

Many hands, one Mission



Orientation Information for Workforce Members

Providence Southwest Washington Region

Providence Centralia Hospital

Providence Medical Group

Providence St. Peter Hospital



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Welcome

Welcome to Providence. As an employee, volunteer, student, intern, independent contractor, consultant or agency worker, you play an important role in helping to provide quality service and professional expertise to those who choose us for their health care.

As an organization, we are committed to providing you with a safe, fair, enriching and interesting work environment. With this commitment in mind, we would like to provide you with the following information you will need to work effectively, efficiently and safely.

Purpose

The purpose of this packet is to provide orientation information needed to successfully and safely enter the workforce at Providence. Workforce members include employees, volunteers, students, interns, independent contractors, consultants, and temporary agency associates of Providence-owned facilities.

This packet is not intended to cover everything needed to know about a specific role, but rather an awareness and understanding of topics that are important to all.

It is our expectation that you will read this packet thoroughly and ask questions if any section is unclear. Workforce members will be expected to abide by the practices outlined in this packet.

The Providence Commitment

Mission

As People of Providence,
we reveal God's love for all,
especially the poor and vulnerable,
through our compassionate service.

Core Values

Respect

All people have been created in the image of God. Genesis 1:27

We welcome the uniqueness and honor the dignity of every person
We communicate openly and we act with integrity
We develop the talents and abilities of one another

Compassion

Jesus taught and healed with compassion for all. Matthew 4:24

We reach out to people in need and give comfort as Jesus did
We nurture the spiritual, physical and emotional well-being of one another and those we serve
We embrace those who are suffering

Justice

*This is what the Lord requires of you: act with justice, love with kindness
and walk humbly with your God. Micah 6:8*

We believe everyone has a right to the basic goods of the earth
We strive to remove the causes of oppression
We join with others to work for the common good and to advocate for social justice

Excellence

Much will be expected of those who are entrusted with much. Luke 12:48

We set the highest standards for ourselves and for our ministry
We strive to transform conditions for a better tomorrow while serving the needs of today
We celebrate and encourage the contributions of one another

Stewardship

The earth is the Lord's and all that is in it. Psalm 24:1

We believe that everything entrusted to us is for the common good
We strive to care wisely for our people, our resources and our earth
We seek simplicity in our lives and in our work

VALUE-BASED CUSTOMER SERVICE STANDARDS AND BEHAVIORS

*Our values serve to guide us in all that we do,
including our commitment to the provision of exceptional customer service.*

RESPECT: AFFIRMING THE GOD-GIVEN DIGNITY AND WORTH OF EACH PERSON.

I am attentive to the individuals' right to privacy.

- I always knock before entering a patient room.
- I ask my patient if they would like the door or curtain shut for their privacy.
- I maintain strict confidentiality with patients, visitors, co-worker, and physician information.
- I protect confidential, personal patient information from loss or theft.
- I coach co-workers in private, commend them in public.

I listen to the needs of others and respond patiently and respectfully.

- I *acknowledge* the customer with a greeting, attentive posture, and eye contact.
- I *introduce* myself to the customer by giving my name and where I work.
- I inform the customer about the *duration* of the activity in which I will be engaged.
- I *explain* to the customer what I will do and what they can expect, in clear language that avoids technical jargon and acronyms.
- I always *thank* the customer at the end of every interaction.

I follow through on my commitments.

- I arrive to work on time and return from break on time.
- I agree to comply with hospital standards and policies.
- I ask for help when I need it.
- I am accountable for meeting deadlines.

COMPASSION: CARING FOR EACH PERSON AS PART OF OUR FAMILY.

I offer assistance to those who appear in need.

- I approach people who appear lost, and when possible, I offer to escort them to their destination.
- I utilize good telephone etiquette, including "Good Morning/Afternoon", my name and department name.
- I welcome customers in a warm, friendly manner, including an offer of assistance.
- I find ways to allow my patients to actively participate in decision-making about their care.

I respond to concerns and complaints.

- I acknowledge concerns without blaming or making excuses.
- I apologize for unmet needs or frustrating experiences.
- I take corrective action and follow up with the customer.

I do all in my power to alleviate suffering.

- I address physical pain by working with physicians to provide pain control.
- I address spiritual and emotional pain by listening, comforting, and offering to find specialized assistance.

JUSTICE: WORKING FOR A FAIR AND EQUITABLE SOCIETY.

I resolve conflicts in a respectful way.

- I address difficult, interpersonal issues directly and privately, without assigning blame.

- I listen to the other person's perspective in an objective fashion.

I honor diversity in the workplace.

- I show respect to all without regard to race, religion, culture or orientation.
- I value all team members and their opinions

I appropriately advocate for the rights and needs of others.

- I protect the safety of the vulnerable.
- I respectfully share fairness concerns with my supervisor.

EXCELLENCE: CONTINUALLY IMPROVING ALL THAT WE DO.

I seek opportunities for growth and learning, and share what I gather with others.

