifiable information (PHI), defines rights that patients have relative to this information, and imposes criminal and civil penalties for improper use or disclosure. Furthermore, the Privacy Rule limits the use and/or access to PHI by other "third parties".

Portneuf Medical Center enforces a confidentiality policy as part of our overall compliance program. We believe the Privacy Rule gives further clarification to our commitment to ensure that our patients' information is protected and that we will strive to safeguard it as we would if the information were about ourselves.

HIPAA PRIVACY RULE

WHAT YOU NEED TO KNOW

» HIPAA covers Protected Health information in all medical, billing, and payment records as well as oral communication concerning patients' health status.

» Protected Health Information (PHI) includes demographic information such as the patients' name (including relatives and employees as patients), addresses more specific than state, telephone and fax numbers, email addresses, social security or other ID numbers, facial pictures, benefit or account or medical record numbers, any license number, network or email or IP address, vehicle, or any other uniquely identifying number, code, or characteristic.

» Information identifying a patient can be used, with the appropriate confidentiality, for the continual treatment process, payment process, or operation of the facility without documenting the release.

» We must follow existing policy on privacy, confidentiality, and release of information.

» We will provide a Notice of Privacy to every patient and will have it prominently displayed and be available on our Internet and Insider web pages.

» Do not share any more patient information than is required for the situation.

» Always ask your department manager or director if you are not sure about releasing any patient information. Further inquiries can be directed to the Privacy/Compliance Officer or the Health Information Management Department (HIM). Always use your best judgment when addressing any release of patient information.

» You have the right to approach any individual in the facility and ask them if they need assistance to discover why they may be in a location they shouldn't be or you feel is violating a patient's privacy.

» You have the right to approach any individual in the facility and ask them to find a more private location to discuss a patient so that they won't be overheard.

» You have the right to approach a person in the facility and ask them to protect information that you see should be placed in a more private location.

» We will track the occasional sharing of patient information outside of Portneuf Medical Center and provide a list of these disclosures to the patient upon request. If you are involved with an accidental disclosure, you must report it and complete a form about the disclosure.

» We will not take any action against any person who files a complaint with the U.S. Department of Health and Human Service's Office of Civil Rights.

The Security Rule, another provision of law associated with HIPAA (Health Insurance Portability and Accountability Act) has been in effect since April 20, 2005. The Security Rule serves as the second part of the Privacy and Security Section of the HIPAA law.

The other sections address:

Standard Transaction Sets (electronic standards for sending information to payors using a uniform set of transactions). This section went into effect in October, 2003.

The **Standard Identifiers** section went into effect July, 2004 (This sections addresses the need for unique identification codes for every healthcare participant in the nation, including individuals, businesses, and providers).

HIPAA Security Rule

HIPAA SECURITY RULE

WHAT YOU NEED TO KNOW

» Uses many of the same definitions as the Privacy Rule provided for in 2003.

» Our **Privacy Notice** is given to every patient and employee annually that specifies an individual's rights under the law.

» Protected Health Information (PHI) defines what information is protected by the law. The security rule further defines **Electronic PHI (ePHI)**.

» **Business Associates Agreements (BAA)** are needed for all business or vendor relationships, as defined by the Security Rule, to insure the parties' compliance under the law.

» The release of information, as **Minimum Necessary**, to complete a request for patient information.

» Our participation in a program of **Active Challenge**; every member has an obligation, to every other member of our organization, to help one another comply with the rule.

» When a violation occurs, such errors are documented utilizing the **Release of HIPAA Information in Error** form on the Insider (contained under the Forms and Consents section) and the completed form forwarded to the Health Information Management.

» That our medical staff has agreed to an **Organized HealthCare Arrangement (OHCA)** that states they will abide by Portneuf Medical Center's HIPAA implementation standards.

» The **Security Rule** is divided into three sections; **Administrative Safeguards**, **Physical Safeguards**, and **Technical Safeguards**. Each section corresponding to three areas that we each need to manage.

Administrative Safeguards mandate the use of formal policy and procedure when accessing patient information.

Portneuf Medical Center's formal policy defines the process for obtaining, utilizing, monitoring, and reporting your access to patient information including requests, sanctions, processes, and the termination of access.

» The clearance and training you receive at orientation for your position about HIPAA (orientation packet).

» Your familiarity with what to do in the event your computer system is unavailable and how you will complete your tasks without its use (*e.g.*, in the event of a disaster). This should include access to your systems if it were not available for multiple days and how to "catch up".

» Do not share your passwords or codes and do not share those of another employee. Do not leave patient information on the screen when you step away from your computer.

» Be sure that new members of your Portneuf team are aware of the HIPAA law and help safeguard electronic patient information as you would manage written patient information.

In the event of a security violation, or potential violation, report such incidences to your supervisor. Your supervisor will assist you completing a HIPAA violation form which, upon completion, will be forwarded to Health Information Management.

Physical Safeguards involve those mechanisms we use everyday to provide for the Security Rule.

» The process to request computer access and the repeated changing of your security codes.

» Access to various computer systems based upon the Minimum Necessary Standard.

» Keeping patient information safe behind locked doors (if needed) and not open or available to the public, especially not leaving patient information on your computer screen when you step away.

Removable media, including CDs and CD burners, floppy disks, and USB storage devices, **can only be used by filling out a form that will be kept on file**. This form specifies that you will protect any patient information that might be placed on these mediums and that we may periodically audit their content.

Technical Safeguards address the requirements we need in place to share our computer information.

» Ensure that you are sending information to the correct individual or entity; verify that the recipient is whom you think it is and that they received the information completely. (document errors with the Release of HIPAA Information in Error Form).

» Portneuf will randomly audit all access to computer systems and the Internet and periodically report the results to the Organizational Integrity Committee to evaluate if changes are needed.

» Implement security mechanisms to minimize the chance of theft, incomplete transmission of information, and authentication of who is requesting the information.

WHAT CAN I DO?

Do not share your computer codes with anyone. Be sure to get them changed if you do.

Know what to do when the computer systems are not available and how to "catch up".

When a violation occurs, such errors are documented utilizing the **Release of HIPAA Information in Error** form on the Insider (contained under the Forms and Consents section) and the completed form forwarded to the Health Information Management.

Keep all Protected Health Information safe by keeping doors that should be closed, closed.

Do not leave patient information on the computer screen when you step away.

Do not "surf" your computer applications and see what you can get into (the use of the computer systems, by any individual granted access, is randomly audited).

Plan for Provision of Care

Use **Active Challenge** to help each other maintain an environment of safe and secure use of patient information.

Do not be careless and leave Patient Information in locations that may allow someone to "look over your shoulder".

Ensure that you are sending information to the correct individual or entity; verify that the recipient is whom you think it is and that they received the information completely (document errors with the Release of HIPAA Information in Error Form).

PLAN FOR PROVISION OF CARE

The Center plan for the provision of Patient Care is the framework for defining how patient care is delivered. The Plan describes how policies and procedures are integrated to provide Patient Care. In all cases, approved Center policy governs center practice.

SCOPE OF SERVICE

In 2009, Portneuf Medical Center became a for-profit privately-owned medical center following the consolidation of Pocatello's two hospital merger in October 1, 2002.

Bannock Memorial Hospital was built in 1951, as a replacement for the "Pocatello General Hospital" built in 1909. Bannock's long term care facility opened in 1963 as a 50 bed facility known as Bannock Nursing Home and consolidated with Bannock Regional Medical Center in 1995.

St. Anthony Mercy Hospital opened its doors in 1918 under the direction of the Sisters of Mercy. In 1966 the Sisters of Mercy changed the hospital's name to St. Anthony Community Hospital reflecting its commitment to the community. In 1977 feeling their mission was complete the Sisters of Mercy transferred ownership to Intermountain Health Care, a non-profit hospital system. In June of 1982 Pocatello Regional Medical Center was dedicated on the new site above Pocatello.

In October of 2001 Bannock and Pocatello Regional Medical Centers embarked upon the process that would join the two hospitals under one governing board and one name. In October of 2002 that process became reality. Portneuf Medical Center opened its doors, continuing the mission of caring and compassionate quality healthcare begun in the 1900s.

