

# Clinical Orientation Handbook for Adjunct Staff, Faculty and Students







Thank you for your interest in bringing your students to AtlantiCare. It is our intention to provide the best possible clinical experience for your students and faculty. If you have any questions or concerns, please contact Student Placement Coordinator @ spc@atlanticare.org



# **AtlantiCare Student Placement Process**

AtlantiCare clinical sites are identified by their licensure: AtlantiCare Regional Medical Center (ARMC) and AtlantiCare Physician Group (APG).

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Family Medicine
Endocrine/ Joslin Diabetes Cen-
er
Cardiology
OB/ GYN
Surgery
Neurology
Rheumatology
Jrgent Care Centers



# Faculty/Student Clinical Rotation Request Process

### I. Pre-Experience Requirements and Process

- Request for group clinical rotation/observation must be submitted via the AtlantiCare Student/Affiliate web page on the AtlantiCare.org website at least 45 days prior to anticipated start date, including clinical goals.
- Request for individual clinical rotation/observation must be submitted via the AtlantiCare Student/Affiliate web page on the AtlantiCare.org website.

### **II. Educational Facility is responsible for ensuring:**

- · active contractual affiliation agreement with AtlantiCare Regional Medical Center for clinical rotation/observations and
- current Certificate of Insurance (COI)
- 1. Terms of the current Affiliation Agreement will be followed and Educational Facility will attest to compliance with the following (if issues are identified they must be forwarded to ARMC for review). All of the following confirmed on completed Clinical Placement Documentation/Student listing checklist:
  - Student Criminal Background checks
  - Health requirements, including but not limited to:
    - a. Physical Examination by their own healthcare provider stating that the individual is free of contagious disease and capable of performing job tasks.
    - b. Proof of negative drug screen and proof of negative background check.
    - b. A negative Mantoux test or chest x-ray within one year if positive PPD reactor.
    - c. Rubella and Measles screening to prove immunity or documentation of receipt of two doses of Measles-Mumps-Rubella Vaccine.
    - d. Screening for varicella immunity or susceptibility.
    - e. Provide evidence of vaccination with seasonal flu vaccine.
    - f. Documentation of Hepatitis B immunity status if performing procedures which pose a risk of exposure to Hepatitis B as per compliance with OSHA Bloodborne Pathogen Standard.
- 2. The Educational Facility will maintain Criminal Background checks and health requirement student records.
- 3. The Educational Facility will contact the Student Placement Coordinator, via the AtlantiCare Student/Affiliate web page, at <a href="mailto:spc@atlanticare.org">spc@atlanticare.org</a> with questions or concerns.



# Faculty/Student Clinical Rotation Process Instructions

### **III. Orientation**

- 1. The Student/Educational Facility will receive email confirmation for rotation placement and orientation materials, which include:
  - Student/School Orientation Packet core packet with Attestation Form
  - Hospital-specific Addendum
  - ARMC Clinical Rotation Attestation Form which will include Clinical goals
  - AtlantiCare Health System HIPAA and Privacy Act Compliance Attestation Form
- 2. To comply with annual education requirements ALL Faculty/Students must review the Student/School Orientation Packet core packet handbook and hospital-specific addendums and attest to completion of the orientation materials on the ARMC Documentation Checklist.
  - 3. The Educational Facility must forward a database of names of faculty and students with confirmed attestations attached.

### IV. Security, Badges & Parking

- 1. All faculty and students are required to wear an AtlantiCare student badge, as well as their student badge, at all times during their clinical rotation at ARMC.
  - 2. It is the responsibility of the educational facility to coordinate the badge process for each faculty/student.
- 3. Individual students (I.e.: MSN, NP, distance-learning, etc.), are responsible for contacting the ARMC Badging Office to make their own arrangements for obtaining an ARMC badge
- 4. Arrangements for picking up badges may be made by contacting the ARMC Badging Office, City Campus. Badging Office Hours as follows: Monday, Wednesday, Thursday 9:30am until 12:30pm (please come in person to purchase badge during previously stated hours)
  - 5. The cost of each Atlanticare ID badge is \$20 (refundable when badges are returned).
  - 6. Non-working badges should be reported to Badging office, City Campus, by phone. Call Operator for connection to Security/Badging office.
- 7. Badges for use in Labor & Delivery will be obtained daily by faculty and students from the Mainland Security office and are separate from AtlantiCare badges.
  - 8. Students may not bring book bags and personal belongings to the clinical rotation unit.
  - 9. Student and/or faculty should park in designated employee parking areas.
- 10. Please note: During times of regulatory survey and inspection it is essential that students and faculty please exit the building and consider their clinical rotation at ARMC as ended or on hold for the duration of the regulatory visit.
  - 11. Students will not be permitted to be on clinical site during times when their educational facility is closed (I.e.: holidays and in inclement weather).



# Faculty/Student Clinical Rotation Process Instructions

### V. Computer Training & Access to Records

- 1. Students will receive "view only" access and will not be documenting within the patient electronic medical record.
- 2. Faculty are responsible to supervise and 'sign off' within the patient chart all tasks performed by students (Ie.: foley catheter insertion, wound care, etc.).
- 3. If PowerChart (EMR) training is necessary, the training will be coordinated via the Professional Practice and Development Department and Clinical Informatics
- 4. Remote access of patient records by faculty or students is strictly prohibited.
- 5. Students will be permitted to perform pre-clinical research on their faculty-assigned patients provided that:
- a. Faculty have posted patient assignments for students at the main nurse's station (out of visitor's sight), and have communicated the assignment with the current charge nurse/team leader.
- b. Students are to wear school badges and uniform. Please dress professionally, absolutely no sweat shirts, hoodies or fleece jackets to be worn while on nursing units.
  - c. Students must wear AtlantiCare student badges at all times during clinical rotation.
  - d. Students check in with charge nurse or team leader when they first arrive on the floor and prior to accessing any patient information.
  - e. Reminder: Students will access patient records as 'view only.'
- f. Please note: There will be no <u>printing</u>, <u>photography</u>, <u>or copying of patient records</u>. Removal of patient records from hospital premises is strictly prohibited in accordance with HIPAA laws.