- I continue to grow in skill and competence, and encourage others to do the same.
- I share information that people need to do their jobs in a constructive manner.
- I actively participate in committees, projects, and teams.

I am fully engaged in work activities when I am on the job.

- I balance my personal agenda with team and organizational goals.
- I value the contributions and opinions of all team members.
- I offer to assist co-workers whenever I am able.

I recognize excellence in others.

- I acknowledge co-workers when they do an excellent job.
- I thank others who are helpful to me.

- I share positive experiences with others on the team.

I present a professional image when I represent Providence.

- I keep my appearance neat, clean, and consistent with hospital policy.
- I keep my employee badge visible and appropriately placed.
- I use appropriate language and tone when at work.

STEWARDSHIP: WISELY CARING FOR AND SHARING HUMAN, ENVIRONMENTAL, AND FINANCIAL RESOURCES HELD IN TRUST.

I do my part to maintain a neat and orderly environment.

- I return equipment to the proper place.
- I pick up litter and throw it away.

I manage my time effectively.

- I limit personal phone calls to only those that are necessary.
- I only utilize the internet in accordance with Providence policy.

I correct or report any safety hazard I observe.

- I wash my hands before and after leaving any patient treatment area.
- I ensure all spills are cleaned up properly.
- I promptly report any job related injury.

I wisely utilize hospital resources to minimize waste.

- I recycle whenever it is practical.
- I utilize equipment per specifications.

Mission

Providence Heritage

Providence Health & Services is part of an exceptional heritage—a rich and varied journey that began in the 1800's in Montreal. From the beginning, religious sisters addressed the needs of the day, often while enduring great pain and personal sacrifice. Through it all, they continued their mission through their unflinching trust in a loving Provident God, and through active collaboration with others and wise decision making.

Emilie Tavernier Gamelin (Blessed Emilie Gamelin)

The foundress of the Sisters of Providence, Emilie Tavernier Gamelin, was born in Montreal in 1800. During her life she experienced profound loss and sorrow. Her mother died when she was four years old. At age 14, her father died. When Emilie was 23, she married Jean-Baptiste Gamelin. They had three boys. The first two died within months of their birth. Soon after, Emilie's husband died. A year later, their third child died.

Emilie did not give in to a depression of hopelessness but rather reached out to others in pain. She visited elderly women and the poor, and with a group of women, the Ladies of Charity, committed herself to meeting the needs of the city's poor. In 1830, they opened a house to offer soup and clothing to the poor and bring a compassionate presence to those in need. This ministry expanded and eventually a religious community was formed to help assure the continuation of this good work. Soon afterwards, Emilie joined the community and was chosen Superior of the sisters. Eventually, this community became known as the Sisters of Providence.

Esther Pariseau (Mother Joseph of the Sacred Heart)

The foundress of the Sisters of Providence, Pacific Northwest ministry, Esther Pariseau was born in 1823 in Montreal. When Esther was 20 years old she felt a call to a life of service with the religious community developing in Montreal. Her father took her and presented her to Mother Emilie Gamelin and in 1845, Esther pronounced her vows and became Sister Joseph. During the next six years, Mother Gamelin and Sister Joseph ministered together, until Mother Gamelin died of cholera in 1851.

In 1856, Sister Joseph and four other sisters responded to a request from Bishop A.M.A. Blanchet, the Bishop of the Diocese of Nisqually in the Washington Territory, to come to the west to care for the poor and educate the indigenous and the pioneer populations. Sister Joseph was chosen as the leader of the group and given the title, Mother Joseph of the Sacred Heart.

Mother Joseph and the sisters found their new world filled with religious and cultural diversity. There were no hospitals, and few schools. To complicate matters, the sisters had limited financial resources. However, their faith and determination fueled their actions and they soon responded to the needs of orphans and the youth. Four months after their arrival, in April 1857, they opened a day and boarding school, and orphanage. A year later, in Vancouver, they opened, St. Joseph's Hospital, the first permanent hospital in the Pacific Northwest.

The following years brought many requests for the expansion of their ministry. By the time of Mother Joseph's death, in 1902, the ministry included 17 hospitals and 13 schools, present in many cities and on Indian Reservations. Following Mother Joseph's death, the sisters continued to respond to needs, expanding their ministries and serving, with compassionate care, thousands of people.

Advance Directives

What are Advance Directives?

Advance Directives are documents that allow you to give direction about the kind of medical care you receive at the end of your life. There are two types:

Health Care Directive (Living Will)

This is a written instruction that explains what you want and/or do not want concerning your medical care. This directive becomes effective if you have a terminal condition or are in a permanent unconscious condition and are unable to communicate.

Durable Power of Attorney for Health Care

This is written instruction that lets you name a person who will make medical decisions for you if you become unable to do so. This document also tells what type of medical decisions you desire.

Why have an Advance Directive?