The Center provides a comprehensive range of services. A complete range of health maintenance and wellness education programs is also offered. The Center is a teaching facility, associated with Idaho State University, the University of Washington, and other out-of-state teaching institutions or universities, training students in Radiology Technology, Laboratory Science, Physical Therapy, Social Work, Pharmacy, Dietetics, Professional and Practical Nursing, Physician Residents in Pediatrics and Family Practice, Medical

Students, Physician Assistants, Paramedics, Emergency Medical Technicians and Nursing Assistants. Portneuf Medical Center is licensed for 262 acute care beds and 28 bassinets.

A complete copy of the Plan for Provision of Care is available on the Insider.

CUSTOMER SERVICE

Each one of us assumes the role of customer many times in our daily life. When we assume the role of a customer we expect to be treated with courtesy, respect, and honesty. Health care customers expect this same treatment.

In health care we have four types of customers:

1. the patients,
2. their families and friends,
3. the physicians who care for them, and
4. our co-workers.

Staff behavior toward our customers is the most powerful marketing and customer satisfaction tool we have. Marketing and advertising makes the promises to the customer, but . . .

. . . it's the staff who keeps them.

Did you know that 96% of unhappy customers do not complain to you? And that 90% of unhappy customers will not choose our health care facility the next time around? A customer who is dissatisfied with service will tell 20 relatives and friends. If they are happy with their service they will tell only five people. If we want to keep our customers, we must meet their expectations of honesty, respect and courtesy in everything we do.

What can you do to help? Put a smile on your face when you approach others. Watch for someone who looks lost or confused; stop and take them to their destination. Always maintain customer's dignity by providing privacy, treating with respect, and maintaining confidentiality. Listen to what others have to say and respond. Remember that each time you answer the phone or speak with a customer, you represent Portneuf Medical Center.

MANAGEMENT OF THE ENVIRONMENT OF CARE

The "Environment of Care" refers to the variety of sites where patients are treated. These include both inpatient settings (such as acute care hospitals, sub-acute facilities, geriatric facilities as well as outpatient settings (clinics, pre-admission testing offices, same-day surgery centers, dialysis centers or imaging centers). The environment of care includes using processes and activities to reduce and control

environmental health hazards and risks, prevent accidents and injuries, and maintain safe conditions for patients, visitors, and employees.

» A safe, functional and effective environment for patients, employees, and other individuals is crucial to providing quality patient care and achieving acceptable outcomes. The goal of this function is to provide such an environment.

Americans with Disabilities Act (ADA)

The purpose of the ADA is to remove barriers that deny individuals with disabilities an equal opportunity to share in and contribute to the vitality of American life. The ADA provides for access to jobs, public accommodations, government services, public transportation and telecommunication. Individuals covered under ADA include anyone with physical or mental impairment that substantially limits one or more life function.

Effective Communication

The Center must provide appropriate auxiliary aids to assist individuals with disabilities. See policy and procedure 7490.110. These services may include qualified sign interpreters, translators, notetakers or qualified readers. Contact the operator for interpreter services or use the Optimal Phone Interpreters (OPI).

PHONE INTERPRETING SERVICES

OPTIMAL PHONE INTERPRETERS (OPI)

Quick Reference Guide for Telephone Interpretation Services. Please review prior to initiating the conference call.

How to assist with meeting your limited English-speaking patient or customer needs when language is a barrier to communication.

Before I Call

» Know the language that is needed.

» Be prepared to brief the interpreter about the nature of the call before he/she speaks to your Limited English Speaker.

» If you do not have the patient on-site and need to call them please provide the phone number to the operator and she will provide the 3 way connection.

How Do I Make a Call to OPI

» Dial 1-877-746-4674

» State what language you need

» Where you are calling from (Portneuf Medical Center)

» Your first name

» Your department

During the Call

» Speak in short phrases or sentences.

» Avoid slang, jargon, and technical terms.

» Check for understanding from your Limited English Speaker throughout the call. If needed, rephrase the questions or statements until understood.

» When speaking to the interpreter, do not give and/or ask too much information at one time. Although the interpreter will not have difficulty translating the information, your Limited English Speaker may have difficulty understanding all at once.

» Ask questions in the first person. Avoid asking questions to the interpreter such as *"Can you find out when he arrived?"* Instead, ask the interpreter to ask the Limited English Speaker, *"When did you arrive?"*

» Make sure to pause to allow the interpreter time to translate and the Limited English Speaker time to respond.

Ending the Call

» Before ending the conversation, ensure that both your Limited English Speaker and the interpreter knows that the session is about to end.

Telecommunication Device for the Deaf

A portable TTD is located in the Maintenance office and can be checked out for patient use.

SAFETY: GENERAL INFORMATION

Safety Officer: **Reed Worley, Director of Engineering**

Safety Manual: **The Safety and Environment of Care Manual is available on the Insider page**
(access on the computer by clicking on internet, http://insider/)

Be familiar with the Safety Manual's location and the information that is contained in it. The safety manual includes information on the seven Environment of Care Plans. These are:

1. Safety Management

2. Security Management

3. Hazardous Material Management

Safety: General Information

4. Emergency Preparedness
5. Life Safety Management
6. Medical Equipment
7. Utility Systems Management
8. Department Specific Safety Plan

BE INVOLVED IN IMPROVING SAFETY

Safety becomes part of the organizational culture if everyone gets involved. That means each one of us doing little things each day, which contribute to a safer environment. If you are not sure how to solve something, discuss ideas with your colleagues and your manager. Although you can correct some hazards, other hazards may be more complicated. Exercise good judgment in response to hazard identification. If the hazard is an immediate threat and you are not trained to resolve it yourself, get help. If a solution is still not apparent or you are encountering difficulty in getting the problem resolved, the following form and procedure has been identified for expedited handling of employee's safety concerns.

PATIENT SAFETY

Patient safety is a priority for us. Safety is considered in most every decision we make, from purchasing safer products to evaluation if certain high-risk medications should be removed from floor stock. All employees/patients/visitors have a responsibility to identify, report and contribute to the correction of unsafe conditions.

REPORTING UNSAFE CONDITIONS

The Employee Report of Unsafe Conditions is an express reporting system. It is designed to get three levels of review immediately if required, but no later than 48 hours if the situation does not require immediate attention. **Do not use this form in place of disaster response or other defined procedure.** On the form you will be asked to describe the unsafe condition and possible solutions. The report then is passed on to your manager or supervisor, who will pass it on to the responsible department. The responsible department should then respond with priority attention. These forms are available on all units. Ask your supervisor where they are stored in your department. Then when you notice something unsafe, report it. Keeping the Medical Center safe is up to you.

KEEPING SAFE!

» Recognize hazards and report or correct them.

» Balance the loads in filing cabinets to reduce the risk of tipping over.

» Report to engineering loose or worn tiles, torn carpeting, etc. to avoid trips and falls.

» Watch out for discarded items in the halls (paper, pens, cups, etc.) that might cause someone to trip or slip.

» Use a footstool or ladder to reach high shelves – don't climb on desks and chairs.

» Place sharp objects in containers to avoid accidental cuts. Lift safely and properly, using recommended techniques. Keep corridors and doorways free of obstructions.

» Watch where you are going – don't let objects block your view. Follow safe electrical practices.

» Know the Fire, Disaster and Emergency Preparedness Plan, and your role in a disaster situation.

» Clean up spills when they happen or when you see them. Cover beverage containers before leaving the café.

» Practice Standard Precautions all the time.

» Take the time to read the Material Safety Data Sheets on hazardous materials in your area.

FIRE SAFETY (CODE RED)

Fire is a threat that no health care facility can ignore. Many patients have special needs that make them especially vulnerable in a fire. This vulnerability increases the risk of fire related casualties. How quickly and intelligently staff members respond will determine their success.

FIRE IS A DANGER YOU CAN PREVENT!

Each staff member is responsible to help maintain the safety of our patients. Fire drills are designed to allow staff members to practice the steps in the Fire Emergency Plan (Code Red). See Policy & Procedure 8200.304 on the **Insider page** (access on the computer by clicking on internet, http://insider/).

The term "Code Red" is the official designation for a fire within Portneuf Medical Center. Upon notification of a fire, the switchboard operator will announce "Code Red" and the location of the fire, 3 times:("Code Red Drill" in the case of a drill). All staff members immediately begin to follow the Fire Emergency Plan. Each department will also have a **"department specific plan"** that includes any additional duties the staff must perform.