# VI. Medication Administration -- GUIDELINES FOR STUDENT NURSE

- a. Pyxis Access: Neither faculty members nor nursing students will have access to the Pyxis; only the responsible RN will remove medication(s) from the Pyxis.
- b. Medication Administration: <u>Prior to administering any medications, the nursing students</u> are expected to demonstrate safe medication practices. This includes The six rights of medication administration. Nursing faculty and students are responsible to verify: Right dose, Right time, Right method, Right medication, Right Patient and Right Documentation prior to the administration of any medication. Patient identification must also be verified by using two (2) patient identifiers at the bed-side prior to administering any medications. Patient identifiers are the patient's name and date of birth.
  - c. Medications may be administered under the direct supervision of the responsible RN with the consent of the nursing faculty member.
  - d. Documentation: Documentation of medication administration is the responsibility of the RN.





### **Ouick Facts about Clinical Rotation**

As a clinical faculty or student, you are expected to represent the hospital in the most professional manner possible and to support the hospital's mission of service excellence. This orientation handbook is based on Joint Commission, Occupational Safety and Health Administration (OSHA) and Medicare regulations and recommendations from the Association of Professional Infection Control (APIC) – for faculty use with students. This handbook is designed to be used at the beginning of the clinical education program and will help you to understand the policies and procedures that have been established to guide your conduct and performance.

Reading and understanding this material is required. If you have any questions regarding this information, please contact the Clinical Manager or your Clinical Instructor of your assigned unit/area. Signed attestation forms for both the Hospital Consortium Orientation SLM and ARMC HIPAA/Corporate Compliance are required before you will be allowed to begin your experience at ARMC.

# **Your Competency and Education**

Because our patients and their families put their trust in our skills and abilities, it is particularly important that all persons working or training at our facilities be competent to perform their assigned duties. Competency is defined as having the knowledge and ability to perform tasks safely and effectively.

You are undergoing training in your selected program and your faculty will assess and reassess your competency on an ongoing basis, based on techniques, procedures, technology, equipment or skills needed to provide care, treatment or services. Their findings will be documented on a written competency tool, which will be placed in your school record/file, and they will discuss their findings with you as well.

This orientation packet was developed in an effort to standardize basic knowledge and skills for all persons training at our facility. If you are unsure about an assignment or are requested to participate in a procedure that is unclear to you, it is your responsibility to make that known to your clinical instructor.

The following section contains information specific to AtlantiCare Regional Medical Center, and is meant to be reviewed and understood in conjunction with the core orientation packet preceding this section.



# Welcome to AtlantiCare Regional Medical Center

### **Quality Measures and Organizational Commitments**

How we benchmark and assess ourselves against outside measurements

- Malcolm Baldrige National Quality Award
- Magnet Status
- Medicaid / Medicare



### **NEUROSCIENCES INSTITUTE**

Comprehensive Stroke Centers provide complete and specialized care to patients who experience the most complex strokes, which require specialized testing, highly technical procedures and other interventions. In addition, Comprehensive Stroke Centers provide education and guidance to affiliated primary stroke centers. Like a heart attack, a stroke requires immediate medical attention. "Saving brain" is critical to recovery. Early treatment can minimize damage, lessening the likelihood of severe disability. Our Comprehensive Stroke Center rapid response team is available 24/7. We offer clot-busting drugs and the area's most sophisticated technology capable of taking multidimensional pictures of the brain, so procedures can be done not only quickly, but accurately.

#### **Stroke Awareness:**

**B.E. F-A-S-T!** 

<u>B E F A S T</u> is an acronym for recognizing and responding to the symptoms of stroke.

It stands for <u>balance</u>, <u>eyes</u>, <u>face</u>, <u>arms</u>, <u>speech and time</u>, and it is used as part of a campaign by the National Stroke Association to raise awareness about the impact of stroke on women.

In 2009, additional warning symptoms were added for general public knowledge and to prepare patients and families post discharge.

# If you witness someone with the symptoms, based on where you work, you should call for help using the following numbers:

Patient care delivery areas, Nursing units (with the exception of Critical Care and Emergency Departments):

Call a MET – Dial 1-2222 at the City Campus or 2-2222 at the Mainland Campus

All other areas of the hospital, for visitors, employees and outpatients:

Call a Code 10 - Dial 1-2222 at the City Campus or 2-2222 at the Mainland Campus and tell the operator what you are witnessing.

All ARMC off-campus areas – Dial 911



### **ABOUT ATLANTICARE:**

AtlantiCare is the region's largest healthcare organization and largest non-casino employer, with more than 5,170 employees and 600 physicians in nearly 70 different locations. We have different ideas, skills, backgrounds and roles, but each one of us plays a part in supporting AtlantiCare's vision of building healthy communities.

### **OUR VISION, MISSION AND VALUES:**

### Vison

We build healthy communities.

### **Mission**

We deliver health and healing to all people through trusting relationships.

### **Values**

**Safety** Safety is our top priority.

*Teamwork* We work together to achieve our goals.

Integrity Our behavior consistently reflects the highest ethical standards.

**Respect** We treat each individual with dignity and compassion.

**Service** We create loyalty by delighting those we serve

# Our Performance Excellence Commitments, or 5 Bs, outline how we will realize our mission:

**Best Quality** 

Best People/Best Workplace

**Best Financial Performance** 

**Best Customer Experience** 

**Best Growth** 







### **NURSING**

### Magnet Designation and AtlantiCare Regional Medical Center...

AtlantiCare Regional Medical Center was extremely proud to receive the American Nurses Credentialing Center (ANCC) Magnet Designation in March of 2004 and re-designation in October 2008. In December of 2013 we received our 3<sup>rd</sup> Magnet designation. The Magnet Designation is valid for four years.

**The Magnet Vision** – Magnet organizations will serve as the fount of knowledge and expertise for the delivery of nursing care globally. They will be solidly grounded in core Magnet principles, flexible, and constantly striving for discovery and innovation. They will lead the reformation of health care; the discipline of nursing; and care of the patient, family, and community.

Making the human connection at every moment in a patient's journey

WE are committed to provide excellent customer service.

### **Our Customer Experience Standards - CICARE**

- C Connect
- I Introduce
- C Communicate
- A Ask for permission and Anticipate
- R Respond
- E End with Excellence





### **Tender Lifting Care Program**

AtlantiCare Regional Medical Center will provide a Safe Patient Handling Policy and Program that will promote a culture of safety. This will be accomplished through the provision and use of appropriate work practices, equipment, engineering and administrative controls, designated to prevent patient and staff safety. Through the expertise of the Safe Patient Handling Committee and Ergonomic Safety Coordinator, employees will receive training and education on best practice methods to minimize unassisted patient handling and improve the quality of patient care.

### **SAFETY CODES**

Calling a Code:

City Campus 1-2222 Mainland Campus 2-2222

ARMC utilizes a **Rapid Response Team (M.E.T. Team)** that enables health care staff members to directly request additional assistance from specially trained individuals when the patient's condition appears to be worsening.