- You want your physician or caregiver to know the type and amount of medical care you want or do not want when you are unable to speak for yourself
- You want to protect your right to make decisions concerning you medical care
- You do not want to burden your family by having them make medical decisions during a time of stress

Advance Care Planning

Patients have the right to make decisions about their care. They keep this right even when they are no longer able to communicate their decisions.

Advance Care Planning is an ongoing process of communication integrated into the routine of patient-centered care and is appropriately staged to the individual's state of health. Documents for advance care planning include:

- Advance Directives
 - Health Care Directive (Living Will)
 - Durable Power of Attorney for Health Care
- POLST (Physician Orders for Life Sustaining Treatment)
 - The POLST is a form that translates the Advance Directives into a physician order. If you have a serious health condition, you need to make decisions about life-sustaining treatment. Your physician can use a POLST form to represent you wishes as clear and specific medical orders.

Human Resources

Key Policies

Personal Appearance

Workforce members are expected at all times to present a professional, businesslike image, and acceptable personal appearance is an ongoing requirement.

- Personal cleanliness, good grooming and appropriate dress is expected
- Attire will be clean, neat and moderate in style
- Dress considered inappropriate would include: denim, stretch pants/leggings, tight fitting clothes, tank tops, sweat shirt/pants, sheer clothing
- Heavy perfume, cologne or after shave is unacceptable
- Odor of tobacco or nicotine products is unacceptable

Certain workforce members may be required to meet special dress, grooming and hygiene standard depending on the nature of their job and department.

Selling and Soliciting

Solicitation by workforce members for funds, membership or individual enlistment in outside organizations or causes is prohibited at all times on premises.

Workforce members may not engage in unauthorized solicitation, sales, or distribution of literature or any materials anywhere on the premises.

Workforce members may wear buttons or pins to express their personal views on political questions, union affiliation, or social issues. Buttons that are obtrusive or that violate any Core Values will not be permitted.

Tobacco-free Campus



Use of any tobacco products including, but not limited to, cigarettes, electronic (“E”) cigarettes, cigars, pipes, and smokeless tobacco will be prohibited in facilities or on property. Employees may not wear a facility name badge or other Providence identifying attire while using tobacco products immediately outside campus perimeter.

Anti-Harassment and Discrimination

Workforce members have the right to work in an environment free from all forms of harassment and discrimination including racial or ethnic insults and sexual harassment. If you believe that you have been the subject of harassment, inform your supervisor or Human Resources immediately and your complaint will be investigated.

Diversity

Providence is a community where all people, regardless of differences are welcome, secure and valued. We value respect, appreciation, collaboration, diversity and shared commitment to serving our communities. As such, we will recruit a diverse, high-performing workforce and maintain a workplace free of discrimination based on race, color, gender, disability, genetic information, veteran status or military status, religion, age, creed, national origin, gender identity or expression, sexual orientation or marital status. We expect that all workforce members will act in ways which reflect a commitment to and accountability for, racial and social justice and equality in the workplace. We also expect that workforce members will maintain a workplace free from any conduct which creates an intimidating, hostile or offensive work environment.

In the event that a workforce member has reason to believe that this policy has been violated, this should be reported to their manager or Human Resources. All claims will be investigated as appropriate.

Retaliation against a reporting party is prohibited.

Workforce members also help to ensure that all patients and individuals seeking to visit patients are treated equally, consistent with the preferences of the patient and do not use the race, color, national origin, religion, sex, gender identity, sexual orientation or disability of either the patient or the patient's visitor as a basis for limiting, restricting or otherwise denying visitation privileges.

Interpretive Services

Interpretive Services are required to be offered to patients at no cost to the patient throughout their stay

- The patient has the right to refuse the offer
- The patient can use their friend, family member or themselves in place of a hospital interpreter. The person interpreting must be over 18 years old
- **Tools:**
 - Telecommunications Device for the Deaf (TDD) – useful for “over the phone” conversations
 - Speaker phones – for telephone interpretation
 - Contracted in-person interpreter
 - MARTTI (Video Relay Interpretation) – Audio and American Sign Language provided via video remote interpreting

Integrity and Compliance – Code of Conduct

HIPAA and Protected Health Information (PHI)

- Protect patient confidentiality at all times, and be alert to possible risks to patient privacy
- Avoid discussions using patient names or identifiable information in public areas or social networking sites
- Only discuss patient information with team members who need information to do their job
- Do not leave patient information visible on computer screens. Lock your screen or log off your workstation when away
- Do not leave patient information unattended or lying around
- Use shredding bins for waste that contains patient information
- Use the minimum information necessary for payment and operations purposes
- Do not leave phone messages with patient information on answering machines or with another person without patient permission
- Follow secure email and fax policies for transmitting PHI. Send only to those with a need to know
- Promptly report theft/loss/privacy violations to your Privacy Officer