Know the location of the fire alarm boxes and fire fighting equipment in your area and the areas you frequent (dining rooms, break rooms etc.) At Portneuf Medical Center, ABC Fire extinguishers are used. These can be used on any type of fire. Know how to get to the nearest exit.

Fire Safety (Code Red)

CODE RED PROCEDURE

R
A
C
E

RESCUE
Remain Calm
Notify anyone in immediate danger.
Remove anyone in immediate danger to a safe area. Do not use the elevators unnecessarily.
If possible, cover nose and mouth with damp cloth.

ALARM
Activate fire alarm as close as possible to the fire source by pulling fire alarm box handle.
Notify the switchboard operator of the location and extent of fire by dialing 82.
Follow department specific plan.

CONFINE
Turn off/unplug all appliances, air conditioning units and medical gases.
Remove portable medical gas tanks to a safe area.
Close all doors and windows.

EXTINGUISH
If the fire is small, attempt to put it out with wet linen or fire extinguisher.
A pillow is effective in smothering wastebasket fires.

FIRE EXTINGUISHER PROCEDURE

P
A
S
S

Pull the pin
to unlock the extinguisher.

Aim the extinguisher
at the base of the fire.

Squeeze the handle
to activate the extinguisher.

Sweep from side to side
in a continuous motion at base of the fire.

BE AWARE! MAKE IT A HABIT TO WATCH FOR POTENTIAL FIRE HAZARDS.

» Keep combustibles such a paper products, linens and clothing away from heat-producing devices, including reading lamps and patient room heating/cooling units.

» Do not allow devices that produce sparks – including motor-driven toys or appliances – in patient areas where oxygen is used.

» Store gas cylinders securely. in a chained area or strapped on a cart away from patients. Cap cylinders when they are not in use.

» Keep halls and stairways clear.

» Keep maintenance and storage areas clean and free of trash, sawdust, wood shavings, oily rags and other hazards.

» Never store items or linen etc. within 18 inches of the overhead sprinklers.

» Never prop open emergency doors. Fire doors not only let people out, they keep fire from spreading.

» Report to the Engineering Department any corridor doors that fail to close completely, especially during a Code Red (or drill).

REMEMBER: Patients and their families have entrusted you with their safety. Each staff member is responsible for ensuring the safety of patients, visitors and other staff.

EMERGENCY MANAGEMENT PLAN

The purpose of the Emergency Management Plan is to provide guidelines for the staff on the management of disasters, external or internal, that either disrupts or threatens to disrupt the routine capabilities of the hospital. The Emergency Management Plan can be found in the Red Safety and Environment of Care Manual or on the Insider page on the computer.

The Emergency Preparedness Plan identifies the roles and responsibilities of all staff. Each department has a part in the plan. Staff members should review the plan to be certain of their department's responsibility.

The Plan includes:

» When and how to initiate the plan.

» Management of staff.

» Distribution and assignment of responsibilities and functions.

» Management of space, supplies, communications and security.

» Mechanism used to evaluate, document and report performance of the plan in order to assess effectiveness and make improvements.

Disasters are classified as internal and external. External disasters are recognized as outside events, including mass casualties, which causes a sudden unscheduled and out-of-the-ordinary patient care workload for the hospital. Internal Disasters are events that cause or threaten to cause physical damage and injury to the hospital personnel or patient within the facility. Examples of internal disasters are fire, power failure, telephoned bomb threat or a regional event such as an earthquake or flood.

As with all emergencies, to **call a Code Black** dial the emergency number to the operator –
82 within the hospital, or 911 for all off-site areas

The CEO/President or designee will activate the Emergency Management plan if necessary. The plan is also designed to allow staff to assess the type and degree of disaster and implement the plan according to Level I or Level II. These levels are defined as follows:

External

Level I: Current staffing levels are not sufficient to provide safe patient care and can be resolved by additional nursing and ancillary staff.

Level II: Maximum support is needed from all sources: physicians, nursing, and ancillary staff.

Internal

Level I: Current staffing levels are not sufficient to provide safe patient care and can be resolved by additional nursing and ancillary staff.

Level II: Maximum support is needed from all sources, both internal and external (EMS, power, gas, physicians, etc.).

ELECTRICAL SAFETY

The continuing changes in health care technology have greatly increased the sophistication of patient care and with it the equipment to provide that care. This has also increased the potential for electrical shock for patients as well as staff members. Every department has complex electronic equipment with accompanying hazards. Copy machines, typewriters, floor buffers, large mixers and electrical beds are just a few examples. Maintaining a safe environment is everyone's concern.

RULES OF ELECTRICAL SAFETY

» Know why an electrical appliance is being used, and how it functions. Know the unique problems and hazards for each electrical device you use.

» Practice basic electrical precautions: Always have dry hands when operating equipment, never touch a metal object and equipment at the same time.

» Always check the plug, ground prong, wiring etc. BEFORE using a piece of equipment.

» Take out of service and report to the Engineering Department any equipment that is not working properly.

» Know your own limitations and when to request additional help or training.

ELECTRICAL CORDS AND ADAPTERS

Grounding is the single most important principle in electrical safety.

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

» Never use a piece of electrical equipment that is not equipped with a ground plug.

» Never use a "cheater adapter" (this interrupts the escape route for leaking current).

» Never use electrical equipment when the ground prong is loose, broken or missing.

» Never use extension cords that are not permanently connected to the equipment.

» Get safety instructions before using unfamiliar electrical equipment, especially equipment that is used with water (carpet cleaners, etc.).

» Disconnect electrical equipment from power source before cleaning.

» Report all shocks immediately – even small tingles.

Any suspect or malfunctioning electrical equipment should be **taken out of service, tagged "Out of Service" with a description of the malfunction, and reported to the Engineering Department**. If you have questions regarding electrical equipment these should be directed to the Engineering Department.

REMEMBER: Electrical power can change from helpful partner to lethal foe in a matter of minutes. Always take the time and make the effort to practice electrical safety. The life you save may be your own.

SAFE MEDICAL DEVICE ACT (SMDA)

The Safe Medical Device Act requires reporting of device-related serious illnesses; injuries or death to the manufacturer or FDA (Federal Drug administration) within 10 working days. The purpose of the Safe

Utility Management

Medical Device Act is to prevent patient injuries by enabling the manufacturer or FDA to remove products from the market as quickly as possible.

Serious is defined as being life threatening, results in permanent impairment, or requires medical intervention.

It is important to:

1. Obtain immediate medical attention for the patient if injury has occurred or medical intervention is necessary to prevent permanent impairment.

2. Remove the product from patient use so that appropriate decontamination and investigation can take place.

3. Report the incident to your supervisor or department manager.

4. Complete a detailed Incident Report describing what occurred. Include type of equipment, make, model, and Portneuf Medical Center number or serial number.

5. Contact the Public Safety Officer at extension 1780 to advise a possible SMDA related incident has occurred and where the device is located.

UTILITY MANAGEMENT

The purpose of the utility management plan is to promote a safe, controlled, comfortable, environment of care; assess and minimize risks of utility failures, and ensure operational reliability of utility system.

Utility systems include electrical distribution, emergency power, heating, ventilation air conditioning, boilers, medical gas etc. The utility failure plan describes how care will continue to be provided in the event of a failure. Each department has their own specific utility failure plan. Employees are responsible to know their department plan.

HAZARDOUS MATERIAL MANAGEMENT

Hazardous Materials and Waste Management Plan is located in the red Safety and Environment of Care Manual or on the Insider page. The purpose of the plan is to safely control hazardous materials and waste and insure that all employees are aware of any possible health hazards associated with substances use in the work place. The plan provides the processes for selecting, handing and storing hazardous materials and waste from their arrival or generation at Portneuf Medical Center to their final disposal.

As health care workers we know the power of the chemicals we use. They can make our life easier, save lives and make us more effective in our jobs. Using chemicals and other hazardous materials can be risky business. As employees you have a "Right to Know" about potential chemical hazards in your work.

If you have questions about hazardous materials contact your manager or Director of Environmental Services at Extension 1595.

Hazard Communication begins with the chemical manufacturer. Each company that makes or imports chemicals must evaluate the possible physical and health hazards of each substance it makes. This information can be found on the original label of the product or in the MSDS (Material Safety Data Sheet).