# **Commitment to Diversity**

AtlantiCare's commitment to diversity supports creating a culture of inclusion, where all employees are encouraged to contribute their diversity of ideas, background, talents and experiences. We will attain a culture of inclusion by promoting open communication, knowledge sharing and innovation, and creating a mutually respectful environment for our workforce and customers.





### **Nursing Theory**

In 2006, our nursing staff chose a nursing theory compatible with the philosophy of nursing at AtlantiCare Regional Medical Center. Jean Watson's Theory of Human Caring was selected to help guide the practice of nursing at AtlantiCare Regional Medical Center.

Watson's theory was chosen for its basis of caring which was consistent with our departmental and professional nursing values. Watson's theory can be used by caregivers at all levels of practice and supports various methods of care delivery, e.g. primary care, total patient care.

The Theory of Human Caring provides clear direction as to how nursing fulfills our roles and how we articulate our practice. It allows for creativity in practice, education, management, and research, and is congruent with our organization mission, vision and values. Additionally, Watson's theory can incorporate other models or theories important to ARMC nursing.



Providing the right care in the right place at the right time is AtlantiCare's strategy for remaining strong and financially viable.

You can help support our Best Growth goals by referring friends, family and patients to AtlantiCare for services. You can also submit your ideas for new AtlantiCare programs and services through Employee Voice on the intranet.

# Serving a wider geographic area and expanding....



Bringing together best in quality, customer service, workplace/people and community helps us enrich our profits in a not for profit organization. Our revenue is invested in the education of our employees, improvement in services and the expansion of locations within AtlantiCare. This commitment creates our financial success.



### **Patient Centered Care**

As students you are joining our teams in providing exceptional Patient Centered Experiences. There are many tools to provide this care but basically it comes down to the caregiver (you) asking "Am I doing everything I can do to improve the patient/family experience?" In providing exceptional patient centered care every encounter counts. Use these three questions to guide you in providing Patient Centered Experiences.

How would I feel if our roles were reversed?

How are the patient/family members reacting to what I am saying? What are their facial expressions telling me?

Have I done everything I can to make a personal connection with this patient/family/visitor or staff member?

### **The Platinum Rule**

Treat others the way they want to be treated!

We have found that these action behaviors enhance the patient experience.

- I will say "please" and "thank you" in all customer/co-worker interactions.
- I will say "is there anything else I can help you with?" at the end of customer/co- worker interactions.
- I will always identify myself, my department and say "may I help you" when answering the telephone.
- I will always wear my name tag in a visible location.
- I will smile, make eye contact and address others who are near me.
- I will promote a quiet environment to help maintain a place of healing and allow the patient to rest.

Age Specific and Culturally Respectful Care mirrors the principal of the Platinum Rule. Respect individual preferences and needs related to age and culture. Translator services are available for Non-English speaking and hearing impaired patients.



### Many regulations support patient rights:

### **HIPAA**

### What is HIPAA?

- The Health Insurance Portability and Accountability Act (HIPAA) was passed by Congress in 1996. It addresses healthcare reform, as well as the portability of healthcare insurance, defines the standards for electronic exchange of health care data and mandates national standards to protect the privacy and security of Personal Health Information (PHI).
- The Privacy Rule defines patient rights, provider's obligation to responsibly uphold those rights and the responsibility to protect patient health information. It specifies the consequences for failure to do so.
- The Security Rule: requires us to have safeguards in place to protect the confidentiality, integrity and the availability of PHI.

# Who does HIPAA apply to?

• The law is applicable to all those who work/volunteer as healthcare providers or students (hospitals, pharmacies, dentists, physicians, laboratories, etc...), health insurance plans and clearinghouses.

### Protected Health Information (PHI) includes the following:

- All medical, demographic and financial information which is collected from an individual or created or received by a provider
- Relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present or future payment for the provision of health care to an individual
- Identifies the individual, or can be used to identify the individual

### **Forms of PHI:**

- Verbal conversations
- Telephone calls and voice mail
- Printed (reports, bills, test results, patient records, labels, schedules, etc.)
- Fax transmissions
- Electronic screen displays, e-mails, computerized records and files



# How Do we Keep PHI Secure?

We are required by HIPAA to have safeguards in place to protect privacy, integrity and accessibility of PHI. These are some ways to keep PHI secure.

- Access only the information that is relevant to your work
- Keep your passwords confidential
- Don't leave PHI on paper unattended on desks, carts, fax machines, printers or pneumatic tube
- Lock doors and file cabinets where information is stored
- Don't forward e-mails or voice mail that contains PHI unless authorized to do so
- If you are having a patient care discussion, keep your voice down so others can't overhear
- Don't discuss PHI in public areas like hallways, elevators or the cafeteria
- Don't disclose PHI unless you know the other party has the authority to receive the information
- Don't ask for more information than is needed to perform your function
- Dispose of PHI in confidential waste containers
- IV bags with PHI Empty contents and Cover the PHI with a blank label/or black marker place in the regular trash container

### PHI use and Disclosure:

According to the law, patient authorization is required for some of use or disclosure of protected health information not directly related to treatment, payment or healthcare operations. The type and amount of information that may be accessed or disclosed is also limited. This is referred to as minimum necessary.

What does Minimum Necessary mean? Minimum necessary means that we limit disclosure of any patient information to only what is necessary for this particular immediate purpose. In other words, the right to access PHI is dependent on the need to carry out a function of a specific job or role. For example, a staff member or physician may only have access to information for the patients they are caring for. The amount and type of information is also limited, a speech therapist may not have access to lab results. The insurance company may not have access to the entire record if they are only going to pay for the patient's broken leg. When information is limited we must always be aware that providing only Minimum Necessary information is not intended to impede patient care. Care providers should have access to all the information they need to deliver care.

How do we verify the Identity and Authority of the Requestor?

Before information is disclosed we verify the identity of the requestor and their right to the information. For example, if the requestor is on the phone, stating they are calling from a doctor's office, we may look at the name that is displayed on caller ID. We would also look on the chart to see if that physician has been consulted to care for the patient. Before faxing information we verify the fax number, after faxing we confirm receipt.