Security of Confidential Information

- Confidential information includes - information about patients, employees, students, residents or business operations that is not available to the public
- Security risks increase when confidential information is removed from the work location. Do not remove without manager approval. Return information upon end of relationship with Providence.
- **Tips**
 - Keep your computer, voicemail and other passwords private and secure. **DO NOT SHARE!**
 - Never download confidential information onto a home or non-Providence PC or portable device or use personal devices to send confidential information
 - Your PC should be locked (Ctrl Alt Delete), when unattended
 - Store portable devices and other electronic media in a secure location
 - Confidential information should be stored in a secure folder on the network
 - Use secure email when sending confidential information, i.e. use “ProvSecure”

Acceptable Use of Information and Information Systems

- Internet usage, communications and transactions are not private. All computer activity is recorded and can be traced to a specific user ID
- Information and technology is for business use and must not be used for purposes which may interfere or are in conflict with the Providence mission and/or policies. Limited personal use may be permitted with the following restrictions:
 - Usage must be reasonable, lawful and ethical and cannot be offensive or disrespectful to coworkers or other in the work or patient care environment.
 - Must not interfere or be in conflict with Providence responsibilities or productivity

Social Media Use

- As a workforce member, you cannot share patient, confidential or proprietary information, photographs or videos about Providence on personal sites. Providence policies (e.g. harassment, discrimination, privacy and confidentiality) are applicable when using any form of social media.

Integrity Reporting and Violations

- Providence expects you to promptly report integrity, compliance or legal concerns. All calls are strictly confidential and anonymous.
- Examples of what to report:
 - Theft or fraud
 - Violation of privacy of employee/patient records
 - Inappropriate gifts and entertainment
 - Code of Conduct and policy violations
 - Billing and coding concerns
 - Retaliation
- Who to contact:
 - Discuss the issue or concern with your immediate supervisor
 - Discuss the issue or concern with the department manager
 - Contact the facility or regional compliance manager
 - Call the Providence Integrity Line at 888-294-8455 or report online 24/7

Federal and State Health Programs

- Providence is committed to full compliance with laws and regulations relating to:
 - Fraud and abuse and false claims
 - Patient referrals
 - Providing medically necessary services
 - Medicare's Conditions of Participation
 - Submission of cost reports and other requirements
- Claims for payment are expected to be accurate and represent the services actually provided

Records Accuracy and Retention

- We prepare and maintain accurate and complete documents and records. Altering or destroying records is prohibited
- Records include: financial records, claims made for payment, patient records, employee timesheets and expense-related forms

Gifts and Entertainment

- Providence workforce members are expected to avoid accepting gifts or other items of value
- Gifts include – meals, special favors or loans, tips, tickets to events, discounts or free services, paid travel for spouses
- You may accept office items with a vendor's logo or an occasional consumable gift if shared among employees with your department
- Cash (including gift cards), may never be accepted

Security Department

Identification Badges

- Must be worn at all times while on premises
- Are worn above the waist with the front facing outward
- Must not be obscured with stickers, pins, clothing or other items which obstruct visualization of the badge

If badge is lost

- Immediately report it to Security so the badge can be disabled
- Contact Security for a new badge

Parking

- Parking areas are designated visitor, patient, physician, volunteer, vendor and student. Park in the appropriate area
- Vehicles must be registered and parking stickers placed on vehicles at PSPH
- Keep vehicles locked, keep valuables out of site, park in the garage or well-lit areas



Weapons



Weapons are not allowed in Providence facilities. This includes large knives over 3-1/2 inches long and handguns. Security provides a weapons safe if needed.

Workplace Violence

Workplace violence is a serious issue. The safety of workforce members, patients and all of those we serve is our first and foremost responsibility.

- Take threats seriously and report them to Security immediately
- Be aware of your environment and any possible dangers
- Stay alert and observe what goes on around you

To help keep the workforce safe:

- Recognize the signs
 - Stop and approach strangers (assist them with directions or walk them out of the area)
 - Look for people or things that are out of place (weapons, unknown boxes, suspicious people)
 - Listen for unusual sounds (breaking glass, slamming doors, yelling, profanity)
- Respond appropriately
- Report observations immediately



Facility Safety

Emergency Contact Numbers

PSPH 111 Hospital Emergency
PCH 611 Hospital Emergency
PMG 911

Emergency Response Code – Badge Cards

Badge Card Side 1

EMERGENCY – DIAL 611 (PCH) or 111 (PSPH)

- **Amber Alert = Infant / Child Abduction**
- **Code Black = Missing Adult Patient**
- **Code Blue = Heart or Respiration Stoppage**
- Code Gray = Combative Person
- **Code Orange = Hazardous Material Spill**
- **Code Red = Fire**
- Code Silver = Weapon / Hostage
- **Code Triage = Internal / External Disaster**
- **Code Triage Internal / External – Yellow = Bomb Threat**

Badge Card Side 2

EMERGENCY – DIAL 111 (PSPH) or 611 (PCH)

