Guest Orientation Manual

Welcome to Confluence Health! This Guest Orientation Manual introduces the expected knowledge and behaviors of facility guests, including students, vendors, contractors, and others, while working at CH facilities. This manual includes information on confidentiality, safety, infection control practices and emergency practices.

Please read the manual before your first shift at a Confluence Health facility. Refer any questions to your supervisor or clinical instructor/preceptor. You may also contact the Education Services Department for additional assistance.

Mission and Core Values

We are dedicated to improving our patients' health by providing safe, high-quality care in a compassionate and cost-effective manner.

Core Values

1. Our patients are the reason for our being, and their needs will drive all of our actions.
2. We will treat everyone (including patients, their families, referring offices, and colleagues) with dignity, respect and compassion.
3. We will work as a team, utilizing collaboration, active participation and open communication among all physicians and staff.
4. We will continue to innovate ways to improve the delivery of excellent, high value care.
5. We will measure successes and failures, and use the results to drive further improvement.
6. We will be a good neighbor in the communities we serve with donations of time, talent and capital.
7. We will be ethical and accountable in all of our decisions and actions.
Compliance, Ethics and Confidentiality

Compliance

The Quality Program provides comprehensive processes and systems that ensure quality clinical care and patient safety including availability of care, accessibility of care, continuity of care, patient satisfaction and value. Confluence Health is committed to assuring that a high standard of care is maintained for all patients served by its physicians and staff.

The organizational Compliance Program, a subset of the Quality Program, is a system of standards, policies, reporting processes and monitoring procedures. The Compliance Program is designed to ensure that all workforce members comply with the laws that govern the organization. The program is intended to make it as clear as possible what practices and behaviors are expected and how to report any breach in compliance by others.

Confluence Health works under the rules and regulations of numerous agencies. You are expected to perform your work in an ethical and legal manner, demonstrating the behaviors and ethics set by the organization. If, at any time, you are unsure of what to do, talk to your supervisor, director, any member of the management team, the Director of Human Resources, or the Compliance Officer.

HIPAA Standards or Rules

When a patient enters the CH system, we assume an obligation to keep in confidence all information about their personal affairs. As a guest, you are responsible for adhering to all CH policies and standards related to patient confidentiality.

Patients expect and need their private medical information to transfer easily as they move through the healthcare system. Unfortunately, this ease of access also creates concern that private information could be lost or shared inappropriately. To address these concerns, the Health Insurance Portability and Accountability Act (HIPAA) established privacy and security rules. These rules identify which patient information is considered protected (Protected Health Information or PHI) and how healthcare organizations are to manage this type of patient information. Confluence Health is fully committed to complying with HIPAA requirements in all aspects of patient care and operations.

You are required to adhere to the following HIPAA-based rules:

1. Don’t view patient records that you have no need to see. Access only the minimum health information necessary to do your job.
2. Don’t share information about patients with any employee who doesn’t need it to do their job.
3. Avoid discussing patient issues outside patient care areas. At all times, take reasonable care to make sure that your conversation is not overheard.
4. Don’t share patient information with your family, friends, or others outside the hospitals or clinics.
5. Do not leave health information unattended. File and store hard copy documents appropriately. Lock your computer screen or log off before you walk away from your computer.
6. Provide HIPAA information to patients so they understand your concerns about confidentiality and your practice standards.

Allowable PHI Disclosures

Healthcare workforce members may disclose Protected Health Information (PHI) in the following situations:

1. To provide, coordinate, or manage a patient’s health care at Confluence Health or to enable another authorized provider to do so.
2. To obtain or provide reimbursement for services or to permit another healthcare agency to do so.
3. When requested by a public health authority (e.g., Chelan Douglas Health District) that is authorized to collect the information in order to prevent or control disease, injury, or disability.
4. When requested by a public health authority or other government authority authorized by law to receive reports of child abuse or neglect.
5. When requested by a law enforcement official in order to identify or locate a suspect, fugitive, witness, or missing person.
6. See Policy OF-6 Disclosure Use and Disclosure of Patient Medical Information (CWH) and/or Policy 3330.4 Minimum Necessary Requirements for the Use and Disclosure of Protected Health Information (WVMC) for additional information on allowable disclosures of patient information including how to document the disclosure.