### Patient Rights under the HIPAA Law:

In addition to having a right to Privacy and Security of PHI, other patient rights under the HIPAA law include the Right to:

- Receive a copy of the Notice of Privacy Practices (NPP)
- Request restriction and limit what information may be disclosed and to whom
- Request Alternative Communication for example a patient can request that appointment reminders or bills be sent to an alternative address
- Opt out of the Hospital Directory (if the Patient opts out of the Hospital Directory only those directly involved with treatment, payment, and healthcare operations will know that they are in our institution. Visitors, phone calls, flowers, and mail will be handled as if the patient is not here.)
- Request review, make copies, and request to amend their records
- Accounting of disclosures made outside of treatment, payment or healthcare operations
- File a complaint with the Privacy office at the hospital or with the Federal Office of Civil Rights.

# What do you do if you witness a breach of privacy?

It is everyone's job to make sure our patient's PHI is kept private and secure. If you witness a breach in privacy, notify your instructor and the Privacy Officer immediately. Privacy Officer contact number is 609- 407-2251. Don't be afraid to report breaches or problems that you see. The Hospital has a non- retaliation policy. This policy encourages reporting without the fear of vengeance or paybacks.

# What happens to the person who breaches PHI?

PHI breaches, violating State/Federal laws and/or hospital policies are subject to disciplinary action up to and including termination of employment or contractual relation with the Hospital and/or civil or criminal action or any other appropriate legal remedy. In order to protect our patient's privacy, avoid civil and criminal penalties, or disciplinary action; all workforce members should know the Privacy Practices of the hospital and the rights of patients under the HIPAA law.

### What does the Privacy Officer do to prevent breaches?

The Privacy Officer is responsible for the policies and procedures that ensure the privacy and security of PHI and the compliance with HIPAA regulations.

# Social Media

Social media gives us the freedom to express ourselves, however the "right" to express ourselves on a social networking page does not mean freedom from consequences. We are just as accountable for what we write as we are for what we say, and the same rules apply to both.

Using social media inside or outside of the workplace has the potential to affect our job performance and/or the performance of others. All usage of social media from a hospital organization's electronic communications systems must comply with all international, federal and state laws, as well as all applicable hospital organization's policies governing employee activity.



# Welcome to AtlantiCare Regional Medical Center

You are personally responsible for the content you post.

Penalties for violations may include discipline, termination and civil or criminal prosecution.

# Do not post any material that violates the privacy rights of patients.

You should not post any patient related information on any social media venue. As a healthcare employee, vendor or student, the same rules regarding patient privacy that apply to everything else you do in healthcare also apply to social media activities. For example, posting messages to a patient or their family (even at their request) could violate HIPAA by releasing patient information to an unprotected system.

### Do not comment on or disclose confidential information!

This includes protected health information, financial performance information regarding business operations, revenues, profits, information technology systems or application details, business plans, strategy or contracts.

Social media mistakes occur every day. Below are examples of "SOCIAL MEDIA DON'TS" to help you understand what <u>not</u> to publicly post on social media.







- Post any patient identifiers
- Post that you cared for an Eagles player
- Post comments that you would not say in any work forum
  - Speak badly of your patients or clients
    - Post inappropriate photos



# **Emergency Medical Treatment and Active Labor Act (EMTALA)**

The federal government created a statute which gives all individuals the right to be treated for an emergency medical condition regardless of their ability to pay.

### The three primary requirements on hospitals that provide emergency medical services are:

- 1. The hospital must provide an appropriate **medical screening exam** within 4 hours to anyone who presents to the hospital seeking medical care by a Licensed Independent Practitioner (Physician or Advanced Practice Nurse).
- 2. For anyone that comes to the hospital and the hospital determines that the individual has an **(EMC) emergency medical condition**, the hospital must treat and stabilize the emergency medical condition, or the hospital must transfer the individual.
- 3. A hospital **must not** transfer an individual with an emergency medical condition that has not been stabilized unless several conditions are met that includes effecting an appropriate transfer.

We honor...

# **NJ Patient Rights**

Every person admitted to a general hospital licensed by the State Department of Health has specific rights. A copy of these rights is available to students and faculty upon request.

### **Advanced Directives**

Advance Directives (AD) let caregivers know what the patient wishes about their healthcare, should they not be able to speak for themselves.



### **NJPOLST**

Practitioner Orders for Life-Sustaining Treatment is a healthcare planning tool that empowers individuals to work closely with their medical team to detail their personal goals and medical preferences when facing a serious illness.

### **Palliative Care**

Special teams are consulted for symptom management for patients with either chronic or acute illness.

### **End of Life Care**

The dying patient has unique needs for respectful, responsive care. All staff should be sensitive to the needs of the patient and family. Concern for the patient's comfort and dignity should guide all aspects of care during the final stages of life. Once the decision

has been made to withhold treatment, the patient/family may feel abandoned. It is very important to assure the patient/family that they will still receive appropriate care. Attention to comfort is of the utmost importance. These are some of the issues that should be considered while caring for patients and families:

- Assure patients and families that the health care team is available to provide care and support. Make patients comfortable with medication, positioning and frequent
- Provide appropriate treatment for any primary and secondary symptoms ((i.e. nausea, vomiting, dyspnea) according to the wishes of the patient/family. Manage the pain aggressively.
- Respect the patient's values, religion, and philosophy.
- Involve the patient/family in aspects of care.
- Respond to psychological, social, emotional, spiritual, and cultural concerns of the patient and family.
- Religious/Pastoral support is available 24hr/day.



# **Organ Donation and Transplantation**

The hospitals honor the patient's wishes concerning organ donation and transplantation. Only designated requestors may approach the patient or family.

What is the Law in New Jersey?

In NJ all deaths must be reported to the organ/tissue procurement agency.

Referral Process:

Physiological- notify the agency asap after pronouncement

**Brain Death** - notify the agency when it is recognized that the patient will not likely survive.

The Transplant coordinator with staff assistance will speak with the family regarding donation.

Gift of Life Donor Program KIDNEY - 1 (1-800-543-6391)

<u>1-888-DONORS</u> (1-888-366-6771)

### What does the RN need to do?

Determine if the patient has expressed a donation interest.

Give a good history to the transplant coordinator, complete the referral form, provide physiological support for patient and emotional support for family/significant other.

The Exceptional patient experience also includes optimal patient safety and quality.

We utilize safe communication practices such as;

SBAR (Situation, Background, Assessment, and Recommendation) is a tool used to communicate a change in patient condition to medical staff and other co workers



We report patient safety issues without fear of retaliation. We recognize that all staff, volunteers, and students are caregivers.