- **Rapid Response Team = Patient in Crisis, immediate response**
- **Rose Team = Obstetrical Emergency**
- **Fall Team = Patient / Visitor Fall (PSPH only)**
- **Stroke Team = Patient / Visitor Stroke (PSPH only)**
- **Transport Team = Need Immediate Transport (PSPH only)**
- **Admin Supervisor (PSPH) = 4937328 or pager 971-4797**
- **Admin Supervisor (PCH) = 3308561 or pager 330-3027**

Code Red

Response to Fire

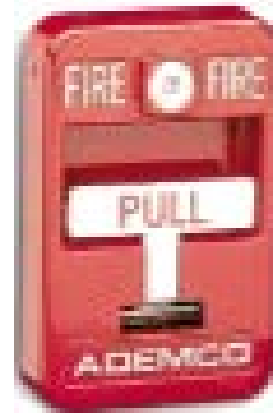
RACE

Rescue, and Remove if safe
Alarm, or Alert
Contain, or Close
Extinguish, or Evacuate

Assume it is real

Use stairs

Wait for "ALL CLEAR"



It is your responsibility to know the locations of:

- Fire alarm pull stations
- Fire Extinguishers
- Fire Exits

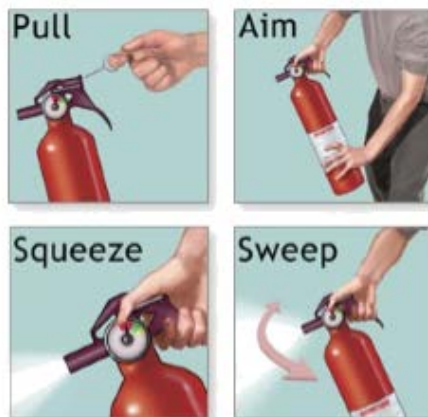
Fire Protection Basics

- No material can be stored within 18" of the sprinklers or ceilings
- Maintain clear access to exits
- Do not block fire extinguishers or electrical panels, medical gas shut-off valves, or fire/smoke doors
- Evacuate only as directed

How to Use a Fire Extinguisher

PASS

1. Pull
2. Aim
3. Squeeze
4. Sweep



Amber Alert

Infant/Child Abduction

- Everyone looks for anyone carrying an infant/child or acting strangely

Code Silver

Person with a Weapon or Hostage

- Do not run to the area where the incident is happening; you may put yourself or others at risk for injury.
- Do not attempt to intervene or negotiate
- Seek cover/protection and warn others of the situation
- Position yourself out of sight and behind heavy items for protection
- If a door cannot be locked, barricade your door with furniture or cabinets
- Keep talking to a minimum

Code Triage

Response to Disasters

Follow Comprehensive Emergency Management Plan as directed by leadership

- Internal Disasters: Fire, bomb threat, power failure, water or communications are down
- External Disasters: Mass Casualty Incidents, earthquake, flood, bio-terrorism, weather, industrial hazmat
- Bomb Threat
 - Report telephone threats immediately
 - Never touch a suspicious object, secure area, move people away, wait for "ALL CLEAR"



Code Orange

Hazardous Material Spill

- May result in exposure limits for individuals coming in contact or may harm the environment
- Consult Safety Data Sheet (SDS) and container labels before attempting to clean up minor spills. Wear appropriate Personal Protective Equipment (PPE)
- Only trained personnel should clean up anything other than an incidental/minor spill



Accident Prevention Signs

Broken equipment = Unsafe equipment

- Inspect all equipment prior to use
- ALWAYS put a defective sticker or sign on equipment that is not working properly and pull out of service immediately
- Ensure that a work request is entered into the system for maintenance and repair

Warning Signs

Danger – indicates immediate danger and that special precautions are necessary.

Warning – hazardous situation if not avoided could result in death or serious injury.

Caution – indicates possible hazard, proper precautions should be taken.



If a sign states “Danger” or “Warning,” do not enter area unless you are trained on the hazard inside and wearing the proper PPE.

Right to Know

- Know the hazards of all materials before you use them. Products such as cleaning agents, detergents, dusts, inks and janitorial supplies are examples of potentially hazardous chemicals that may be present in the workplace.
- Check SDS for recommended or required PPE on chemicals you may use. (Located on MAXCOM via the Providence intranet)



Workplace injuries and illnesses are preventable by working safe
Use the proper PPE for your job tasks!

Infection Prevention

Bloodborne Pathogens in the Healthcare Setting

Significant Bloodborne Pathogens

- Hepatitis B Virus (HBV) and Hepatitis C Virus (HCV)
 - Hepatitis is the name of a family of viral infections that affect the liver
 - Symptoms include: Flu-like symptoms, fatigue, abdominal pain, loss of appetite, nausea and vomiting, joint pain, jaundice, dark urine
- Human Immunodeficiency Virus (HIV)
 - HIV attacks the immune system damaging the body's ability to fight disease and can lead to AIDS
 - Symptoms include: enlarged lymph nodes, sore throat, fever, rash

Transmission of Bloodborne Pathogens

Can occur via:

- A needle stick or sharps injury
- A break in the skin (cuts, rash, dermatitis)
- Contact with mucus membranes (eyes, nose, mouth)
- Sexual contact
- Sharing needles/syringes
- Mother to baby

Other Potentially Infectious Materials (OPIM):

Saliva, semen, vaginal secretions, body fluids, any body substances visibly contaminated with blood, tissues such as biopsy samples and organs.