Anyone who discusses private and protected information with patients, volunteers, contracted or regular employees, or persons outside of the organization, other than discussion that is necessary with the sponsor/provider/preceptor/instructor, is breaching Confluence Health ethics and subject to termination of his/her relationship with the organization.
Infection Control

Health Screening

1. You should be free of communicable diseases that may be transmitted to others in our facilities. If you are sick with a fever or have an infectious illness, you are responsible for notifying the appropriate authority and staying home.
2. All immunizations/required testing must be completed and up-to-date prior to attending a shift at a CH facility.

Hand Hygiene

In a hospital or clinic setting where illness and injuries are routine, it’s easy to spread germs from one person to another. Hand washing is one of the best ways to reduce the spread of infections. Washing your hands removes the germs you’ve picked up since your last hand washing opportunity.

Basic Hand Hygiene Products
Confluence Health provides two types of hand hygiene products:
- Soap products to be used when washing your hands under running water
- Alcohol-based hand sanitizer that doesn’t require water

Choosing the Correct Hand Hygiene Method
It’s important to choose the correct hand hygiene method based on the tasks you are performing.

Soap and Running Water
When you see dirt or contamination on your hands, or you have been in contact with blood or body substances (including urine or feces), wash your hands with soap and running water. You must also wash your hands:
- After using the restroom
- Before and after eating
- Before and after food preparation
- Before and after food delivery
- After cleaning up spills or disinfecting restrooms

Washing with Soap and Water
When washing with soap and water, follow these six steps:
1. Wet hands with warm water.
2. Apply either plain or antiseptic soap.
3. Scrub hands together vigorously for at least 15 seconds, 20 seconds minimum for all food service workers.
4. When scrubbing, cover all surfaces of the hands and fingernails.
5. Rinse under running warm water.
6. Dry hands with a disposable paper towel.
7. Use towel to turn off faucet.

**Hand Sanitizers**
You may use alcohol-based hand sanitizers when there is no visible dirt or contamination on your hands, and you have not been in contact with blood or body substances (including urine or feces).

**Washing with Alcohol-Based Hand Sanitizer**
Alcohol-based hand sanitizers are located throughout the hospitals, clinics, and offices. When washing with alcohol-based hand sanitizers, follow these three steps:
1. Apply sanitizer to the palm of one of your hands.
2. Rub hands together to cover all skin surfaces.
3. Continue rubbing your hands until dry.

**Isolation Precautions and Personal Protective Equipment (PPE)**

Anyone with potential risk of contact with blood, body fluids or other potentially infectious materials must use specific precautions to reduce the risk of personal exposure and to control the spread of disease. Confluence Health uses precautions defined by the Centers for Disease Control (CDC). These precautions reduce the risk of organism transmission.

**Standard Precautions:** Because all patients are assumed to be potentially infectious, all patient care is provided using a set of precautions: Standard Precautions. These precautions apply to the management of blood, body fluids, secretions and excretions, skin management, and mucous membranes.

Two Key Expectations:

1. Do not touch or attempt to clean up blood/body fluids without proper Personal Protective Equipment and training.
2. Use hand sanitizer and/or wash your hands with soap and water frequently to avoid the spread of infections.

**Other types of CDC Precautions:** When a patient has a specific known or suspected infectious disease, precautions are put in place to prevent the spread of disease, including:
- Contact (and Contact Enteric)
- Droplet (and Droplet Respirator)
- Airborne Respirator
If you are exposed to blood or bodily fluids, perform these first aid steps immediately:

- For mucous membrane contamination: Flush contaminated areas with normal saline or water for at least five minutes.

**Sharps Injury Prevention**

Guests must take precautions to prevent possible injuries caused by needles and other sharp instruments or devices. Dispose of sharps and needles in designated sharps containers.

If a sharps exposure does occur, report the exposure immediately to your instructor/supervisor and to CH Employee Health. If the exposure occurs after hours or Employee Health is closed, contact the House Supervisor (CWH). At WVH contact your supervisor immediately.