MATERIAL SAFETY DATA SHEETS

The MSDS tells you how to use, handle, and store the substance safely. Procedures to follow in an emergency are also outlined on the MSDS. **MSDS information sheets are available by calling the 3E Company at 1-800-451-8346 on the Insider under the MSDS tab. All phones at Portneuf Medical Center should have a MSDS label with 3E contact information on the label. If your phone in your work area doesn't have a label please contact the Director of Environmental Services at 1595 and a label will be provided to you.**

CONTAINER LABELS

Basic warnings are listed on the label. Warning labels may be placed on the container to give you fast and accurate information about the product. Directions for use, storage and disposal, any first aid for spills etc. are also listed on the label. All containers of chemicals need to be labeled with this information, especially if you are using a different container than the one it was supplied in.

HAZARDOUS EXPOSURE

In case of exposure to hazardous materials follow these steps:

1. Apply first aid to site.

2. Notify your supervisor/instructor of the incident.

3. Report to Student Health for treatment. Take Material Safety Data Sheet with you.

HANDLING HAZARDOUS CHEMICALS SAFELY

» Always read the label before using a product.

» Work Safely – follow the directions.

» Transport safely in leak-proof containers

» Clean up spills promptly and properly.

» Use the appropriate PPE.

» Dispose of waste according to directions.

» Get additional information when in doubt.

RADIATION SAFETY

Several departments in the hospital routinely use radiation in constructive ways, which improve patient care and treatment outcome. These departments are the Radiology Department, the Fourth Floor (room 403) and the Radiation Oncology Department. The Radiology Department also has several portable X-ray machines that are used in the Emergency Department, Surgery and in patient rooms when required.

The radiation safety program is administered through the radiation safety committee comprised of leadership from the various departments that work with radiation and the **radiation safety officer who is Jing Wang at x1750**.

Access to the areas in which radiation are being used may be restricted to protect employees and the public from unnecessary exposure to radiation. These areas should be posted with caution signs, which display the radiation symbol. For your safety and the safety of others, identify and observe radiation precaution signs. Do not handle objects, boxes or bags that are posted with radiation warning symbols unless you have been specifically trained to do so.

All pregnant employees have the right to "declare" their pregnancy. Making this declaration is a right of the worker, not a requirement of Portneuf. For more information please refer to policy #7280-303.

There are regularly scheduled radiation safety courses offered through the radiation safety officer for employees that work with radiation. If you feel you need to attend one of these, please notify your supervisor or contact the radiation safety officer at x1750.

SECURITY PLAN

The role of Public Safety is to protect staff, patients and visitors of the center. The Center is patrolled 24 hours a day and seven days a week. Public Safety attends all

code calls, and investigates thefts, vandalism, threats etc. Officers also enforce policies on parking, name badges, key control, prevention of infant abduction, and violence. Their extension is 1780.

» **Name Badges** – All employees/volunteers/students are required to wear name badges. Employees working in Women and Children's services have red backgrounds on their name badges.

» **Key Control and Door Access Codes** – Key check out is through Public Safety. Never give your key to someone else. Door access codes are also a security issue. These codes are confidential. Never give the

door code to anyone! Your supervisor can give you the codes to the doors you are required to have access to in order to do your job.

» **Incidents** – Call public safety at 251-4597 to report thefts or any unusual incident.

» **Property Control** – Portneuf Medical Center reserves the right to inspect and/or search all personal property on Portneuf Medical Center premises whenever it has reasonable suspicion of theft or as otherwise permitted by law. Public safety has the authority to check all packages or baggage leaving the Medical Center whether by employees, patients or visitors, when reasonable suspicion exists.

» **Workplace Violence** – Public safety officers have been trained to assist in the prevention of workplace violence. Call them to help before a situation escalates. If you want additional information on workplace violence, contact Public Safety.

Safety and Security is everyone's job.

WORKPLACE VIOLENCE

Prevention of workplace violence is a growing health care problem. Healthcare workers are at risk for fatal and non-fatal injuries. The National Institute of Safety and Health estimates that six million healthcare workers are threatened annually and two million are attacked. Recognition and Prevention is the best protection against workplace violence.

Identification
» Physical contact or assault
» Blackmail
» Verbal threats
» Sexual harassment/contact
» Harassment
» Coercion or intimidation
» Possession of weapons
» Stalking

Warning Signs or Indicators of Workplace Violence
» Displaying obvious or covert threats of harm
» Intimidating, belligerent, harassing or other aggressive behaviors
» Having repeated conflicts with supervisors or other employees
» Bringing a weapon to work, making references to weapons or preoccupation with weapons

Workplace Violence

» Sharing comments that indicate fascination with workplace violence, expressing the use of weapons as a way of resolving conflicts.

» Expressing overwhelming feelings about personal and professional concerns, suicidal ideas

» Exhibiting behaviors that demonstrate substance abuse or mental illness

» Exhibiting extreme mood changes

Warning Signs Before Violence Strikes

» Threatening notes or gestures, intimidation or harassment

» Aggressive behaviors such as yelling, hitting or physical attacks

» Argument and uncooperativeness

» Pacing and restlessness

» Autonomic reaction such as sweating, increased respiration, dilated pupils, muscle tension

» Glaring or staring eye contact

» Clenched fists or jaws

» Intrusiveness

» Past history or violence, arrests or aggressiveness, including domestic violence

Coping with Threats and Violence

When dealing with an angry or hostile customer or coworker, you should:

» Contact Public Safety before the situation gets out of control

» Stay calm

» Maintain eye contact

» Position yourself for easy escape. Don't allow your escape path to be blocked by persons or objects

» Maintain a safe distance and avoid getting into the individuals "personal space", *e.g.*, arms length away

» Remain courteous

» Be patient

» Acknowledge his or her anger

» Inquire how you might assist or help

When Someone Threatens You with a Gun, Knife, or Other Weapon

» Stay calm

» Watch for an opportunity to escape

» Never try to grab or take the weapon away

» Maintain eye contact

» Quietly motion for help or push the panic button

» Keep talking, let the person know that it is difficult to help them under these circumstances

» Stall for time

What Can Employees Do to Help Prevent Workplace Violence?

» Understand and comply with the workplace violence program and other safety and security measures.

» Participate in an employee complaint or suggestion procedure covering safety and security concerns (report of unsafe conditions)

» Promptly and accurately report all violent incidents or violence incident report form

» Participate in safety programs for example, becoming a SOS member.

» Take part in continuing education programs.

For more information regarding workplace safety or for additional training for you or your department contact the **Public Safety Department at x1780**.

PATIENT ASSAULT AND ABUSE

Patient abuse by a healthcare provider is a breach of medical ethics. Assault and abuse are also crimes. These crimes are punishable by imprisonment and fines. In some cases, the criminal penalties for assault and battery are especially severe when the victim is a patient.

To help protect your patients from abuse:

» Be aware of the warning signs of abuse.

» Report suspected abuse immediately.

» Manage your own stress appropriately.

» Take note of visitors on your unit.

Patients may also be abused outside the healthcare setting. As a healthcare provider, you are in a unique position to identify victims of abuse.

Workplace Violence

Educate yourself about the dynamics of abuse.

Domestic Violence	Elder Abuse & Neglect	Child Abuse & Neglect
The victim is an adult or adolescent. In the majority of cases, the victim is a woman.	Elders may be abused, exploited, or neglected. This mistreatment may be physical, psychological, sexual, and/or financial.	Child abuse may be physical, emotional, or sexual.
The abuser is a person who is, was, or wishes to be in an intimate relationship with the victim.	The perpetrator may be a family member or other caregiver.	Child neglect occurs when a child's basic needs are not met.
The abuse may be physical, psychological, and/or sexual. The goal of the abuse is to control the victim.	Many states require healthcare providers to report known or suspected elder abuse and neglect.	All states require healthcare providers to report suspected child abuse and neglect.
Most states require healthcare providers to report certain cases of domestic violence.		

INFANT ABDUCTION

Infant abduction is a growing concern. Numerous successful abductions occur nationwide. Portneuf Medical Center is committed to the safety of all patients especially our infant population.

Code Purple is the designation for a suspected infant abduction.

In the case of a code purple the hospital will be sealed off. Designated persons will respond and cover exits. FBI and police will arrive to interview anyone involved. Review the policy and procedure on infant abduction and **know your role**.

