Observation/
Shadowing Orientation Module

One hospital

Safety, Quality Care, Infection Prevention & Control
St. Luke’s Hospital mission: Together, we provide exceptional care for our community, inspire hope and promote wellness.
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Introduction

Welcome to St. Luke’s Hospital. To assure a safe environment for patients, visitors, employees and affiliating students, an orientation to various aspects of the organization is required including content on Safety/Quality, Infection Prevention and Control, Management of the Environment of Care, etc., based on the training requirements from regulatory agencies (OSHA, ISO/NIAHO, etc.).

Prior to your experience, please:
• Print & complete Observation/Shadowing Request Form
• View Observation-Shadowing Orientation Module
• Print & complete Observation/Shadowing Attestation Form
Observation/Shadowing Objectives

To provide the opportunity for our student community to see if they would like a future in the healthcare field.

After reviewing the this module, the student will be able to:

1. Learn the mission, vision, and values of St. Luke’s Hospital.
2. Understand Infection Prevention and Precautions
3. Review Compliance and Confidentiality
4. Importance of Diversity
5. Code of Conduct practiced within the hospital
   • Safety codes, fire safety, weather safety
7. Identification of hazardous materials and proper precautions needed when using hazardous materials.
8. Error Prevention
At St. Luke’s, we hold ourselves and each other accountable for meeting expectations that ensure we live by our Mission and Values.

The foundation for our Values is to treat others as we would like to be treated.

Every member of our organization is accountable for making a positive impact on those whom we serve.
St. Luke’s Values
WE ARE ONE. UNITED BY THESE VALUES.

- Integrity
- Excellence
- Compassion
- Respect
- Dedication
- Teamwork
St. Luke’s Vision
To become the region’s healthcare leader by:

• Enhancing individual and community health
• Delivering the best quality, service and value in healthcare
• Growing patient and payer preference
St. Luke’s Vision
To become the region’s healthcare leader by:

- Distinguishing ourselves by the quality of our people
- Valuing our physician partners
- Building a seamless continuum of care around our core services with our partners
BREAKING THE CHAIN OF INFECTION

• Breaking the chain of infection involves ALL healthcare workers!
• The best way to break the chain of infection is to follow the hand hygiene protocol.
• Your role in breaking the chain of infection is:
  – Always wash your hands; use of gloves does not preclude the need for hand washing.
  – Wash hands before and after eating, and after using the toilet.
  – Wash hands whenever you enter or exit a patient room.
PROCEDURE FOR HAND HYGIENE

Your role in breaking the chain of infection is to ALWAYS clean your hands. Hand washing (using soap and water) and hand sanitization (using alcohol based waterless hand sanitizer) are equally effective in de-germing the hands. If hands are visibly soiled, hand washing is recommended. Remember…

<table>
<thead>
<tr>
<th>…Hand Hygiene with Alcohol Based Hand Gel:</th>
<th>…Hand Hygiene with Soap and Water:</th>
<th>…When to wash your hands:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Apply the sanitizer to the palm of one hand and rub hands together.</td>
<td>1. Thoroughly wet hands and wrists with water – holding hands downward at all times so runoff goes into the sink.</td>
<td>1. Before and after eating, and using the toilet.</td>
</tr>
<tr>
<td>2. Cover all surfaces of the hands and fingers with sanitizer.</td>
<td>2. Apply soap with vigorous contact on all surfaces and between fingertips for a minimum of 15 seconds.</td>
<td>2. Immediately after removing your gloves.</td>
</tr>
<tr>
<td>3. Rub hands until dry.</td>
<td>3. Rinse thoroughly under running water while keeping hands in a downward position.</td>
<td>3. In between patient contacts.</td>
</tr>
<tr>
<td></td>
<td>4. Dry hands with paper towels. Use paper towel to turn off faucet (considered contaminated); discard into wastebasket.</td>
<td>4. After touching blood, body fluids, secretions, excretions and contaminated items, whether or not gloves are worn. (The use of gloves does not preclude the need for hand washing).</td>
</tr>
</tbody>
</table>
Infection Prevention and Control

STANDARD PRECAUTIONS

– All patients are considered potentially.
– Always protect yourself by using Personal Protective Equipment (PPE)
– PPE includes Gloves, Masks, Gowns, and Face Shields.
– Hand Hygiene is always required before and after patient contact.
– Look for signage on doors with precautions listed
Infection Prevention and Control