**Medical Waste**

Medical waste contains blood and body fluids that may potentially be infectious. **DO NOT HANDLE** any item that you think may be contaminated. Receptacles with RED TRASH LINERS are for medical waste. **NEVER REACH INSIDE A RECEPTACLE.**

**Safety/Emergencies**

**Emergencies**

*There are many different emergency numbers throughout CH. It is extremely important to ask department staff which telephone number to use when reporting an emergency.*

- CWH internal departments use 2-911.
- CWH external departments (outside the main building) use 9-911.
- WVH main campus uses 70.
- WVH external clinics use variable numbers, ask staff for help.

There are many types of emergencies that may occur in a healthcare facility. They are often referred to as “codes.” The following emergency codes are used at Confluence Health:

**Code Red: Fire**

“Code Red” is the emergency code used to announce a fire and to activate the emergency response process. A fire in a healthcare facility is very serious. Smoke, heat, and structural damage can create health and safety issues for patients and employees. If
a fire is not controlled quickly, it can spread rapidly, blocking escape routes and weakening structures to the point of collapse.

**Code Blue: Medical Emergency**

“Code Blue” is the emergency code used to announce a medical emergency and to activate the emergency response process. The Code Blue announcement will alert members of the Code Blue Team. Team members are trained to respond to emergency medical situations, bringing portable emergency equipment, medications, and advanced life support skills directly to the victim.

**Code Orange: Chemical Spill**

“Code Orange” is the emergency code used to communicate and activate a response in the event of a chemical or hazardous material spill or release that is likely to:

- Cause injury or illness
- Result in exposure that exceeds state or federal exposure limits
- Harm the environment

Some chemical or hazardous material spills or releases are minor and may be safely addressed without activating a Code Orange. Special assistance may not be necessary when:

- The spill is fairly small
- The material is known and is not highly toxic or flammable
- Safety Data Sheets (SDS) are available outlining the clean-up procedures for the material and clean-up is safe

In all other situations, a Code Orange should be activated in order to mobilize specially trained hazmat personnel. Code Orange situations include:

- Large spills or releases
- Unknown materials
- Materials known to be highly toxic or flammable
- Radioactive or chemotherapy spills

If you encounter a spill or release of hazardous materials that requires a code, take the following steps:

1. Activate “Code Orange” and state the location of the incident. A group of specially-trained staff including Engineering Services, Environmental Services, and Security will be alerted, and will report immediately to the scene. Depending on the nature of the spill, additional responders may also be alerted including the Radiation Safety Officer, a chemotherapy certified RN, or the House Supervisor (CWH).
2. If safe to do so, isolate the spill area.
3. Keep other employees, patients, guests, and visitors away from the spill and fumes.

Amber Alert: Infant/Child Abduction
Infant and child abductors vary in their motives. They may be an estranged or angry parent, a child molester, or someone suffering from mental illness. While abductors have different motives, statistics identify some common characteristics including:

- More likely to be overweight females of child-bearing age
- May “hang around” high-risk areas (Obstetrics, Nursery, and Pediatric areas) with no apparent purpose
- May be seen peering into pediatric patient rooms
- May try to become “chummy” with employees caring for hospitalized infants or children
- May appear “overly curious” about treatment or staffing schedules

Reducing the Risk of Abductions
- Be vigilant of visitors who look or act suspicious, particularly in high-risk patient care areas
- Be aware of visitor restrictions. In some cases, a non-custodial parent or other family member may not be allowed to visit the patient
- Prevent unauthorized visitors from entering high-risk areas, such as Labor and Delivery, Nursery, Post-Partum, and Pediatric areas

Activating an Amber Alert
If you see or suspect an infant or child abduction take the following steps:

**Step One:**
- Immediately activate an Amber Alert.
- State the location and estimated age of the child.
- Depending on the age of the child, the operator will announce “Nursery Amber Alert” or “Pediatric Amber Alert” three times on the overhead paging system and will notify the House Supervisor (CWH) and Security.