# The No Passing Zone simply means we do not pass a call light without identifying the patient's needs Emergency Codes

Code AMBER	Child Abduction	<ul> <li>Notify Security</li> <li>Cover all interior stairwell doors, elevator areas and exit doors</li> <li>Immediately Search the entire unit</li> <li>Protect the crime scene</li> </ul>
Code YELLOW	Bomb Threat	<ul> <li>Notify Security Immediately</li> <li>Notify the Charge Nurse</li> <li>Screen the Call and use the facility telephone checklist</li> <li>Report suspicious items to Security</li> <li>Shut off all Cell Phones</li> <li>Limit calls to outside of building</li> </ul>
Code GRAY	Patient Elopement or Security	<ul> <li>Notify Security Pager</li> <li>Notify the Charge Nurse</li> <li>Attempt to verbally deescalate the situation.</li> <li>If the patient attempts physical assault, remove yourself from the situation.</li> </ul>
Code RED	Fire	Activate R.A.C.E. and use P.A.S.S.
Code White	Neonatal/Pediatric Cardio-pulmonary Arrest	<ul> <li>Assess the patient</li> <li>Start CPR</li> <li>Get the Crash Cart</li> </ul>
Code BLUE	Adult Cardio-pulmonary Arrest	<ul> <li>Assess the Patient</li> <li>Start CPR</li> <li>Get the Crash Cart and/or AED</li> </ul>



# Welcome to AtlantiCare Regional Medical Center

# **Emergency Codes (continued)**

Code SILVER  Code ORANGE	Hostage situation or Person with a Weapon  HAZMAT	DO NOT enter the area  Call for assistance and notify Security  Secure the area pending the arrival of security/ police  Notify Security Internal  Alert people in the immediate area of spill to keep away External  Follow Decon Team Protocol per facility
Code TRIAGE	Disaster	<ul> <li>Notify Security and the Executive Office or Nursing Supervisor/Instructor Internal</li> <li>Follow protocol depending on the nature of the problem</li> <li>Communicate with the Command Center as necessary</li> <li>External</li> <li>Report back to assigned department</li> <li>Communicate with the Command Center as necessary</li> </ul>
Code CLEAR	The situation has been cleared	Resume normal operations
Rapid Response	A patient's condition appears to be worsening and specially trained healthcare staff are needed	Stay with the patient until the rapid response team arrives. Review facility policy.
Stroke Code or Neuro Response	Acute Stroke	Stay with the patient until the Stroke/ Neuro response team arrives



# Welcome to AtlantiCare Regional Medical Center

# Responding to a Code RED (Fire Emergency):

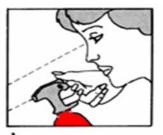
- Keep doorways and hallways clear at times. Report all fire, smoke or safety hazards.
- Know the location of the fire alarm pull stations and exits. Know the location and type of fire extinguishers in your area.
- Do not take independent action. If unsure, ask the Director of Security, or the first available resource person.
- During construction follow alternative exits and other life interim life safety measures as directed.

### Activate R.A.C.E.

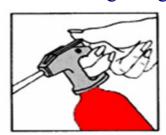
- R Rescue people in immediate danger
- A Pull Alarm (call operator, confirm location)
- C Close all doors
- **E** Extinguish (use good judgment when deciding to fight a fire)



Pull the pin



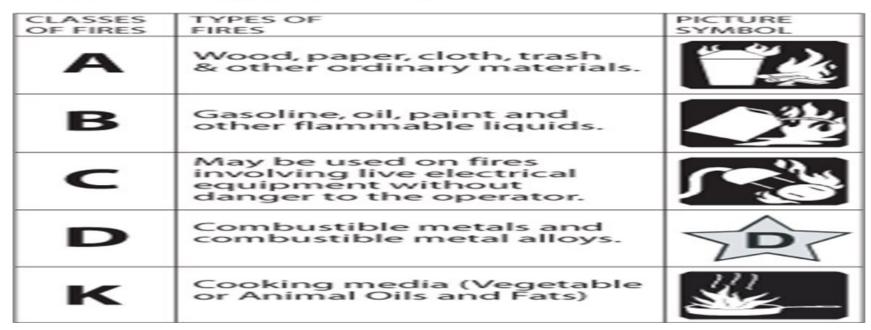
Aim low



Squeeze the handle



Sweep from side to side





# Welcome to AtlantiCare Regional Medical Center

### Let's Talk Trash

# Each type of trash goes in different Waste Container

Red- Regulated Medical Waste	Sharps- All sharps
Blue- Single Stream Recycle	Grey-Confidential
Yellow- Chemotherapy	White, Beige or Gray

# What is RMW (Regulated Medical Waste)?

### NJDEP Classifications of RMW

- Cultures and Stocks
- Pathological Waste
- Human Blood & Blood Products
- Sharps
- Unused Sharps

# Where Does RMW GO?

### RMW shall be discarded in the RED containers and/or bags placed in:

- Soiled Utility Rooms
- Operating Rooms Diagnostic Areas
- Designated Patient Rooms & Treatment Areas

# These Items SHOULD NOT be placed in RMW Receptacles:

- Used Diapers & Incontinent Pads
- **Blood-Tainted Dressings**
- IV bags & Tubing without visible signs of Blood
- Used or Unused Foley bags and Irrigation sets
- Used or Unused Gloves
- Used or Unused Disposable
- Patient Equipment



### **SHARPS**

Sharps are considered Regulated Medical Waste.

What is a Sharp?

- Any object (Used or Unused) that can penetrate someone's skin
- All Syringes with leur-lock ends regardless of the size & use
- Suture needles
- Lancets
- Scalpels
- Razors
- Glass slides, capillary tubes, pipettes
- Lids of the urine culture & fensitivity container but not the cup!

Where Do We Dispose of Sharps?

- Sharps are disposed of in SHARPS containers located in all patient care areas
- Non-sharps (packaging, gloves, plastic containers) DO NOT BELONG in the SHARPS containers

Guidelines for Discarding Sharps-Get the Point So Someone Else Doesn't Have to!

Activate safety devices and put all sharps in designated sharps containers immediately.

### Chemotherapy containers.

Chemotherapy waste is disposed



of in chemotherapy containers.

These containers will be disposed of by a licensed contractor. Patient excrement is also considered hazardous waste until 48hr after the drug has been administered. Staff should gown, double glove with chemo gloves, and goggle/shield if there is a risk for splashing. The toilet should be flushed twice with the seat lid covered. A man should be seated to urinate to avoid splashing.

#### **Radioactive Waste**

Radioactive substances are used for diagnosis and treatment.



those dealing with radioactive waste should contact their managers for department specific policies.

#### **ALL Other Waste**

All other waste not described to you in this module is considered regular waste.