ISOLATION PRECAUTIONS

- Some patients are in isolation. Look for isolation signs upon entering a room.
- Use isolation precautions, in addition to Standard Precautions, to prevent the spread of certain diseases when Standard Precautions are not sufficient.
- The categories of isolation precautions are based upon how the disease is transmitted:
  - Contact
  - Droplet
  - Airborne
  - Droplet Plus
  - Contact Enteric
- Each type of precaution has its own requirements for additional PPE, procedures, and special rooms.
- Make sure to ask your preceptor for assistance with any questions that you may have.
Infection Prevention and Control

Examples of Isolation Signage

**CONTACT PRECAUTIONS**
- Wear gloves and gown upon entry.

**DROPLET PRECAUTIONS**
- Wear mask upon entry.

**VISITORS:**
- Wear regular mask upon entry.

**CONTACT – ENTERIC PRECAUTIONS**
- Wear gloves upon entry.
- Wear gown upon entry.
- Use **bleach** disinfecting product for all cleaning.

**VISITORS:**
- Wear gloves on entry, and gown if caring for the patient.

**DROPLET PLUS**
All healthcare workers entering room must:
- Wear an isolation mask upon entry.
- Wear a **Respirator** (PAPR or N95) during bronchoscopy, open suctioning, intubation, extubation or sputum induction.

Wear other PPE as needed for Standard Precautions.

**Visitors:** Wear mask to go in room.
Infection Prevention and Control

COMPLIANCE / NON-COMPLIANCE

• It is REQUIRED by all healthcare providers to perform their duties in a manner to ensure patients, visitors, co-workers, and themselves are free from exposure to blood / body fluids.
Disinfects with Powerful UV Light

- Creating the safest and cleanest environment for our patients and their loved ones with the LightStrike Full Spectrum™ UV Disinfection Robot.
- Decrease in infections, especially in the operating room
- Used in any area that has an increased chance for infection, especially ICC, OR, and more.

*It’s one additional step we take to protect our patients!*
LET’S TALK ABOUT Corporate Compliance and Confidentiality
HIPAA

HIPAA is a set of federal privacy regulations that:

• Protects patient information - also known as protected health information (PHI)
• Guarantees certain rights to patients pertaining to their PHI
HIPAA

• HIPAA is focused at PROTECTING the patient’s health information (PHI).
• Everyone needs to remember it is their responsibility to PROTECT PHI.
DID YOU KNOW THAT PROTECTED HEALTH INFORMATION INCLUDES:

- Demographic information (Name, address, email, SSN)
- Clinical information (Diagnosis, test results, social history)
- Billing information (Charges, collection status)
- Type of service patient is receiving now.
- Type of service patient will receive in the future.

Make sure you are PROTECTING all types of PHI!
OTHER’S HEALTH INFORMATION

• Curious how a patient is doing? Don’t ask and Don’t tell unless you, and the other person, need to know to do your job.

• Also known as gossip, this behavior is prohibited.

• Remember, St. Luke’s policies only permit you, to discuss patient information, with those who need to know to do their job.
REPORTING A BREECH?

• If a patient and/or family have a complaint, they should speak with St. Luke’s Hospital Privacy Officer at 419-893-5906 or nursing floor manager.

• To report a concern, we have a Compliance Hotline at 419-897-8462.

• If HIPAA policies are violated, St. Luke’s Hospital can place employees in discipline, ask volunteers or students to leave, notify Medical Staff Quality Committee regarding physician violations, and terminate contracts with business associates.
HIPAA

As an observer at St. Luke’s Hospital, it is your responsibility to maintain patient privacy!

- Do not share patient information with others.
- Do not write down patient information.
- Do not post on social media.
- Do not take pictures.
SOCIAL MEDIA (LIKE FACEBOOK):

• Do not post any reference to our patients and do not respond to postings about our patients.
• Even a posting that does not contain the patient’s name may be considered a breach of St. Luke’s policies and subject you to discipline.
Q. Why is Diversity important at St. Luke’s?

A. Diversity is an important initiative, because it facilitates a workforce that acknowledges and respects differences. Differences include race, gender, ethnicity, age, sexual orientation, physical ability, language, parental or marital status, job experience, religion, geographic location, thinking style, and more.
Q. How does St Luke’s Hospital define Diversity?