**Step Two:** Notify the unit’s Charge Nurse.

**Step Three:** Recheck the entire area.

Responding to an Amber Alert Announcement
When an “Amber Alert” is announced, all available workforce members will:

- **Secure all exits:** Go to the nearest exit door and delay anyone without security clearance from leaving.
- **Stop potential abductors:** If a person with an infant or child approaches your exit, explain the situation and ask them to wait for security clearance before leaving.
- **Search large containers:** If a person carrying a container large enough to hide an infant approaches your exit, explain the situation and ask to search the container before it is allowed out of the building.
Refusal to Cooperate
An abductor may refuse to cooperate with you, attempt to elude you, threaten you, or exit the facility against your instructions. In these cases, do not attempt physical restraint or risk personal injury. Instead, you should:

- Follow the suspect at a safe distance so you can later describe the escape (i.e. vehicle description, license number, direction taken)
- Report this information immediately to Security and the House Supervisor
- Describe the suspect and the infant or child in as much detail as possible

Code Gray Emergency at CWH: Combative Patient
A Code Gray can be called at CWH whenever:
- A person threatens or attempts bodily harm to self or others
- A person makes verbal threats towards self or others
- An employee thinks that a situation may become violent and wants immediate help

Activating a Code Gray at CWH
If you fear a situation is becoming threatening or violent take the following steps:

**Step One:** Activate the Code Gray.
**Step Two:** State “Code Gray” and your location.
**Step Three:** The CWH switchboard operator will announce “Code Gray” and the location three times on the facility’s overhead paging system.
**Step Four:** The switchboard announcement will alert the Code Gray Team, who will respond to your location immediately. Their role is to de-escalate violent situations safely, reducing the risk of injury to everyone involved.

At WVH, all employees who are not involved in direct patient care are asked to respond to the area to provide a show of force.

Activating a Code Gray at CWH

**Who Responds to a Code Gray Announcement?**
Only Code Gray Team members, the House Supervisor, and Security respond to a Code Gray announcement. Code Gray team members have completed professional assault/crisis de-escalation training. Once the Code Gray Team arrives, the Code Gray Team Leader will assume control of the situation and direct other team members and involved staff. If you are not a team member and are not directly involved in the situation, you need to leave the immediate area.
Staying Safe Until the Code Gray Team Arrives
Once a Code Gray is announced, all available Code Gray Team members will arrive on the scene within minutes. While waiting for the team to arrive, however, the following practices may help keep you and others in the area safer:

- Stay calm. Avoid raising your voice, making accusations, and/or verbally challenging a potentially violent person. Leave the room or area if possible. If not, position yourself far enough from the person to avoid being struck or kicked.
- Do not let yourself get backed into a corner.
- Do not attempt to overpower or restrain someone by yourself. The best way to assist the Code Gray Team is to remain calm and professional, and to do as requested by the Code Gray Team Leader.

Code Silver: Violence with Weapon/Hostage Situation
“Code Silver” is the emergency code used to communicate and implement lockdown procedures during a life-threatening incident involving a person or persons who display hostile, violent, or extremely detached behavior, AND who are armed with a weapon (e.g. handguns, rifles, assault weapons) or take a hostage.

The purpose of activating a Code Silver is three-fold:

- To alert law enforcement personnel as quickly as possible. The sooner law enforcement intercedes, the better the chances for a quick resolution with fewer injuries.
- To implement a partial or full facility lock-down in which fire doors will be closed and no one will be allowed in or out of the unit/building. This allows law enforcement to contain the attacker and minimize the risk to others.
- To alert staff members to the potential danger so they may secure their areas to protect patients, visitors, and staff.

Activating a Code Silver

- Dial your facility’s emergency number to alert the switchboard operator. State “Code Silver” and provide all pertinent information.
- Call 9-911 to notify local law enforcement. Be prepared to stay on the line to provide additional information.

At the same time, the operator will:

- Also report the incident to law enforcement.
- Notify Security.
- Announce “Code Silver” and the location three times overhead.
- Notify the Administrator On-Call.
- Security and/or Engineering will meet arriving local law enforcement with keys and information regarding the building.
Note: If at an off-site facility, call 9-911 directly to notify law enforcement and then call the switchboard operator to notify administration of the incident.