BLOODBORNE PATHOGENS Require Caution

- Use proper PPE to prevent direct contact with blood or other body fluids.
- Make sure PPE is in good condition before using.
- Dispose of PPE in proper containers.



Exposure to Blood or OPIM

If you have an exposure to blood or OPIM, immediately do the following:

1. Thoroughly clean the affected area
2. Wash needle sticks, cuts, and skin with soap and water thoroughly
3. Flush splashes to the nose and mouth with water
4. Irrigate eyes with clean water or saline
5. Report the exposure to your supervisor and the nearest SWR Employee Health immediately.
After hours report to Administrative Supervisor/Charge RN and report to the nearest Providence Emergency Room
6. Complete an Employee Injury Report

Reduce Your Risk of Blood and Body Fluid Exposures

Standard Precautions – the foundation for preventing disease transmission in healthcare settings.

Using Standard Precautions means you treat all blood and body fluids as if they are infectious. The two key elements are:

1. Good hand hygiene
2. Appropriate PPE



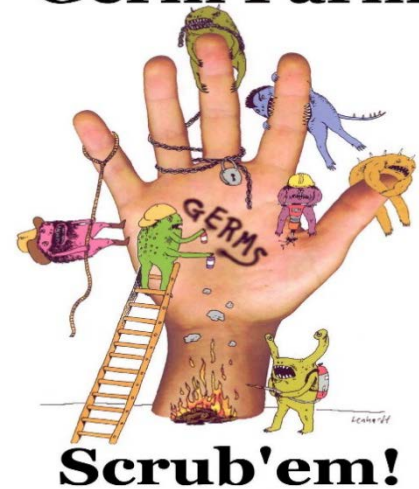
The most important thing that workforce members can do to keep from getting sick and spreading illness to others is to **clean our hands!**

For those working with patients, clean your hands on every entrance and exit from a patient room, before and after all direct patient contact, contact with patient care equipment, and before eating and after using a restroom.

Hand Hygiene

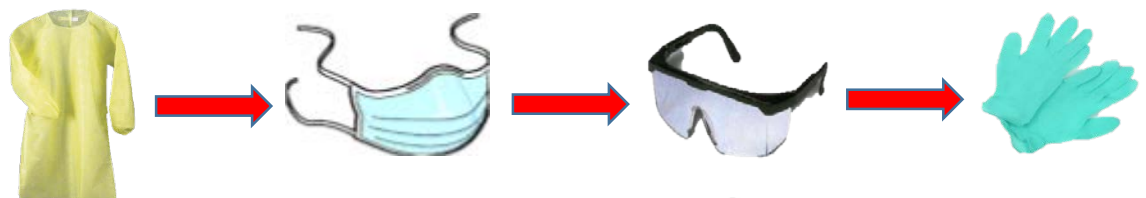
- Use alcohol hand sanitizer when hands are not visibly dirty
- Soap and water hand wash is required :
 - After using the rest room
 - Your hands are visibly dirty
 - Before eating
- Keep nails short and clean $\leq \frac{1}{4}$ inch long
- No artificial or gel nails for patient care providers