A. Diversity is about acknowledging many differences and similarities that make us unique. It refers to the collective mixture of people and the differences they bring to the workplace and the patient care environment.
Diversity

Be aware, understand, and treat each patient with respect!
Code of Conduct

PURPOSE:

- Provide a policy to outline the Hospital’s commitments to ensuring high ethical conduct and integrity in all of its corporate activities
- To show value and respect
- Set an expectation on how to treat others with respect, courtesy, and dignity
- Set an expectation of how employees should conduct themselves professionally and in a cooperative manner

(Adapted from the 2015 Educational Packet for Allied Health Employees, Contract Employees, and Physicians)
STANDARDS OF CONDUCT:

- Everyone is responsible to adhere to the rules of behavior and conduct outlined by St. Luke’s
  - Board of Trustees
  - Employees
  - Volunteers
  - Patients
  - Visitors
  - Medical Staff
- Each person should act in a mature and responsible way at all times

(Adapted from the 2015 Educational Packet for Allied Health Employees, Contract Employees, and Physicians)
Code of Conduct

UNACCEPTABLE ACTIVITIES:

• Egregious instances of disruptive behavior (gross misconduct): assault, criminal acts. There is ZERO tolerance in the hospital!
• Threatening or abusive language towards others: belittling, berating personal attacks, irreverent, unprofessional commentary
• Obscene or abusive language toward co-workers, physicians, patients or visitor
• Indifference or rudeness towards a patient or employee

(Adapted from the 2015 Educational Packet for Allied Health Employees, Contract Employees, and Physicians)
Code of Conduct

UNACCEPTABLE ACTIVITIES:

• Disorderly/antagonistic conduct
• Malicious gossip
• Bullying, intimidating or threatening behavior
• Harassment: sexual, racial, or other
• Failure to comply with hospital or medical staff policies/procedures
• Damaging, misplacing, or misusing hospital property

(Adapted from the 2015 Educational Packet for Allied Health Employees, Contract Employees, and Physicians)
Code of Conduct

CONSEQUENCES:

- Violation of the Code of Conduct
  - Investigation
  - Disciplinary action
  - Possible removal of privileges

- Complaints from patients or families regarding physicians are addressed through Hospital Policy Careline Concerns.

(Adapted from the 2015 Educational Packet for Allied Health Employees, Contract Employees, and Physicians)
Tobacco Regulations

• St. Luke’s has established a tobacco free environment in order to:
  – Reduce the risks associated with smoking to the patient.
  – Reduce the risks of passive smoke to other patients and staff.
• For visitors, patients, and staff any tobacco use is prohibited throughout the campus.
• All care team members are encouraged to courteously remind visitors of the tobacco regulations whenever they see a violation.
Patient Safety Codes - Ohio

- **ADAM**  Missing Child / Infant Abduction
- **BLACK** Bomb Threat
- **BLUE**  Medical Emergency
- **BROWN** Missing Adult Patient
- **COPPER** Communications Disruption or Failure
- **GRAY**  Severe Weather
- **GREEN**  Evacuation
- **MAGENTA** (Coming Soon) Radioactive substance hazard
Patient Safety Codes - Ohio

- **ORANGE** Hazardous Material Spill
- **RED** Fire
- **SILVER** Violent Incident involving WEAPON (use or threatened use) or HOSTAGE SITUATION
- **VIOLET** Combative or verbally abusive patient, visitor, or staff
- **WHITE** Snow or other Transportation Emergency
- **YELLOW** Disaster
Fire Safety

Code Red

R – rescue  P – pull pin
A – alarm   A – aim
C – contain S – squeeze
E – extinguish S – sweep/spray

• Evacuate to a safer area on the unit.
• *Close the doors after you leave the room.*
• Do not prop fire doors open. Have someone hold the doors as you pass through them. Close them when done.

Total evacuation

• Everyone is removed from the building because of dense smoke or fumes or other danger.
• Those evacuated first should be those in immediate danger and floor by floor; this will be determined by the incident commander.
Weather Safety - CODE GRAY

Severe Weather Conditions:
TORNADO WATCH
TORNADO WARNING
THUNDERSTORM WATCH
THUNDERSTORM WARNING

YOUR ACTIONS?