Responding to a Code Silver
If a Code Silver is announced, respond as follows:

- Stay calm, remain in your area, and assure others that law enforcement is on the way.
- In nursing units, close patient doors and clear hallways of people.
- If able, move to a secure location:
  1. Close and lock doors
  2. Close blinds
  3. Barricade the door (e.g. furniture, cabinets)
  4. Position yourself out of sight and behind items that may offer protection (e.g. desks, cabinets). Turn off all noise producing devices, such as cell phones or pagers. If you must keep a cell phone or pager on for patient care reasons, turn it to silent or vibrate mode.
- If safe, allow others to seek refuge with you, but, consider the risk exposure created by opening the door.
- Remain in the secured area until an “all clear” announcement is made or until instructed by law enforcement or organizational leadership.

Code Black: Bomb Threat
“Internal Triage Code Black” is the emergency code used to announce a bomb threat and to activate the emergency response process. Activation of the Internal Triage Code Black process ensures that security measures are initiated as quickly as possible.

It is also possible that a bomb threat that could impact the daily operations of the facility could occur outside the organization. In this case “External Triage Code Black” is the appropriate code and you should wait for supervisor or Administration instructions.

Telephone Bomb Threats
If you receive a telephone bomb threat, take the following steps to activate an Internal Triage Code Black:

1. Alert a second employee to call the emergency number while you’re still on the phone by writing - “bomb threat, call 2-911 OR 70 (or the appropriate number for your facility)” - on a piece of paper. The switchboard operator will then announce “Internal Triage Code Black: please return to your department” three times on the overhead paging system and will notify the House Supervisor or Administrator-On-Call. The House Supervisor and/or the operator will contact Security, the Plant Engineer, and local law enforcement.
2. If possible, try to keep the caller on the line and get as much information as you can by:
   • Asking Questions:
     a. When will it go off?
     b. Where is it located?
     c. What does it look like?
     d. Why are you doing this?
     e. Who are you?
     f. Where are you?
   • Listening Carefully:
     a. Do you hear any background noise that might offer a clue to the caller’s location?
     b. Is it a female or male voice?
     c. Does the voice have an accent or other distinguishing speech patterns?
3. Once the phone conversation is over and you’ve gotten as much information as possible, contact the House Supervisor or Administrator to report any additional details.
4. Wait for further instructions from the Administrator or House Supervisor.

**Written Bomb Threats**

If you receive a written bomb threat, take the following steps to activate an Internal Triage Code Black:
   • Call your emergency number and report “Internal Triage Code Black” to alert the switchboard operator. The operator will then announce “Internal Triage Code Black, please return to your department” three times on the overhead paging system and will notify an Administrator and/or the House Supervisor. The Administrator or House Supervisor will contact Security, the Plant Engineer, and local law enforcement.
   • Save all written threats and packaging and handle them as little as possible.
   • Wait for further instructions from the Administrator or House Supervisor.

*Note:* If you are at an offsite facility, call 911 to report the threat to law enforcement directly. Then call the switchboard operator (if applicable) who will notify Security and Engineering.

**Responding to a Internal Triage Code Black Announcement**

If you hear an Internal Triage Code Black announcement, take the following actions:
   • Remain calm.
   • Reassure patients and visitors.
   • Return to your work area. Walk, don’t run.
   • Look for unusual or suspicious objects throughout your area. Do not move or touch any if seen.
   • Report any unusual or suspicious objects to your preceptor/instructor.
• Do not evacuate the building unless instructed to do so by a facility supervisor or other management representative.

Internal or External Triage/ Internal or External Emergency or Disaster
There are two types of emergency incidents: internal and external.

Internal emergency incidents are events that occur inside the main facility building or that directly affect the main buildings. Examples of internal incidents include:
• Structural damage
• Utility failure (power, water, medical air)
• Flooding
• Equipment failure
• Labor shortage

External emergency incidents are events that occur outside the main campus. These incidents can vary widely, but usually create many casualties in the community. Some examples include:
• High numbers of injured due to:
  1. Fire or explosion
  2. Motor vehicle accident
  3. Plane or train accident
  4. Earthquake
  5. Flood
  6. Chemical spills
• High numbers of ill due to:
  1. Flu
  2. Food poisoning
  3. Infectious or contagious disease

Evacuation Plan
The decision to evacuate the facility will be made by Administration. If you are instructed to evacuate, follow the instructions of your supervisor, director or other members of the Administrative Team.

