



*Medical excellence closer to home*

## **Orientation Information for New Employees**

### **I. MISSION STATEMENT**

#### **Mission**

Jefferson Regional Medical Center partners with its employees, communities, and physicians to address current and developing health needs with quality medical, preventive, and related services. All services are delivered with sensitivity to the clinical, emotional, and spiritual needs of the individual.

#### **Vision**

Our communities will have confidence that the Jefferson Regional Medical Center will be available for them in times of need, providing superior care and service, and working to improve the health of the region.

#### **Goals**

1. The highest quality of care will be delivered in all areas, with the necessary indicators in place to monitor our progress.
2. JRMC will be a visible and leading driver of health service delivery.
3. JRMC will be the employer of choice for the most capable and supportive health delivery personnel.
4. Service area residents will recognize the value that the hospital brings to their lives, and will prefer to be served by JRMC for their health care needs.
5. Primary care and specialty physicians will perceive the JRMC and its service area as an environment supportive of personal and professional growth. Doctors will want to practice at JRMC.
6. JRMC will be marshalling appropriate resources and providing exemplary stewardship of its assets as a means of assuring the delivery of the best possible care.
7. A strong sense of pride will permeate the organization.
8. The health of our communities will be measurably improved within targeted diseases and conditions.

#### **Employee Code Of Conduct**

An Employee Code of Conduct presents the values, principles, and practices that guide business conduct and serves as a fundamental component of the Corporate Compliance Program. Jefferson Regional Medical Center believes in operating within legal, ethical, and moral principles, and strives to deal with individuals, businesses, and organizations that share these values in order to prevent fraudulent and abusive activities. A Corporate Compliance Program was established as a process to identify and correct potential business and legal problems. Individuals with concerns or questions regarding business conduct may call the Compliance Hotline (412-267-6333). Information may be reported anonymously. Federal and state laws and our policy prohibit retaliation or retribution against individuals who report suspected violations.

#### **Core Values**

Integrity – Spirituality – Respect for the dignity of each person – Achievement – Professionalism – Compassion

#### **Service Excellence Commitment**

We pledge to:

- Wear our name badges in a visible manner
- Introduce ourselves
- Be courteous, friendly, gentle and kind
- Display a professional and positive attitude
- Respect your dignity, privacy, and confidentiality
- Thoroughly explain your procedure
- Respond to any concerns you may have
- Provide a clean and comfortable facility

## II. PATIENT RIGHTS AND SAFETY

Jefferson Regional Medical Center (JRMC) recognizes patient rights and responsibilities and JRMC's responsibilities and obligations to all persons who are served by the Medical Center and its affiliates.

JRMC maintains processes for investigating, resolving, or reporting patient complaints or grievances. Guidelines for the prompt resolution of grievances involving alleged violations of patients' rights are intended to facilitate communication and promote patient interests.

### 1. Communication of Patient Rights and Responsibilities

Written copies of patient rights/responsibilities will be distributed to patients or family members prior to treatment (Patient's Rights and Responsibilities brochure). Patient Bill of Rights/Responsibilities will be posted in public areas according to Medical Center and legal requirements. Patients will receive, upon admission, information regarding confidentiality and HIPAA regulations.

### 2. Management of Complaints and Grievances

Patients or their family members can verbalize complaints to any employee or the Patient Representative while the patient is hospitalized. Upon completing a review, findings will be shared with the patient/family and the involved department. If patients are dissatisfied with the response to their complaint, they may request an appeal.

### 3. Reporting and Management of Serious Events, Incidents & Infrastructure Failures

It is the philosophy of JRMC that the identification and reporting of serious events, incidents, and infrastructure failures and the results of the investigation of such events are critical for improvement of processes in order to enhance patient safety. Event reporting shall be used as a means of reviewing and trending for management of patient safety and shall not be used as a basis for punitive action. Early, accurate reporting is the objective. The Risk Management Department is to be notified of these events through the Patient Safety Hotline at extension 7272.

### 4. Patient Safety

The **Medical Care Availability and Reduction of Error Act (Mcare-Act 13)** is to reduce and eliminate medical errors by identifying problems and implementing solutions that promote patient safety. The **Patient Safety Authority** is an independent state agency charged with taking steps to reduce and eliminate medical errors by identifying problems and recommending solutions that promote patient safety in hospitals. The **Pennsylvania Patient Safety Reporting System (PA-PSRS)** is a mandatory, confidential, statewide information system for reporting events, occurrences, or situations that have (or could have) resulted in unanticipated injury to a patient in an Act 13 covered medical facility. An important component of PA-PSRS is the ability of individual healthcare workers to submit what Act 13 describes as "Anonymous Reports".