The typical abductor is:

» Female age 15-44

» Most likely emotionally immature and compulsive

» Frequently has lost a baby or incapable of having one

As with any safety procedure, prevention is the key. Only staff who have nametags with the red background are permitted to transport babies from room to room, room to x-ray etc. If you see any suspicious person or activity, notify security immediately. For more information about infant abduction contact Public Safety.

EMERGENCY CODES

Special circumstances require the notification of large groups of staff members to respond to an emergency. To meet this need without undue concern of patients, visitors, and family, Portneuf Medical Center utilizes several codes. In each case, you must first dial the emergency line to notify the operator and call the code—82. All staff members are responsible for reviewing their department plans for all emergencies and knowing their role.

Here is a listing of Portneuf Medical Center's emergency codes.

Code Black	Announced over the paging system signifies general alert for disaster. Report to your immediate supervisor (or if off duty to the personnel pool) according to department plan. Sheriff's deputies, etc., have a responsibly to remain on the premises and oversee their charge.
Code Red	Indicates a fire at Portneuf Medical Center. Refer to your fire plan and department evacuation procedure and routes.
Code Purple	Infant abduction in progress. Refer to policy.
Code Blue	Cardiac arrest. "Pediatric" indicates child.
Trauma One	Indicates the need for the trauma team to report to the ED. "Pediatric" indicates the victim is a child.
Trauma Consult	Indicates the need for the trauma team to report to the Emergency Department. (The medical staff response is different than Trauma One)
Cardiac One	Indicates a patient with chest pain needing team to stabilize condition.
All Clear	Refers to disaster measure no longer necessary or fire being under control, return to normal duties.

To call a code – Dial "82" in the Hospital
Dial "911" for all off site areas

INFECTION CONTROL

WHO IS RESPONSIBLE FOR INFECTION CONTROL AT PMC?

EVERYONE!

WHAT IS INFECTION CONTROL?

1. Protection of patients, employees, physicians, LIPs and visitors from acquisition and transmission of infectious agents.

2. Identifies and reduces the risks of healthcare-associated infections (HAIs), and other adverse outcomes.

3. PMC treats as a sentinel event HAIs that contribute to unanticipated death or major loss of function.

Infection Control

HOW IS INFECTION SPREAD?

Six links in the infection chain must be present in order for an infection to develop and spread.

1. A microorganism that can cause the disease or illness must be **present**.

2. A person, such as a patient, visitor or health care worker **carries** the microorganism.

3. A **way out of the carrier**, such as sneezing, coughing, urinating or having a bowel movement.

4. A **method of travel**, such as through the air, through direct physical contact or through contaminated hands, linens, towels, instruments, bandages, etc.

5. A **way into another person**, such as breathing, swallowing, or skin puncture.

6. A **susceptible person**, especially one with lowered resistance.

HOW DO WE PREVENT THE TRANSMISSION OF INFECTIOUS AGENTS TO PATIENTS OR STAFF?

We follow the Centers for Disease Control and Prevention (CDC) Guidelines:

I. **Standard Precautions** is an organization-wide infection control practice in which all blood, body fluids, secretions, and excretions, except sweat, are treated as potentially infectious and **applies them to all patients regardless of their diagnosis or presumed infection status**. We cannot always know right away what is causing the infection. If you are going to have the potential to be exposed to ANY body fluids or secretions PPE must be used to provide a barrier between you and the fluid.

WHAT IS PERSONAL PROTECTIVE EQUIPMENT (PPE)?

Equipment that creates a barrier between you and potentially infectious materials is called PPE. PPE includes gloves and should be worn when you anticipate contact with contaminated or infectious materials. Glasses and masks are worn when you anticipate contaminated or infectious materials being splashed into your eyes, nose or mouth. Wear a gown or apron when infectious or contaminated materials could splash, drip or spill on your clothing.

REMOVING CONTAMINATED PPE

PPE will be removed/replaced whenever it becomes torn, tinged with blood or infectious material or prior to leaving the work area. Contaminated PPE is discarded in red bags.

Hand Hygiene is recognized by PMC as a critical component of patient and employee safety. Hand hygiene is the primary method of infection prevention by removing dirt, organic material and transient microorganisms from the hands so as to decrease the risk of cross contamination. PMC follows the Centers for Disease Control and Prevention (CDC) Guidelines for Hand Hygiene.

Type	Purpose	Method
Routine Handwashing	To remove soil and remove or destroy transient microorganisms.	Antibacterial Soap and water for at least 15 seconds.
Alcohol-based Hand Sanitizing Rub	To destroy transient and resident microorganisms on UNSOILED hands.	Alcohol based hand rub, rubbed vigorously until dry, at least 20 seconds.

Hand Hygeine Antibacterial Soap and Water	Hand Hygiene Alcohol Hand Sanitizing Rub
When hands are visibly dirty or soiled with blood or other body fluids Certain confirmed or suspected pathogens: » *Clostridium* difficile » Some viral causes of gastroenteritis » Patients with diarrhea At the start of the work shift Before eating or drinking After using the rest room After coughing or sneezing	All situations other than as described to the left Before direct contact with patients After direct contact with patients After contact with patient's environment Before putting on gloves After removing gloves Before invasive procedures such as IV insertion or urinary catheter

Fingernails: Patient care providers are to have short, clean nails:

1. Natural nail tips are less than ¼ inch long.
2. Polish may not be used.
3. Artificial fingernails and extenders are prohibited.

Hand Lotion that is approved to be compatible with the soap and gloves used by PMC is provided near the hand washing sinks throughout the organization.

Sharps Safety: Care is taken by all employees to prevent injuries when using needles, scalpels and other sharp instruments or devices.

1. Employees do not recap, or otherwise manipulate, used needles. Using both hands, or any other technique that involves directing the point of the needle toward any body part, is not to be used.

HOW DO YOU DISPOSE OF INFECTIOUS (BIOHAZARD) WASTE?

Infectious products, (*i.e.*, blood, lab specimens, disposable contaminated equipment, etc.) are considered infectious waste. This waste must be labeled with a biohazard sticker. Red bags or red containers do not need additional labels. Infectious waste must be packaged in such a way to prevent leaking during collection, handling, processing, storage and transport. All other waste is placed in regular trash and disposed of in the normal manner.

Infection Control

Linen: All linen is considered to be contaminated and is placed in white or clear bags and is transported in carts to the linen supplier. The linen supplier treats all linen as infectious and uses standard precautions.

General Sanitary Guidelines:

1. Do not eat, drink, or apply cosmetics in patient care areas; this includes the nurses' stations.
2. Do not place food, personal meds, or breast milk in medication refrigerators.

II. **Transmission Based Isolation Precautions** are designed for patients with documented or suspected infections with highly transmissible pathogens for which additional precautions are needed to interrupt the transmission.

1) **Contact Precautions:**
   a) For infections or colonizations of multi-drug resistant organism wounds such as:
      i) Methicillin Resistant *Staph aureus* (MRSA)
      ii) Vancomycin Resistant *Enterococcus* (VRE)
      iii) Other draining wounds
      iv) Infectious diarrhea, such as *Clostridium difficile* or infectious gastroenteritis
      v) RSV
   b) Requires the healthcare provider to wear a gown and gloves each time they enter the room.
   c) Patient leaving room:
      i) Patient wears a clean patient gown or bathrobe over their contaminated clothing.
      ii) Patient must have the wound or infectious area covered with a clean dressing and not be oozing or leaking.
      iii) Patient must perform hand hygiene prior to leaving the room.

2) **Droplet Precautions:**
   a) Used for potential to be coughed or sneezed on:
      i) MRSA pneumonia
      ii) Suspected bacterial meningitis
   b) Patient leaving room
      i) Patient wears a clean patient gown or bathrobe over their contaminated clothing.
      ii) Patient wears a mask.
      iii) Patient must perform hand hygiene prior to leaving the room.