Preparing for Emergencies
A community-wide infrastructure is in place should an emergency incident occur within North Central Washington. Regional drills are performed to practice and improve emergency incident plans and response strategies. Your role in emergency incident preparations includes:
• Participating in drills as if they are real emergency incidents.
• Determining in advance how you will communicate with your family in the event that you are unable to leave the facility during an incident.
**Chemicals**

Hazardous chemicals and harmful materials are used in many areas. You have a right to know about these chemicals and materials.

Chemicals exist in one of three physical forms: **solids** (dust, powder, fibers, metal), **gases and vapors** (chemicals that are in gas form when at room temperature), and **liquids** (fluids and mists). Chemicals can enter your body through ingestion, inhalation, or absorption through your skin. The effect a chemical has on the body depends on several factors:

- The physical form of the chemical
- How the chemical enters the body
- The amount of chemical, or dose, which actually enters the body
- How toxic, or poisonous, the chemical is

By practicing some basic safe work practices you protect yourself and reduce your risk. Some key safety guidelines include:

- Know what ingredients are in the product you are working with.
- Use PPE as appropriate.
- Use the smallest amount of chemical possible to do the job.
- Maintain machinery and equipment to prevent chemical leaks or releases.
- Use ventilation to reduce the amount of chemicals in the air.
- Tell your instructor/supervisor about any unusual odors or if you see a chemical spill or release.
- Leave the area if there is a large spill or chemical release.

**Safety Data Sheets (SDS)**

An SDS (Safety Data Sheet) is an information sheet that describes the hazards of chemical products. An SDS contains safety points about the chemical, including potential hazards, recommended personal protective equipment usage, first aid, and spill management procedures. SDS information is available through facility intranet sites.

**Electrical Safety**

Electricity is usually not seen or heard, therefore, its dangers are sometimes overlooked. Mishandled electrical currents can create a variety of emergencies ranging from physical injury to fires.
Common Electrical Hazards
Recognize potential electrical hazards before they have a chance to cause an injury. Examples of electrical hazards to watch for include:
- Electrical equipment that provides even slight shocks when touched
- Electrical equipment that doesn’t run properly or shows an error message
- Exposed wires on electrical cords
- Loose, cracked or discolored wall outlets
- AC plugs with bent or missing prongs
- Use of a ‘cheater’ so that a three-prong electrical plug can be plugged into a two-prong electrical outlet

Safe Work Practices for Electricity
Apply these safe work practices as you work with or around electricity:
- Approach any potential electrical hazard with extreme caution.
- Always follow the manufacturer’s recommendations when operating electrical equipment.
- Ask for training to learn how to operate equipment safely.
- Don’t use electrical equipment that has been dropped. Have it inspected first.
- Don’t unplug electrical equipment by pulling or jerking on the power cord; hold onto the plug.
- Don’t carry, swing, or pull electrical equipment by its power cord.
- Don’t roll heavy equipment or beds over electrical power cords.
- Check electrical power cords and wall receptacles for discoloration, breaks, cracks, or exposed wiring.

Water and Electricity: A Lethal Combination
The combination of water and electricity is especially dangerous. Water increases the flow of electricity and the severity of electrical shock. When electrical equipment is used near liquids or moisture, ensure the following:
- Promptly wipe up water or other fluids that get spilled on or around equipment.
- Don’t touch electrical equipment when your hands are wet.
- Avoid getting electrical equipment wet in shower or bathtub areas.

Reporting Electrical Hazards
Report any potential or actual electrical hazards immediately to the Bio-medical (patient care equipment), IT (computer equipment) or Engineering Department (facility hazards) and complete a work order as soon as possible. Students should report to their preceptors.

Electrical Power Disruptions
Many patients rely on the ongoing support of electrical medical equipment. If the power fails, these patients could suffer severely. To provide uninterrupted electrical service, the facilities have back-up power generators to provide emergency electrical service. If a
power failure occurs, all lighting and outlets marked in red will automatically switch over to emergency power.