These wastes will be placed in a clear bag. The container may be a white, beige or gray colored garbage can. *Examples of Items that are Disposed of in Regular Clear Waste Receptacles:* used diapers & incontinent pads, blood-tainted dressings, IV bags & tubing without visible signs of blood, used or unused foley bags and irrigation sets, used or unused gloves, and used or unused disposable blue pads.



# **Patient Safety**

Patients at high risk to fall should not be out of bed alone or left unaccompanied on a stretcher. Call staff for assistance.

- Bed and chair alarms may be utilized for at risk to fall patients
- Refrigerators in the patient care areas are for patient supplies only
- Food or drink is not permitted at the nurse's station or in any patient care area (OSHA) regulation for the protection of the employee)
- Patient may have latex allergies look for signs. Do not expose them to latex. Non-latex gloves and equipment are available.
- Follow the facility's no No Pass Zone guidelines (we do not pass a call light without identifying the patient's needs)
- Hourly rounding is a team effort to keep patients safe
- Bedside shift report engages the patient in the plan of care and promotes safety **Hourly rounds** are made on inpatient units every hour, checking on the **patient's need** for:
  - A. potty (toileting),
  - B. positioning
  - C. pain (pain medication)
  - **D.** possessions (call bell and all of the patient's items are within reach), and
  - E. pathway exit -clear.

During hourly rounding please ensure that the bed alarm/chair alarm is on and is in working order.

# **2016 National Patient Safety Goals**

The National Patient Safety Goals were written by the Joint Commission. The purpose of the National Patient Safety Goals is to improve patient safety. The goals focus on the problems in healthcare safety and how to solve them. The exact language of the goals can be found at www.jointcommission.org.





# Welcome to AtlantiCare Regional Medical Center

# **2016 National Patient Safety Goals (continued)**

Identify patients correctly	Use at least two ways to identify patients. Use patient's name and date of birth. This is done to ensure each patient gets correct medicine and correct treatment. Make sure the patient gets the correct blood when they receive a blood transfu-
Improve staff communication	Get important test results to right staff person at the right time.
Use medicines safely	Before a procedure, label medicines that aren't labeled. Examples: meds in syringes, cups and basins. Use extra care with blood thinners. Record & pass along correct information about patient meds. Check patient's meds at home and new meds. Make sure patient knows meds they are taking at home and to confirm with their
Use alarms safely	Make improvements to ensure that alarms on equipment are heard and responded to on time
Prevent Infection	Use hand cleaning guidelines from CDC or WHO. Use proven guidelines to prevent hard to treat infections, central line, foley catheter and post surgical infections.
Identify patient safety risks	Find out which patients are at risk to commit suicide
Prevent mistakes in surgery	Make sure surgery is being done on right patient and right body part. Mark correct body part.  Pause before surgery and confirm patient is cor-



Abuse and Neglect

Patients have a right to be free from abuse by healthcare providers and the public. Abuse and Neglect can be directed at children, adolescents, adults and older adults. Knowing the types of abuse and neglect and the clues that they occur can save a life.

Neglect is the most common type of abuse. Neglect occurs when parents or guardians don't provide food, shelter, safety, supervision, clothes, education, attention, or medical treatment – often it's about what they don't do. Physical abuse can be the easiest of all four types of abuse to spot because the clues can be obvious when someone hits, slaps, beats, burns, kicks, or stabs you. Sometimes it isn't as obvious because the abuse does not leave marks. Sexual abuse is any form of touching, intercourse, or exploitation of someone's body. This includes taking pictures you for sexual purposes, touching someone else's private parts, and making sexual references to your body. Being forced to touch or have sex against one's will is sexual abuse. Emotional abuse is when someone threatens or humiliates you. This includes calling you names, putting you down, insulting you, or breaking your things. Control is a huge part of emotional abuse and involves chronic anger, jealousy, accusations, and distrust. This type of abuse is the hardest to spot because the injuries aren't physical or immediately visible. Emotional abuse can be mistaken for passionate or intense love. Financial exploitation involves unauthorized use of an elderly person's funds or property, either by a caregiver or an outside scam artist. Healthcare fraud and abuse carried out by unethical doctors, nurses, hospital personnel, and other professional care providers, examples of healthcare fraud and abuse regarding elders include not providing healthcare, but charging for it; overcharging or double-billing for medical care or services; getting kickbacks for referrals to other providers or for prescribing certain drugs, overmedicating or under medicating, recommending fraudulent remedies for illnesses or other medical conditions, Medicaid fraud.

If you suspect abuse then notify your instructor or the nurse in charge immediately.

#### **Ethics**

Hospitals have a Bioethics Committee which is consulted when there maybe conflicts in the management of a patient's care. Anyone involved in the patient care may make a consult.

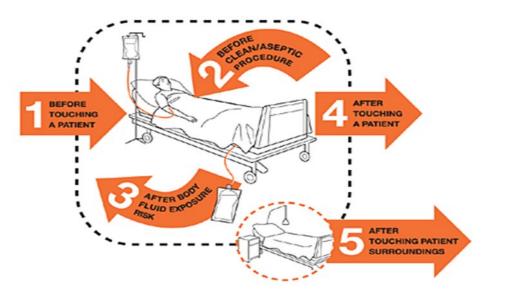


# Welcome to AtlantiCare Regional Medical Center

**Infection Prevention** 

Save Lives: Clean Your Hands

**WHO Campaign** 



# Hand hygiene

Using Hand hygiene is the single most effective way to stop the spread of infection.

# **Techniques**

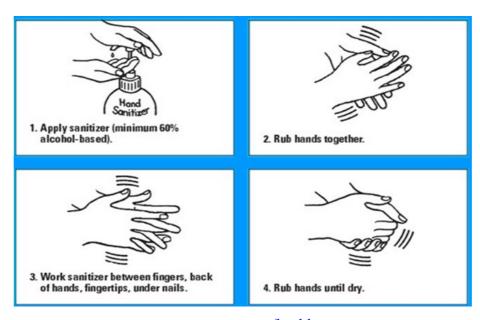
# Hand Sanitizer

Apply to palm of one hand, rub hands together covering all surfaces until dry
Use up to 8 times then must wash hands with soap and water
Wash with soap and water instead if hands are soiled or are in contact with blood or body fluids
\*Do not use hand sanitizer with C-Diff positive patients\*



# Welcome to AtlantiCare Regional Medical Center

# **Hand Sanitizer**



www.toronto.ca/health

# **Soap and Water**

- -Wet hands with water, apply soap, rub hands together for at least 15 seconds -Rinse and dry with disposable towel -Use towel to turn off faucet