- Close all shades, drapes, and blinds to minimize the danger from flying glass.
- Move away from areas that may be a danger; i.e., entrances, glass enclosed waiting areas due to flying glass. Move to inner hallways, enclosures, etc.
Hazardous Materials

• Every employee, volunteer, and student must be aware of proper handling of hazardous materials that are in the health care environment.

• The definition of a hazardous material is “any substance, which has the capacity to produce personal injury or illness to man through ingestion, inhalation, or absorption through the body surfaces.”
Cleanliness of Hospital Environment

- Everyone is responsible for maintaining cleanliness. Do your part to clean up after yourself.
Responsiveness of Hospital Staff

• It is important to our patients that they get help in a timely fashion.

• Be sure to notify the appropriate person quickly, if you cannot help the patient.
ERROR PREVENTION

Education for those with limited patient contact, AND a limited timeframe in the facility, or always under supervision of employee or faculty

Building a Culture of Safety and Reliability
Expectations

- St. Luke’s Hospital expect that each person (regardless of employment status) will know and use key behaviors to improve overall patient and staff safety.

- Please feel free to ask any St. Luke’s educator, or employee, any questions you may have after completing this module.
What is Safety?

- S—Sense the error
- A—Act to prevent it
- F—Follow Safety Guidelines
- E—Enquire into accident/deaths
- T—Take appropriate remedial measure
- Y—Your responsibility
What patients want…

- Don’t hurt me
- Heal me
- Show me you care

Medical Errors are the 3rd - 6th leading cause of death in the U.S.
Don’t Hurt Me

- Personal commitment to patient safety
  - Speak up for safety with ARCC:
    - Ask a question,
    - Request a change
    - Voice a Concern
    - Use Chain of command
  - Peer checking and coaching
  - Report problems, errors or events
  - Stop, reflect and resolve
- Clear communication—SBAR, Hand-off communication
- Attention to details—self check using STAR:
  - Stop, Think, Act, Review
Heal Me

- Knowledge, skills and processes by which we deliver high quality, evidence-based care
- Providing the best patient care possible
Show Me You Care

- Show empathy and compassion
- Preserve dignity and respect
- Engage with patients, families, care providers and follow employees
How do Serious Safety Events Occur?

High Risk Situation + High Risk Behavior = Safety Event

High Risk Situation can not always be prevented but we can alter our High Risk Behavior
Rule-Based Events

Responding to situations by recalling or using rules previously learned

- Used the wrong rule—taught incorrectly
- Misapplied a rule—knew correct response but chose incorrect response to situation
- Non-compliance—chose not to follow the rule at all (thought their way was best)

Learn right rule, think twice, be aware of increased risk
Reporting Patient Events

- Risk Management MUST know about any event that
  - MAY cause harm to a patient if allowed to recur
    - Near Miss Events – Event did not reach the patient
    - Precursor Safety Events – Event reached patient, resulted in no injury
  - HAS caused any degree of harm to a patient
- Serious Safety Event 1 - 5
  - Severity 1 – Death
  - Severity 2 – Severe Permanent Harm (loss of limb, impairment of a major function e.g. loss of sight, fertility)
  - Severity 3 – Moderate Permanent Harm (expected to be permanent but not interfere w ADLs e.g. disfigurement)
  - Severity 4 – Severe Temporary Harm (resulting in higher level of care or additional major procedure e.g. fall w hip fx → OR)
  - Severity 5 – Moderate Temporary Harm (resulting in increased monitoring or minor procedure e.g. x-ray to r/o injury)
Behavioral Expectations

- Personal Commitment to Safety: I will demonstrate a personal and a team commitment to safety
- Be Assertive: Use ARCC “I have a concern”
- Ask an employee if you have any questions
- Look out for each other, point out hazards
Stop, Reflect and Resolve

- STOP when uncertain!
  - Review your plan
  - Resolve the concern
  - Reassess your actions
- Reflect (internal check)
  - Does this make sense? Is it correct? Is this what is expected to happen?
- Resolve (external check)
  - Consult an expert
  - It’s okay not to know…it’s NOT okay to not find out
Report Safety Incidents

- Reporting allows for trending and identification of process problems, not to punish those involved
- On-line reports (RL-6) help identify trends
- Report the small things and Near Misses, it important
- Don’t assume someone knows and will take care of it
SAFETY FIRST