In the event of a power failure:
- Stay in your area and reassure patients and visitors.
- Make sure critical equipment is plugged into RED emergency power outlets.
- Wait for further instructions from your director or Engineering Services.
- Do not use elevators.

**Radiation Safety**

If you work in areas that offer radiology services, you may be at risk for radiation exposure. To reduce the incidence of radiation injury or illness, you are responsible for taking steps to minimize your exposure by following the Occupational Safety & Health Administration (OSHA) radiation safety recommendations including:
- Avoiding areas where radiation is used if you’re not working there. Departments using radiation will prominently post the “Caution Radiation Area” warning sign within their areas.
- Using Personal Protective Equipment (PPE) as required.
- Limiting your time around radiation sources.
- Maximizing your distance from radiation sources.
- Using appropriate shielding.
- Disposing of contaminated radioactive devices, linen, clothing, food trays and any other materials or waste properly.
- Avoiding radiation-related tasks if you are pregnant.

**Radiation Spills**

Radiation spills need to be reported immediately to ensure employee and patient safety. To report unsafe radiation conditions:
- Call Diagnostic Imaging and inform the Radiation Safety Officer. During this time, the patient’s RN will continue to attend to the immediate needs of the patient until the Radiation Safety Officer coordinates the patient’s evacuation.
- Evacuate the spill area of all visitors that have not been contaminated. If you suspect visitors may have been contaminated, do not allow them to leave until checked for contamination by clean-up personnel.
- Confine the spill by placing an absorbent material (towels, paper, linen) over the spilled material.
- Secure the area and prevent other personnel from entering the area and spreading contamination. Be sure not to step in or track the spilled materials.
- Complete an Event Report.
Ergonomics and Safe Patient Handling

Whether you will be required to push or pull heavy loads, transfer patients, or sit at a computer, you are at risk for injury. Many workplace injuries can be prevented by practicing proper body mechanics, following ergonomic guidelines, and using lift equipment when appropriate.

Lifting and Moving Objects
Keep these tips in mind when moving and lifting objects:
- Maintain a wide, stable base while standing and lifting.
- Maintain the natural curve of your back.
- Lift with your legs, not with your back.
- Use the “Foot Rule”: Point your foot in the direction your arms are going in and pivot your entire body. Don’t twist at the waist.
- When lifting or carrying an object, keep your stomach muscles firm and the item close to your body.
- Keep your body movements smooth, not jerky or sudden.
- Push rather than pull a load.
- Do not remain in one position for extended periods of time.
- Plan ahead for physical work by getting the right equipment. Don’t try to do a job by “muscling” your way through it or rushing to get it done without the proper equipment.
- Ask for training prior to using equipment.
- Take the time to get extra help, if needed.
- Pay attention to how your body feels as you perform work. If you feel discomfort, stop the activity.

Safe Patient Handling: Lifting or Moving Patients
Planning ahead is vital to your safety as well as to our patients’ safety. When lifting or moving a patient:
- Assess the patient’s ability to help.
- Request assistance from co-workers if required.
- Adjust the bed height according to the situation.
- Instruct the patient on how he or she can help during the lift.
- Coordinate the lift. Explain the process out loud (“1, 2, 3, lift”) so the patient and staff know what to expect.
- Lift in stages. The entire move does not have to be done at once
- Don’t hold your breath when you lift.
- ALWAYS use patient lift equipment when appropriate (e.g. draw sheets, slide boards, trapeze bars, and mechanical lifts).
Safe Patient Handling: Using Patient Lift Equipment
It is the policy of CH that patients are to be moved with the assistance of appropriate equipment when certain limits for manual handling are exceeded. It is the best way to protect yourself and the patient when lifting. ALWAYS take the time to obtain and use the appropriate lift equipment. It is always preferable to manual or “team” lifting. Confluence Health has a variety of patient lift equipment available:

- Floor lifts
- Ceiling lifts
- Bariatric beds

If you are unsure how to obtain or use the equipment, contact your supervisor, director, or preceptor for assistance. See Policy PFF-67 Safe Patient Handling and/or Policy 6650 Employee Safe Patient Handling and Movement for additional information.