# Hand Washing with Soap & Water



jousuejamimes.wordpress.com



# Welcome to AtlantiCare Regional Medical Center

# When should you use hand hygiene?

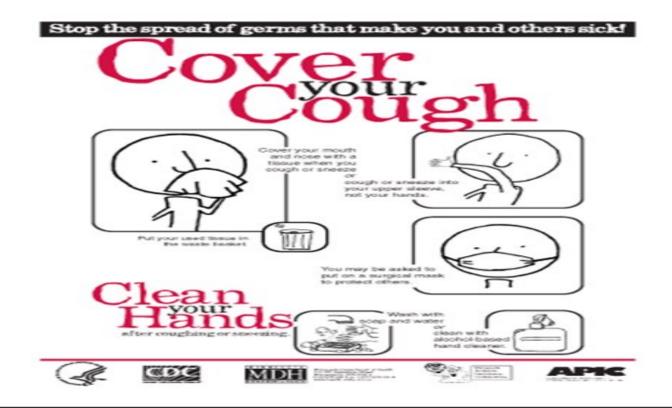
### **BEFORE AND AFTER PATIENT CONTACT**

- When they look dirty
- Before preparing or eating food
- After blowing your nose, coughing or sneezing After using the toilet
- After handling garbage
- After touching an animal or animal waste
- After touching any surface or object that is frequently touched by other people

# **Respiratory Hygiene/Cough Etiquette**

To prevent the transmission of all respiratory infections in healthcare settings, including influenza, the following infection control measures should be implemented at the first point of contact with a potentially infected person.

The following measures to contain respiratory secretions are recommended for all individuals with signs and symptoms of a respiratory infection.





### **Definitions - Infectious Disease Management**

<u>Blood borne Pathogens</u> (BBP) - means pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV), hepatitis C hepatitis (HCV) and human immunodeficiency virus (HIV).

<u>Standard Precautions</u> – are those tasks and/or equipment e.g. hand washing, gloves, masks, gowns, etc. that reduce the risk of transmission of BBPs and the risk of transmission of pathogens from moist body substances. Standard Precautions apply to 1) blood 2) all body fluids, secretions, and excretions except sweat, regardless of whether or not they contain visible blood; 3) non-intact skin; and 4) mucous membranes.

**Transmission Based Precautions** - are precautions that are taken when there is a known or suspected infection. Do not enter the room unless you are authorized to do so. When entering the patient room follow the instructions on the signs for personal protective equipment. The different types of precautions are: contact, droplet, airborne, protective.

# **Standard Safety**

Be vigilant to identify patients who are:

- High risk to fall
- Seizure precautions
- End of life care
- Do Not Resuscitate (DNR)
- Allow Natural Death (AND)
- Perinatal Loss

### **Pain Management**

Patients have a right to have their pain managed effectively. Follow CINO pain management protocol, which includes promptness in addressing and assessing patient's pain. Documentation of actions taken to relieve patient's pain with a follow-up assessment is mandatory. In addition, the risks of dependency, addiction, and abuse of opioids need to be discussed with the patient.



# **General Safety**

### **Electrical Safety**

- The grounding or 3rd prong plug must be present on all electrical equipment
- If this plug is broken, a pathway for hazardous current is present, which could cause an injury
- Broken equipment should be taken out of service immediately
- All non-patient care electrical equipment in the hospital must have an electrical safety inspection performed on it by plant operations

# Right to Know

Under N.J. state law you have a right to know any chemical or biologic agent that you work with or may be exposed to, the hazardous effects of these substances, the precautions when handling them and the procedures to follow if you are exposed.

- MSDS (Materials Data Safety Sheets) are available where hazardous substances are stored
- These sheets outline characteristics of chemicals in the workplace.
- Spill response: Contact security on if a hazardous chemical is spilled in your area.

# **Radiation Safety**

X-rays may be performed within the Radiology Department or at bedside. In these areas exposure to radiation is possible. To protect yourself from exposure:

- Minimize your time near radiation sources
- Maximize your distance from radiation sources
- Use shielding devices when applicable
- Persons under the age of 18 should not be asked to assist with the patient during an Xray

### **MRI Safety**

Magnetic resonance imaging (MRI) is an imaging procedure utilized to view structures and functions within the body. Do not enter an MRI area without checking with the MRI Technologist. Always observe signs posted on all MRI entry doors. Follow safety precautions when in the area of the MRI. **The MRI machine (magnet) is always on!** 

### **Injury Prevention**

Protect yourself from injury by avoiding sustained postures, prolonged sitting, forward head posture, repetitive motions and handling excessive loads. Utilize good body mechanics when lifting. Do not lift over 40 lbs. without assistance.



### **Workplace Violence**

We are committed to safety through Reducing Disruptive Behaviors.

- Disruptive behavior is defined as "any inappropriate behavior, confrontation, or conflict ranging from verbal abuse to physical and sexual harassment."
- Disruptive behaviors may occur between physicians, nurses, surgical technologists, ancillary staff members, managers, patients, family members, and visitors.
- Intimidating and disruptive behaviors include overt actions, such as verbal outbursts and physical threats, as well as passive activities such as refusing to perform assigned tasks or quietly exhibiting uncooperative attitudes during routine activities.
- Intimidating and disruptive behaviors can foster medical errors, contribute to poor patient satisfaction and cause preventable adverse outcomes.
- These behaviors may also increase the cost of care, and cause qualified clinicians, administrators and managers to seek new positions in more professional environments.

Our healthcare organizations have each implemented a process for managing disruptive and inappropriate behaviors (organization-specific policies regarding employee coaching, counseling & discipline and medical staff professional conduct).

### **Harassment Free Workplace**

We prohibit harassment based on any of the following:

- Race
- Creed
- Color
- National origin
- Age
- Ancestry
- Gender
- Citizenship status
- Sexual orientation
- Handicap or disability

We also prohibit sexual harassment which includes behavior such as unwelcome sexual advances, request for sexual favors and other lewd conduct such as lewd talk, inappropriate jokes or suggestive comments.

If you witness harassment taking place, speak immediately with your supervisor, instructor or any member of the organization's management team.

# **Safety is Our First Concern**

You are required to immediately report to your instructor or manager any information that reasonably indicates another health care professional has demonstrated:

- Impairment defined as the condition of being unable to perform as a consequence of physical or mental unfitness.
- Gross incompetence, or
- Unprofessional conduct

### See relevant policies on:

- Signs of Impairment
- Drug and Alcohol Free Workplace



# ARMC has zero-tolerance with regard to violence in the workplace.

### **Patient Safety and Quality reporting**

We report patient safety issues without fear of retaliation. We recognize that all staff, volunteers, and students are caregivers.