3) Airborne Precautions

   a) Used for patients with known or suspected:

      i) infectious tuberculosis

      ii) measles

      iii) chickenpox

   b) Requires use of "NEGATIVE PRESSURE ROOM"

   c) AII require the healthcare provider to wear the N95 respirator.

   d) Engineering is called to turn on negative air.

   e) Engineering tests the air flow . . .

      i) Once a month if room is not use

      ii) Daily, when the room is in use.

   f) To maintain the negative pressure in the room both the patient room door and the anteroom door must be kept closed at all times.

   g) PMC AII rooms:

      i) Emergency Department (1 bed)

      ii) 304/305

      iii) 404/405

      iv) ICU (1 bed)

      v) PICU 3

      vi) CVICU

HOW DO WE KEEP OUR PMC EMPLOYEES SAFE?

The Occupational Safety and Health Administration (OSHA) requires Portneuf Medical Center to have a Bloodborne Pathogen Exposure Control Plan and a Tuberculosis Exposure Control Plan.

The Centerwide 6740.130 Bloodborne Pathogen Exposure Control Plan is located on the Insider.

» The purpose of the Exposure Control Plan is to prevent bloodborne infections through the elimination or reduction of occupational exposure.

» Identifying tasks, procedures and jobs that are at risk for exposure.

» Protecting employees through education, the use of personal protective equipment (PPE) and appropriate policies and procedures.

Health and Safety

WHAT IS HIV?

The Human Immunodeficiency Virus which cause AIDS, attacks the body's immune system, reducing the body's ability to fight the disease. Some people who carry the HIV virus have no symptoms. Others don't develop AIDS for years after they first become infected. A lot of time and money is being spent on AIDS research. A cure has not been found and the only way to prevent it is to avoid direct exposure to the infectious blood or body fluids of an infected person.

HEPATITIS B VIRUS

Hepatitis B Virus infects the liver. Health care workers have a greater risk of contracting Hepatitis B on the job than they do of contracting AIDS. Persons who are infected with Hepatitis B often do not have any symptoms of the disease. Hepatitis B infection can cause severe or fatal liver disease. The Hepatitis B Vaccine is available to all Portneuf Medical Center employees and is successful in preventing Hepatitis B infection. See policy and procedure 6750.411. Hepatitis B Surface Antibody testing for employees is also available.

TUBERCULOSIS

Anyone can be exposed to TB (tuberculosis). Health care workers are at an increased risk. TB can be spread by an infected person releasing the bacteria into the air by coughing, sneezing, laughing, etc.

TB disease means that you have active TB bacteria in your body. The bacteria are multiplying and can be spread to other people. Symptoms such as a lasting cough, fatigue, coughing up blood, fever and weight loss are common complaints. TB can be cured with the proper medication.

TB infection is considered inactive. If you have been exposed to TB but do not show any symptoms of TB infection. The only way to check if you have been exposed is to do a TB test. At Portneuf Medical Center all employees are tested at hire and then every year after that. If you have (inactive) TB infection you cannot spread TB to others.

The Centerwide 9122.301 Tuberculosis Exposure Control Plan is located on the Insider.

HEALTH AND SAFETY

WHAT DO YOU DO IF YOU GET A NEEDLESTICK OR SPLASH?

Perform first aid; notify your supervisor; report to the ED.

» Always think about what you are doing.

» Always treat another person's blood and body fluids as infectious. Always treat used gloves and/ or protective equipment as infectious. When in doubt, wash your hands, wash your hands, wash your hands.

» Don't eat, drink, apply lip balm or handle contact lenses where exposure is possible.

» If you have a respiratory infection remember to cover your nose and mouth when coughing and sneezing, and wash your hands frequently.

» Do not pick up broken glass or anything sharp with just your gloved hand. Use a dustpan and brush or tongs.

» Always treat used patient equipment as contaminated or infectious.

BACK SAFETY AND HEALTH

Health care workers often are so busy caring for patients that they forget to take care of themselves. This is a big risk as health care workers often put just as much strain on their backs as the average construction worker. 80-90% of us will suffer from some type of back injury during our lifetime. It is no surprise that back injury and pain are one of the most common and expensive health problems we face. And if you injure your back, you not only cause yourself pain, you may lose time from work and reduce the quality of health care to your patients. Healthy and productive staff are the backbone of Portneuf Medical Center. It is important that we: BE NICE TO OUR BACKS!!!

The spine is made up of many small bones called vertebrae. In between each vertebra is a disc that acts like a cushion between the bones. When you are young there is plenty of fluid that lubricates each disc. The older you get, the more stiff and rigid the disc becomes. As your discs become weakened from pressure they can rupture. Unsafe lifting can cause this type of increased pressure.

When standing upright the disc pressure is equal to 100% of the body weight. For example a 150 pound person supports 150 pounds of pressure in the disc. If you bend at the waist incorrectly while lifting a 70 pound weight it can result in over ONE THOUSAND POUNDS of pressure in the low back. It is important to use good body mechanics to avoid strains and pains in the back.

Good body mechanics can help prevent back injury. This means maintaining the 3 natural curves in your back; the curve of your neck, middle back and lower back. Your three curves are aligned if your ears, shoulders and hips are in a straight line. By keeping your three curves aligned, you distribute the weight of your load evenly throughout the spine, and lower your risk of a back injury.

PROPER LIFTING TECHNIQUES

» Check the area for safety hazards and remove.

» Size up the load. Get help before you start.

» Work Smart!

» Get any needed equipment, lifts & hand trucks, etc.

» Stand close to the load. Feet shoulder width apart.

» Keep your back straight and squat down in front of the object.

» Keep your head up and stand up using the muscles in your legs.

» Bring the load in close to your body.

» Move the object to the desired place. Pivot your feet rather than twisting.

» Reverse the steps to set the load back down.

These simple steps can help to prevent back injuries. Back safety is a 24-hour a day commitment. Use proper lifting techniques at home, work and at play. And practice, practice, practice. Maintain a healthy body to avoid undue stress on your back. The back you save may be your own.

SAFETY TIPS

» Walk; don't run down hallways and stairs. Wear shoes with non-skid soles, and laces tied.

» Watch out for obstructions and remove them immediately. Look out for and avoid wet and slippery areas.

» Change directions slowly, especially if you are carrying something. Don't leave drawers open to trip anyone up.

» Report any loose carpets, tiles and flooring. Don't carry anything that blocks your vision.

» If your job requires you to sit, get up at frequent intervals and move around.

» Push rather than pull an object. You can push 2 times as much as you can pull.

» Don't twist when you lift and carry.

PATIENT RIGHTS

Portneuf Medical Center encourages respect for the personal preferences and values of each individual and supports the rights of each patient and resident of the Center. A full listing of these rights are found in the patient guide or posted in outpatient departments.

PATIENT RESPONSIBILITIES

The collaborative nature of health care requires that patients and residents participate in their care by fulfilling certain responsibilities such as providing information about their illness, and asking questions if things are unclear. For further information about patient responsibilities review the patient guide page 19.

MEDICAL ETHICS

The Medical Ethics Committee is available to assist in addressing medical ethical dilemmas as needed and provide education on medical ethical issues.

Access to the Medical Ethics Committee may be made by contacting:

» Social Work Services, or

» Medical Staff Services, or

» Administrator-On-Call, or

» Chairman of the Medical Ethics Committee directly, if others are not available

AGE SPECIFIC TRAINING

Age Specific training refers to the knowledge and skills required to care for patients of different ages. All Portneuf Medical Center staff must complete training to adjust and adapt their communication style and physical interventions to best meet the age of the person served. This training includes information that all Portneuf Medical Center employees regardless of their position in the organization need to know.

Additional training is implemented in your assigned department during department specific and job specific training as needed. Ask your manager or supervisor if you have questions about age specific training.

WHY AGE SPECIFIC TRAINING IS IMPORTANT

» Portneuf Medical Center Regional Medical Center provides care for all ages. The patient population groups are identified as Infant, Pediatric, Adolescent, Adult and Geriatric.

» Portneuf Medical Center believes that each patient is unique, with individual wants, needs and fears. Patients respond to stress, like hospitalization, based on age, physical and mental growth and development. Response to hospitalization is also affected by culture, values and past experiences.

» Age specific training provides information to staff regarding the differences in the growth and development of these various age groups. A knowledge of this will help you to communicate effectively and provide a safe environment for all patients served.

NORMAL GROWTH & DEVELOPMENT

Growth and development refers to the progression of changes that occur in all persons. Everyone grows and develops in a similar manner that is associated with their age. At the time of birth an infant is totally dependent on outsiders for care. By the time adulthood is reached most individuals are able to care completely for themselves. During later years some individuals may once again require assistance from others for their care.