Germ Farm

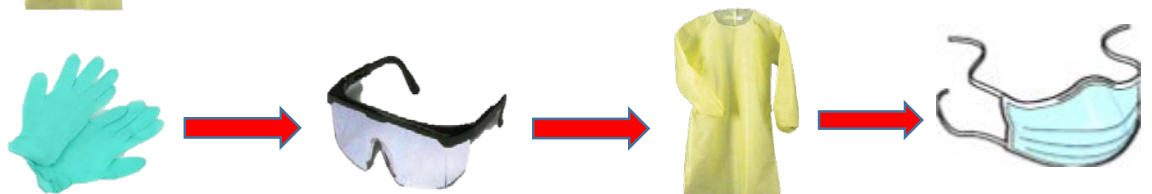


Personal Protective Equipment

Putting On PPE



Taking Off PPE



Multi Drug Resistant Organisms

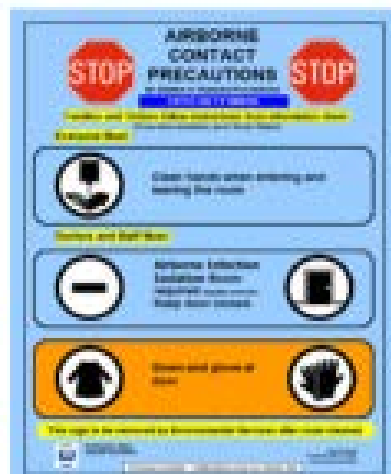
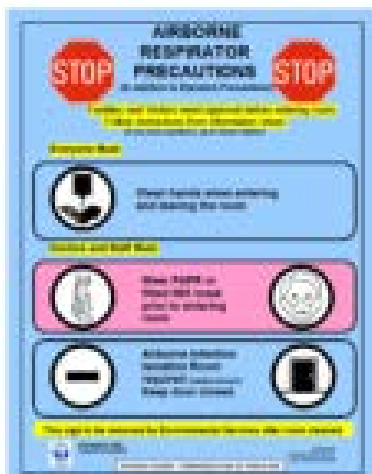
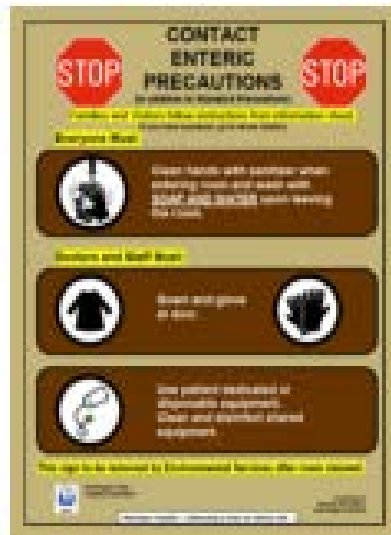
These organisms have developed resistance to antibiotics that are used to kill them. They are hard to treat and have high morbidity/mortality for patients. Adherence to transmission-based precautions (Isolation) is essential as well as the use of dedicated patient care equipment, environmental disinfection and patient/family education.



Transmission-based Precautions (Isolation)

- Contact – MRSA, VRE, ESBL
- Contact Enteric – C-difficile
- Droplet – Flu, Pertussis
- Airborne Respirator – Tuberculosis
- Airborne Contact – Disseminated zoster
- Airborne Respirator Contact – Measles, SARS

Door Signage for Patient Rooms



Employee Health & Well-being/Injury Management

Tuberculosis

Transmission

- Spread by airborne route
- Transmission affected by:
 - Infectiousness of patient
 - Duration of exposure
 - Environmental conditions
- Most exposed persons do not become infected



Airborne Precautions

- Use with patients who are:
 - Suspected TB or confirmed active TB patients
 - Chicken Pox, Measles or Disseminated Shingles (not immune)
 - New emerging diseases (Avian flu, MERS)
- Use Powered Airflow Respirator (PAPR)
 - If PAPR not tolerated, you need to be fitted with an N95 respirator: Call Employee Health

Stay Home When You Are Sick!

- Fever ≥ 100
- Diarrhea/Vomiting
- Cough (if >3 weeks, seek treatment)
- Keep vaccinations current
 - Contact Employee Health for any questions about requirements or recommendations for influenza or other vaccinations. Vaccines may be available free of charge.



Safe Patient Handling and Ergonomics

Prevent Injuries – Work Safe – Practice good body mechanics and ergonomics

Providence is committed to providing safe care to patients while protecting the health of all workforce members. It is the duty of workforce members to take reasonable care of their own health and safety, as well as that of co-workers and patients during patient handling activities.

- Use ceiling lifts and other mechanical devices to prevent manual lifting of patients except as appropriate
- Report any injury to your Supervisor immediately and complete an Employee Injury Report



Patient Safety and Quality

At Providence, we define quality as the degree to which health services increase the likelihood of desired outcomes and are consistent with professional knowledge. We believe that all health care should be:

- Safe, as to avoid injuries to patients from the care that is intended to help them
- Timely, to reduce waits and potentially harmful delays for those who receive care
- Effective, in that we match care to science to provide appropriate care
- Efficient, by avoiding waste in order to maximize value
- Equitable, to ensure care does not vary in quality, regardless of patient characteristics
- Patient and family centered, to honor the individual and respect choice

Patient Rights

Consistent with our mission and core values and with applicable state and federal law, Providence respects and upholds the rights and responsibilities of all individuals receiving care and services at Providence facilities. Patients are made aware of their rights and responsibilities prior to receiving hospital care or services. In every encounter, patients will be treated with compassion and respect.

All patients or their designated representative will be given a patient rights brochure and will be asked to read and understand their patient rights.