Safe Patient Handling: Transferring Patients
When transferring patients, follow these steps:

- Secure a wheelchair before transfer. Lock the wheels and have a coworker steady the chair
- Place a transfer/gait belt around the patient’s waist
- Instruct the patient on the transfer process and how he or she can help you
- Explain the process out loud (i.e. “1, 2, 3, up”) so the patient and your co-workers know what to expect
- Face the patient and bend your knees as you grasp the transfer/gait belt
- Pivot as you transfer the patient and your body toward the desired destination

Human Resources

Dress Code

The professional image, reputation and perception of Confluence Health are influenced, in part, by the professional image, behavior, and personal appearance of its staff (employees, physicians, students, vendor representatives, contract/agency staff, and volunteers). Neat, well attired, and clean appearances create an atmosphere of confidence, respect, and professionalism, which is expected by our patients, families, physicians, and colleagues. All clothing should be professional and appropriate to the nature and scope of one’s position. Clothing should be neat, clean, well fitted, and in good repair. No jeans or denim are permitted. Sandals and/or open toed shoes are not allowed in patient care areas. An identification badge will be worn at all times when on campus. Appearance should adhere to Confluence Health’s, Policy 400 Professional Appearance and Dress Code.
**Student Dress Code**

Students are expected to follow their specific school uniform requirements and identification while at Confluence Health.

**Fitness for Duty**

All workforce members are expected to demonstrate “fitness for duty” while on the job. They must be able to work safely, with full control of their physical abilities, mental faculties, and judgment. A variety of factors may impair an employee’s abilities including substance abuse, medical conditions (i.e. high or low blood sugar), medical illness, sleep deprivation, senility, or mental illness.

If you have reason to believe that a workforce member is impaired and not fit for duty, you are expected to report it immediately to your supervisor or director. If you are personally facing an impairment issue, you have an obligation to inform your supervisor or director of the issue immediately.

**Prohibited Conduct**

The activities prohibited by Confluence Health include, but are not limited to, the following:

1. Reporting to your shift under the influence of alcohol or drugs, or otherwise impaired
2. Use or consumption of alcohol or other intoxicating substances on CH premises
3. Selling or distributing illegal substances while on CH premises
4. Stealing from patients, CH, or employees
5. Any form of dishonesty
6. Disorderly conduct, including fighting, acting in an obscene manner or using obscene, abusive or threatening language or foul play
7. Smoking in an area where smoking is prohibited. All Confluence Health facilities are tobacco-free and prohibit smoking or use of any tobacco products in any buildings on its campuses or in facilities controlled by CH.
8. Defacing or damaging CH property
9. Possession or use of firearms, fireworks, or any other weapon on CH property
10. Excessive use of telephones or other equipment for personal matters
11. Disobeying safety regulations
12. Noncompliance with policies
13. Failure to observe security regulations
14. Failure to maintain confidentiality, including matters relating to patients
15. Any action that destroys good relations between CH and its employees or between CH and any of its suppliers or patients
16. Harassment of any kind (i.e. sexual, racial, age, etc.)
Population-Served Competencies

As a guest at CH facilities, it’s likely that you will encounter patients from all over the world. These patients may have cultures, customs, languages, or religious practices that can affect their care. In addition, patients may have age-specific care needs, psychosocial needs, and developmental concerns that must be addressed. You must be prepared to meet these unique needs with sensitivity and compassion. Based on your assignments, you are responsible for:

- Differentiating the needs of patients in the age groups you serve.
- Using interview and/or communication techniques that are age- and culture-specific.
- Recognizing cultural needs and acting to support culture-specific care.
- Adjusting your role appropriate to the patient’s age, development, and cultural needs.
- Recognizing psychological development and modifying your care appropriately.
- Recognizing the signs/symptoms of abuse or neglect and referring appropriately.
- Identifying physical and emotional dependency needs and evaluating the patient’s support systems.
- Recognizing illness-related lifestyle changes and adjusting discharge plans accordingly.

In general, as a facility guest you must know and understand the specific groups served in your area and how you will provide for any special needs.