Age Specific Training

PROMOTING COMMUNICATION

All staff have the need to communicate with patients, visitors and family members. Some simple rules about communication are:

1. Speak clearly and directly in a calm voice.

2. Maintain eye contact. Place yourself at the person's level. For example, sit down when talking to people in wheelchairs or kneel down to talk to young children.

3. Assess understanding and obtain feedback. Ask for the person to repeat back to you what you have said. For example: *"Tell me what you think I said?"* or *"Explain to me what I have asked you to do."*

4. Offer opportunity to ask questions. For example: *"Is there anything else you want to know?"* or *"What other information can I give you?"*

5. Listen and respond.

INFANT (BIRTH TO 12 MONTHS)

Growth & Development

The first year of life involves rapid growth and many developmental changes. Infants are dependent on their parents, family and care givers for safety, security, food and shelter. As an infant grows he progresses from sitting to crawling and then walking. This enables him to further explore his environment but can also put him at greater risk for accidents or injury. Objects may go into the mouth for a taste test. Curious hands may find objects that are unsafe. Infants begin to eat solid foods and brightly colored liquids may be tempting. An infant's communication is very primitive and he relies on parents, family members and caregivers to communicate his needs.

Communication

Avoid loud noises that may startle or frighten. Give information to parents or family members. Notify the nurse or care givers if the infant needs help. *Infants rely on you to communicate their needs.*

Safety

Keep side rails up. Transport in size appropriate means (bassinet, crib or stroller). Provide a safe and clean environment. Avoid leaving small objects within reach that could cause choking. *Remember the infant likes to put everything in his mouth!!*

PEDIATRIC (1-8 YEARS)

Growth & Development

The pediatric population includes children age 1 year to 8 years old. During this phase of development the growth is less rapid than infancy. The child is learning to talk, then read and write. The child can understand simple explanations. As a child grows older he learns more skills. The child is also less

dependent on family and caregivers, and more dependent on himself the older he grows. The child is curious about his environment and will experiment with objects and equipment. Injury from accidents is a prime concern for caregivers.

Communication

Speak directly to the child in simple language. Give information to parents and care givers too. Notify nurse or care givers if child needs help.

Safety

Provide a safe and clean environment. Keep hazardous liquids out of reach. Avoid leaving small objects within reach that could cause choking. Remove unnecessary equipment from the room. Keep cords, equipment and supplies out of patient's path.

ADOLESCENT (9-17 YEARS)

Growth & Development

The adolescent is at an awkward stage of development. This awkwardness and clumsiness is due to uneven growth of the bones and muscles. There are also many changes in physical appearance during adolescence. This can be confusing or embarrassing. The adolescent works hard to become independent of his parents. Judgment and reasoning are not fully developed at this age.

Communication

Speak directly to the adolescent. Give information in a timely manner. Allow time to answer questions. Ask for feedback to be sure you are understood.

Safety

Provide for a safe and clean environment. Remove unnecessary equipment from the room. Keep cords, equipment and supplies out of patient's path. Provide proper lighting.

ADULT (18-64 YEARS)

Growth & Development

The adult has completed most of his physical growth. Social and psychological development continues. Adults are individuals with firm ideas about who they are and what they want. These values are based on their culture, environment, family, etc. In order to best serve this population, caregivers must assess each adult to find out his individual needs. The sick adult may have diminished skills that put them at risk. For example surgery may have limited their ability to walk or stand. Medications may have changed their ability to understand information.

Communication

Speak directly to adults. Give information in a timely manner. Allow time to answer questions. Ask for feedback to be sure you are understood.

Age Specific Training

Safety

Provide a safe and clean environment. Remove unnecessary equipment from the room. Keep cords, supplies and equipment out of patient's path. Provide proper lighting. Follow fall risk precautions as ordered.

GERIATRIC (65+ YEARS)

Growth & Development

The elderly adult may be very active and independent, or there may be physical and/or mental declines. Often hearing and vision are impaired. Physical strength may decrease making such things as walking more difficult. The decrease in physical strength may place the elderly patient at an increased risk for falls. Changes in mental status may mean that the patient is confused, or their memory is not very good. Information may need to be repeated often.

Communication

Speak directly to the person. Speak clearly, and distinctly, do not shout. Ask for feedback to be sure you are understood. Allow time to answer questions. Repeat information as necessary.

Safety

Provide a safe and clean environment. Maintain well lighted areas. Put needed objects within sight and reach. Keep cords, equipment, and supplies out of patient's path. Follow fall risk precautions as needed.

Congratulations!
You have completed the self-study guide.
Please complete the post test and give your answer sheet to your instructor.

Student Name: _____ Date: _____

EDUCATION & TRAINING
POST-TEST

1. The Mission of Portneuf Medical Center is to provide compassionate, quality health care services needed by the people of Southeastern Idaho in collaboration with other providers and community resources.
   A. True
   B. False

2. The Plan for Provision of Care is:
   A. The framework for defining how patient care is delivered
   B. The plan for providing food in emergencies
   C. The staffing plan for county wide disaster
   D. All of the above

3. Copies of the Plan for Provision of Care can be found:
   A. At the county offices
   B. At the food shelter
   C. In all departments and on the Insider page
   D. Only in the Administrators office

4. Portneuf Medical Center's provides which of the following services:
   A. Obstetrics(maternity) and Nursery
   B. Surgery in-patient and out-patient
   C. Inpatient Behavioral Health Services
   D. All of the above

5. Portneuf Medical Center's customers include:
   A. Patients, visitors, and family
   B. Staff/employees
   C. Physicians
   D. All of the above

6. Portneuf Medical Center's customers expect to be treated with:
   A. Honesty
   B. Respect
   C. Courtesy
   D. All of the above.

7. If a patient or family member has a complaint you should:
   A. Tell them you that's just the way we do things here.
   B. Listen to the complaint and take action on the problem.
   C. Ignore them and go one with your work.

8. Customer service is everyone's responsibility.
   A. True
   B. False

9. The Environment of Care refers to:
   A. Plan to reduce air pollution in Idaho
   B. Plan to maintain safe environment for patients, visitor, and employees.
   C. Plan to beautify the environment.

10. To keep Portneuf Medical Center safe I should:
    A. Recognize hazards and report them.
    B. Use a footstool or ladder to reach high places.
    C. Keep corridors and doorways free of obstructions.
    D. Know Fire and Emergency Preparedness Plan.
    E. All of the above.

11. At Portneuf Medical Center the following types of fire extinguishers are present.
    A. ABC
    B. BC
    C. Water
    D. None

12. If you see smoke, you should:
    A. Go check it out.
    B. Activate RACE.
    C. Evacuate the building

13. The Letters in R.A.C.E stand for:
    A. Relaxed Attitude Concerning Emergencies.
    B. Rescue, Alarm, Confine, Extinguish.
    C. Review, Action, Concern, Energy.

14. Our first concern in the event of a fire is:
    A. To put the fire out.
    B. The safety of patients, family, visitors and staff
    C. To protect the expensive equipment.

15. Fire doors may be propped open for ventilation.
    A. True
    B. False

16. During a general evacuation you should:
    A. Evacuate downward toward ground level
    B. Take the elevator to the basement and wait.
    C. Not leave your department.

17. The letters PASS stand for what when referring to fires?
    A. Purge, aim, swat, slap
    B. Pull, aim, squeeze, sweep
    C. Point, arch, slam, start
    D. Push, act, shove, shut

18. The Emergency Preparedness Plan is located:
    A. Emergency Room only
    B. Employee handbook
    C. Orange disaster book
    D. Red Safety and Environment of Care Manual

19. The Emergency Preparedness Plan
    A. Identifies roles and responsibilities of staff
    B. Tells when and how to initiate the plan
    C. Includes a way to evaluate the effectiveness of the plan
    D. All of the above

20. Basic rules of electrical safety include:
    A. Always check the plug, ground prong and wiring before using electrical equipment.
    B. Never use wet hands with electrical equipment.
    C. Remove broken equipment from patient's rooms.
    D. All of the above

21. In case of a mechanical equipment failure you should
    A. Take the equipment out of service
    B. Tag the equipment "Out of Service"
    C. Include a written description of the malfunction
    D. Notify Engineering
    E. All of the above

22. The Safe Medical Device Act is about:
    A. Supplying clean syringes and needles to drug addicts.
    B. Manufacturing medical devices
    C. Reporting equipment that may have caused patient illness, injury or death.
    D. None of the above

23. In the case of a utility failure all employees should:
    A. Shut off all oxygen
    B. Call Idaho Power
    C. Shut off all electrical appliances
    D. Refer to their department specific utility failure plan

24. The Material Safety Data Sheet includes information on:
    A. The manufacturer name and address, emergency phone numbers
    B. Name of the chemical plus any common names for it.
    C. Any hazardous ingredients of a chemical.
    D. Safe exposure limits
    E. All of the above and more.