Patients can report safety and quality issues to caregivers, supervisor/charge nurse, department manager, patient representative, or administrative director.

Students express concerns to faculty first. We strive to resolve issues internally. Hotlines such as Corporate Compliance, the Joint commission, and OSHA are readily available.

# **Latex Allergy**

Latex allergy is a reaction to latex rubber. Symptoms include dry, itchy, irritated areas on skin, runny nose, sneezing, itchy eyes, wheezing, coughing, difficulty breathing. Health care workers are at risk due to latex exposure. Non-latex gloves and equipment are available.

# **Corporate Compliance**

ARMC has a corporate compliance program that describes how business is done. The community is served ethically, legally, and responsibly.

### **Code of Ethics**

We are committed to acting in good faith in all aspects of our work. We will avoid conflicts of interest or the appearance of a conflict. Examples would be accepting gifts or showing favoritism.

# **Performance Improvement**

Performance Improvement (PI) Programs define the planned, systematic, hospital-wide approach to process design and performance measurement, assessment and improvement. Hospitals engage in Performance Improvement activities in order to sustain an integrated and coordinated approach in accomplishing the efficient use of resources, improving patient safety through the creation of a safer health care environment, improving customer satisfaction through service excellence and sustaining regulatory compliance. The underlying concept is we should never be satisfied with present processes or outcomes but continually seek ways to improve.



### **ARMC** is dedicated to:

- Continuously improving all services, & utilizing systematic processes that have a consumer focus
- Building organizational teamwork
- Stressing consistent high quality and safety in the delivery of services

# A well designed PI program results in:

- Improved patient health and patient safety
- Collaborative work force
- Hospital that is better able to serve its community

The Model used PERFORMANCE IMPROVEMENT is: **PDCA**  $\underline{\mathbf{P}}$ : Plan  $\underline{\mathbf{D}}$ : Do  $\underline{\mathbf{C}}$ : Check  $\underline{\mathbf{A}}$ : Act

- Team work supports patient safety by:

   Encouraging collaborative decision-making and open communication between staff members
   Involving patients and their families in their care

Together Everyone Achieves More





# Acknowledgement of ARMC Orientation Self Learning Module

- I have read the ARMC Self Learning Module.
- I understand that additional resources such as; guidelines, policies are available upon request.
- I will ask my instructor to help find answers to questions

I will follow my school policy on closings for inclement weather and any other emergencies. If my school is closed, I will not report for clinical rotation. ARMC may, without prior notice, cancel any student experience to meet internal needs. We will give as much notice as possible.

Please sign and date the lines below as acknowledgement that you have received, reviewed, understand, and agree to abide by the information listed in this Orientation Self Learning Module.

Return this signed acknowledgement to your designated school contact. The Agency/School/Institution is required to maintain a signed copy of this acknowledgement form on record.

Faculty Signature:	 
Agency/School/Institution:	
Date:	



# Welcome to AtlantiCare Regional Medical Center

TO:	All AtlantiCare Health System Employees, Adjunct Staff, Faculty & Students
FROM	Corporate Counsel
DATE:	
	COMPLIANCE ATTESTATION CORPORATE COMPLIANCE and HIPAA
by execution the standards tected health information standards continue to	ffirm that I am aware of the AtlantiCare Health System's ("AHS") Code of Business Ethics, Corporate Compliance (Code), and HIPAA regulations and that, and this Attestation, I hereby acknowledge my obligation and agreement to fulfill those duties and responsibilities as set forth in the Code and to be bound by reds and procedures herein. I certify that I have reviewed the HIPAA / Management of Information policies and understand the policies with respect to prolith information and my responsibility for compliance to federal and state regulations in maintaining the privacy and security of individually identifiable ormation. I further certify that, to the best of my knowledge and belief and subject only to the exceptions, if any, listed below, I have complied with the and procedures of the Code and am not aware of any violations thereof. I further certify that throughout the remainder of my association with AHS, I shall o comply and I understand that violations may lead to disciplinary action, including termination. I understand that my responsibility to maintain the conficor protected health information survives the termination of my employment / affiliation with AtlantiCare.
Name (pri	nt) Date
Academic	Institution Signature
The follow	ving matters, if any, are the sole exceptions to the above Attestation:
	Company Company Atlanti Company Hookh Contany

Corporate Counsel AtlantiCare Health System
2500 English Creek Avenue, Building 500 Egg Harbor Township, N.J. 08234
Corporate and Privacy Compliance Phone Line: 407-7788



# Welcome to AtlantiCare Regional Medical Center

### ATTESTATION FORM

Clinical Orientation Information for Adjunct Staff, Faculty and Students

### <u>OBJECTIVES</u> - At the completion of this packet the learner will be able to:

- Discuss the Organization's Mission and Vision and how their individual role contributes to the organization accomplishing its mission and vision.
- Discuss Patient Rights and Ethical issues including, but not limited to, informed consent, Advance Directives, POLST, Palliative Care, End of Life Care and Organ Donation.
- Be aware of the National Patient Safety Goals.
- Discuss the Emergency Medical Treatment and Active Labor Act (EMTALA) patient transfer
- Discuss their role in Safety: Prevention, Personal Safety, Reporting of Injuries / Illnesses, and Incident Reporting.
- Discuss the facility's policy and their role in the General Safety and Hazardous Waste disposal.
- Discuss the facility's policy and their role in the Emergency Preparedness Life Safety and Other Emergencies.
- Discuss the elements of Communication and benefits of Situational Awareness (SBAR) in the clinical setting.
- Discuss their responsibility in Reporting: Child Abuse, Dependent Adult and Elder Abuse, Sexual Assault, Domestic Violence, Workplace Violence, the Impaired Worker.
- Discuss the confidentiality of patient information (HIPAA), Use and Misuse of Electronic Information, Unusual Occurrence Reporting (UOR), Social Media and Significance of Sentinel Events.
- Discuss the importance of Infection Control practices in order to prevent nosocomial infections such as hand washing.
- Pre-Experience Requirements Completed Background check, immunization record and complete physical

I have been given a copy of the AtlantiCare Clinical Orientation Information for Adjunct Staff, Faculty and Students. I have read the material and understand my rights, roles and responsibilities.

Name (print)	Signature
Academic Institution	Date