Reporting Concerns - Unusual Occurrence Report (UOR)

Definition of an Unusual Occurrence

- Any event placing patients and/or others at risk of harm or possible harm
- Any event which is not consistent with routine operation of a healthcare system or routine care of a particular patient

Purpose of Reporting

- Identify opportunities to improve the quality of patient care
- Identify events or unsafe conditions
- To advise Risk Management

Find the Quantros link on the Providence home page

Examples of when to complete an UOR

- Medication errors or adverse drug reaction
- Patient or visitor fall
- Equipment failure that could have resulted in injury
- Delay in treatment

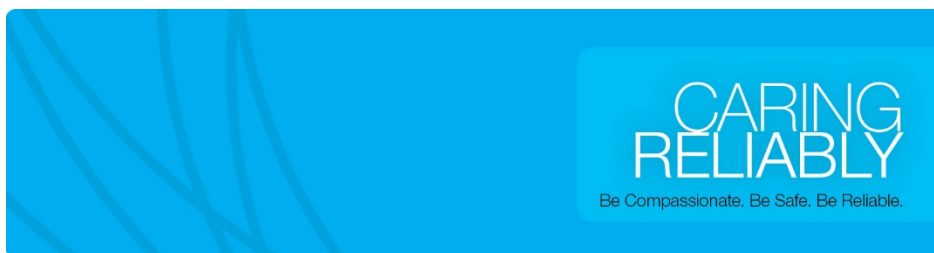


Definition of Sentinel and Adverse Events

Sentinel Event – A Sentinel Event is defined by The Joint Commission (TJC) as any unanticipated event in a healthcare setting resulting in death or serious physical or psychological injury to a patient or patients, not related to the natural course of the patient's illness.

Adverse Event – Adverse events are medical errors that healthcare facilities could and should have avoided. The National Quality Forum (NQF) defines these errors, which are also called serious reportable events. The events may result in patient death or serious disability. Washington State law requires healthcare facilities to report to the Department of Health whenever they confirm an adverse event.

Universal Behaviors and Tools for Highly Reliable Organizations



Pay attention to detail

Communicate clearly

- SBAR (Situation Background Action Request)
- 3-way repeat back and read back
- Phonetic and numeric clarification
- Clarifying questions

Have a questioning attitude

- Validate and verify
- Know why and comply

Operate as a team

- Brief, Execute, Debrief

Speak up for safety

- Escalation using CUS (Concerned Uncomfortable Stop) and chain of command
- Event reporting (UOR)

Hospital Acquired Infections (HAI)

HAIs are infections that patients get while receiving treatment for medical or surgical conditions, and many HAIs are preventable. Infections can be associated with procedures and the devices used in medical procedures, such as catheters or ventilators. HAIs are important causes of morbidity and mortality in the United States and are associated with a substantial increase in health care costs each year.

Catheter Associated Urinary Tract Infections (CAUTI)

- Insertion Bundle – use bladder scanner to assess need, appropriate indication, aseptic technique including new kit for any breaks, urimeter for inpatients, do not test balloon, peri care prior to insertion
- Maintenance Bundle – securement device, unobstructed flow, bag below bladder, empty regularly using patient-specific container, remove ASAP

Central Line Associated Bloodstream Infections (CLABSI)

- Insertion Bundle – HH and asepsis, maximal barriers, CHG for skin antisepsis, optimal site selection
- Maintenance Bundle – scrub the hub, use sterile caps, occlusive dressing, biopatch, assess need daily

Surgical Site Infection (SSI)

- Preop – modifiable risk factors, prophylactic antibiotics with weight based dosing, MRSA screening, CHG preop shower or cleansing, if hair removal – clip
- Intraop – asepsis, CHG/alcohol skin prep, surgical technique, patient warming, antibiotic redosing, minimize traffic, minimize immediate use sterilization, ventilation and humidity, OR cleaning
- Postop – nursing care, dressing care, reinforce dressing first 48 hours, remove lines ASAP, daily bath and linen change

C-Difficile

- Contact Precautions for duration of diarrhea
- Comply with CDC hand hygiene recommendations
- Adequate cleaning and disinfection of equipment and environment
- Laboratory-based alert system for immediate notification of positive test results
- Educate about *C. diff* infection: healthcare personnel, housekeeping, administration, patients, families

Patient Falls with Injury

Falls resulting in injury are a prevalent patient safety problem. Any patient of any age or physical ability can be at risk for a fall due to physiological changes due to a medical condition, medications, surgery, procedures, or diagnostic testing that can leave them weakened or confused. Injured patients require additional treatment and sometimes prolonged hospital stays.

- Institute an interdisciplinary fall team
- Use a standardized tool to identify risk factors for fall
- Develop an individualized plan of care based upon identified fall risk
- Standardize hand-off communication
- One-to-one education of each patient at the bedside
- Conduct post-fall huddle, have transparent reporting and trend/analyze falls

Recognizing and Reporting Abuse and Neglect

All healthcare staff need to be able to identify abuse or neglect as well as the extent and circumstance of abuse to give the appropriate care.

All staff have a responsibility to

- Protect patients from abuse/neglect
- Identify patients suspected of having injuries because of physical, sexual or mental abuse and/or neglect
- Keep patients safe

Mandated Reporting

- By law, we are required to report cases of known or suspected abuse/neglect
- Reports are made to CPS, APS, and/or law enforcement depending on the circumstances of each case
- In addition, staff will report to their supervisor or to the administrative supervisor
- Prior to reporting to a protective agency, it may be necessary to collaborate with other members of the healthcare team to determine if suspicion of abuse exists