25. In case of exposure to hazardous materials you should first:
    A. Wash the site, apply first aid
    B. Go to the emergency room
    C. Go home
    D. All of the above

26. Handling chemicals safely includes:
    A. Always read the label prior to use
    B. Clean up spills immediately
    C. Dispose of according to directions
    D. Use appropriate PPE
    E. All of the above

27. You can assume that the contents of an unlabelled container are harmless if there is no chemical odor.
    A. True
    B. False

28. For your safety and the safety of others identify and observe radiation precaution signs.
    A. True
    B. False

29. All employees, volunteers and students are required to wear name badges.
    A. True
    B. False

30. If anyone asks you for the door access codes you should:
    A. Give it to them to be neighborly
    B. Notify Security
    C. Call up your manager and ask.

31. In case of workplace violence you should call security
    A. After the incident is over
    B. Only if a weapon is used
    C. Anytime you suspect a problem that might involve violence
    D. If you are too tired to cope with the problem

32. Your role in prevention of infant abduction includes:
    A. Wearing name tags whenever you are on duty
    B. Knowing the infant abduction policy and procedure
    C. Watching and reporting unusual or suspicious activity
    D. All of the above

33. The typical abductor is:
    A. Female 15-44
    B. Most likely emotionally immature & compulsive
    C. Frequently has lost a baby or is incapable of having one
    D. All of the above

34. The Exposure Control Plan is about:
    A. Protecting you from blood borne infections.
    B. Identifying employees at risk for contact with blood borne infections.
    C. Training employees about personal protective equipment.
    D. All of the above

35. The best way to prevent the spread of infections is:
    A. Hand washing
    B. Don't touch anyone
    C. Wear gloves all the time
    D. Wear a mask all the time

36. According to STANDARD Precautions you should wear gloves when:
    A. You have any patient contact.
    B. You anticipate contact with blood or body fluids.
    C. You are on duty.

37. Personal Protective equipment is removed:
    A. If it becomes tinged with blood or infectious material.
    B. If it becomes torn.
    C. Prior to leaving the work area.
    D. All of the above.

38. Infectious waste is disposed of in red bags or red containers.
    A. True
    B. False

39. Which of the following body fluids are considered potentially infectious:
    A. Blood
    B. Vomit and saliva
    C. Urine & stool (bowel movement)
    D. All of the above

40. Tuberculosis can be spread by the release of bacteria from an infected person in the air through:
    A. Coughing
    B. Laughing
    C. Sneezing
    D. All of the above

41. Hepatitis B infection:
    A. Can cause severe or fatal liver infection
    B. Can be prevented with a vaccine
    C. Is a risk for healthcare workers
    D. All of the above

42. The only prevention against the AIDS virus is to avoid direct exposure with the infectious blood or body fluids of an infected person.
    A. True
    B. False

43. Information regarding patient rights can be found in the patient guide.
    A. True
    B. False

44. One way to comply with HIPAA regulations is to never leave patient information on the computer screen when you step away.
    A. True
    B. False

45. Portneuf Medical Center does not have a medical ethics committee to address medical ethical dilemmas.
    A. True
    B. False

Please match the following codes to their definition.

46. Code Red _____   A. Disaster
47. Trauma One _____   B. Cardiac Arrest
48. Code Purple _____   C. Fire
49. Code Black _____   D. Trauma team needed
50. Code Blue _____   E. Patient with chest pain
51. Cardiac One _____   F. Infant abduction

52. Portneuf Medical Center serves a patient population that includes:
    A. Infant
    B. Pediatric
    C. Adolescent
    D. Adult and Geriatric
    E. All of the above

53. Growth and development refers to the progression of changes that occur in all persons.
    A. True
    B. False

54. Infants are at risk for:
    A. Putting small objects in their mouth
    B. Sleeping to much
    C. Filling our their own menu
    D. None of the above

55. When communicating with an infant
    A. Speak loudly
    B. Give complete information
    C. Give information to the parents or family members
    D. Talk in baby talk

56. Pediatric patients will experiment with objects and equipment.
    A. True
    B. False

57. When talking to a pediatric patient you should:
    A. Give complex information or instruction
    B. Speak directly to child in simple language
    C. Talk very loud
    D. Give information in written form

58. Adolescence is an awkward stage of development.
    A. True
    B. False

59. When speaking with an adolescent you should:
    A. Avoid eye contact
    B. Speak only to the parents
    C. Allow time to answer questions
    D. Speak quietly and in whispers

60. To promote a safe environment for adults you should:
    A. Remove unnecessary equipment from the room
    B. Provide proper lighting
    C. Keep cords, equipment and supplies out of the way
    D. All of the above

61. When communicating with adults you should:
    A. Speak directly to them
    B. Give information in a timely manner
    C. Allow time to answer questions
    D. Ask for feedback
    E. All of the above

62. The Geriatric patient may be very active and independent.
    A. True
    B. False

63. When talking with the Geriatric patient you should:
    A. Speak clearly and distinctly
    B. Allow time for questions
    C. Ask for feedback
    D. Repeat information as necessary
    E. All of the above

64. To promote a safe environment for Geriatric patients you should:
    A. Put needed objects within sight and reach
    B. Maintain a well lighted area
    C. Keep cords, equipment and supplies out of the way
    D. Follow fall risk precautions as ordered
    E. All of the above

65. Understanding the differences in each age group allows caregivers to communicate effectively and promote a safe environment for all patients served.
    A. True
    B. False

Student Name: _____ Date: _____

EDUCATION & TRAINING
POST-TEST ANSWER SHEET

1.	A	B	C	D	E	34.	A	B	C	D	E
2.	A	B	C	D	E	35.	A	B	C	D	E
3.	A	B	C	D	E	36.	A	B	C	D	E
4.	A	B	C	D	E	37.	A	B	C	D	E
5.	A	B	C	D	E	38.	A	B	C	D	E
6.	A	B	C	D	E	39.	A	B	C	D	E
7.	A	B	C	D	E	40.	A	B	C	D	E
8.	A	B	C	D	E	41.	A	B	C	D	E
9.	A	B	C	D	E	42.	A	B	C	D	E
10.	A	B	C	D	E	43.	A	B	C	D	E
11.	A	B	C	D	E	44.	A	B	C	D	E
12.	A	B	C	D	E	45.	A	B	C	D	E
13.	A	B	C	D	E	46.	A	B	C	D	E
14.	A	B	C	D	E	47.	A	B	C	D	E
15.	A	B	C	D	E	48.	A	B	C	D	E
16.	A	B	C	D	E	49.	A	B	C	D	E
17.	A	B	C	D	E	50.	A	B	C	D	E
18.	A	B	C	D	E	51.	A	B	C	D	E
19.	A	B	C	D	E	52.	A	B	C	D	E
20.	A	B	C	D	E	53.	A	B	C	D	E
21.	A	B	C	D	E	54.	A	B	C	D	E
22.	A	B	C	D	E	55.	A	B	C	D	E
23.	A	B	C	D	E	56.	A	B	C	D	E
24.	A	B	C	D	E	57.	A	B	C	D	E
25.	A	B	C	D	E	58.	A	B	C	D	E
26.	A	B	C	D	E	59.	A	B	C	D	E
27.	A	B	C	D	E	60.	A	B	C	D	E
28.	A	B	C	D	E	61.	A	B	C	D	E
29.	A	B	C	D	E	62.	A	B	C	D	E
30.	A	B	C	D	E	63.	A	B	C	D	E
31.	A	B	C	D	E	64.	A	B	C	D	E
32.	A	B	C	D	E	65.	A	B	C	D	E
33.	A	B	C	D	E						

Portneuf
HEALTH PARTNERS

All together **better**