### 5. Resources

Patient Safety Officer (412-469-7040); Patient Representative (412-469-5178); Department Manager/Supervisor/Team Leader

## III. FIRE SAFETY

### 1. IN CASE OF FIRE - R.A.C.E.

**R**ESCUE anyone whose life or health is in immediate danger.

**A**LARM - turn in the alarm to assure help is responding. First, use the nearest pull box. Second, call the operator by dialing 1111. Give your name, the exact location of the fire, and description of the fire.

**C**ONFINE - Closing the doors will keep the fire from spreading. Close all doors to stop the spread of smoke and fire.

**E**XTINGUISH - Fire extinguishers are provided throughout the building.

## 2. TYPES OF FIRES

TYPE A Fire is a trash fire, such as paper, linen, or wood.

To see which type of fire your fire extinguisher is good for, look at the label on the front.

TYPE B Fire is a flammable liquid, such as alcohol, gasoline, or kerosene.

**Never** use the wrong type of fire extinguisher. (Such as a fire extinguisher with only the letter A on the front label when you have an electrical Type C fire).

TYPE C Fire is an electrical fire, such as a washer or dryer.



## 3. FIRE EXTINGUISHER GUIDELINES

### Use a fire extinguisher only when:

(1) the fire is small and contained, (2) the exit is clear and you can fight the fire with your back to the exit, (3) you are confident using the extinguisher, and (4) you can stay low and avoid breathing the smoke.

### How To Use A Fire Extinguisher - P.A.S.S.

PPULL the pin at the top of the extinguisher.

AAIM the extinguisher nozzle (horn or hose) at the base of the fire - the base closest to you.

SSQUEEZE the handle.

SWEEP from side to side at the base of the fire.

## IV. JRMC CODES

### 1. CODE BLUE (*bomb threat*)

- Notify security to report a suspected device or phone call received. The operator will announce “CODE BLUE” on the overhead paging system with location and time of detonation, if known.
- When announcement is heard on the overhead paging system, heighten awareness and report any suspicious activity/person(s) to security. Listen to overhead announcements and be prepared to evacuate or follow instruction/guidance given.

### 2. CONDITION RED (*Fire*)

- **R.A.C.E.** – **R**escue, **A**larm, **C**onfine, **E**xtinguish
- Use the nearest pull box to sound alarm. Call 1111.
- When announcement is heard on the overhead paging system, heighten awareness, be aware of the location of the fire, do not transport patients, do not use elevators, and listen for the “All Clear” or further instructions.

### 3. CODE “D” (*disaster or mass casualty*)

- Remember to secure patient records (HIPAA).
- Remember to send records with patients.

The disaster plan for Jefferson Regional Medical Center can be found in the:

1. Environment of Care Emergency Preparedness Reference Guide in your department.
2. Emergency Preparedness Manual in your department.

If you do not know where these references are kept, ask your manager or supervisor.

### 4. DR. ARMSTRONG (*response to violent person*)

- To summon assistance, dial 1111 and request that the code “Dr. Armstrong” be announced.
- When announcement is heard on overhead paging system, personnel will respond to the area announced. A team leader will be selected and instructions given.
- Response levels: (a) utilize verbal de-escalation techniques, (b) request assistance of departmental personnel, (c) summon hospital security, (d) activate emergency buttons, and (e) restraint team response, “Dr. Armstrong”

### 5. CODE 99 (*Cardiac arrest*)

- Dial 1111 and request Code 99 be announced.
- When announcement is heard on overhead paging system, trained emergency medical assistance responds to area announced.

6. **CODE 99/PALS** (*Pediatric cardiac arrest*)
  - Dial 1111 and request Code 99 PALS be announced.
7. **CODE 98** (*Cancels code 99*)
  - Dial 1111 and request Code 98 be announced.
8. **CODE ICE** (*Malignant Hyperthermia*)
  - Dial 111 and request Code ICE
9. **CODE YELLOW** (*Hostage Alert*) **or**  
**CODE YELLOW/AMBER ALERT** (*Child Abduction*)
  - Dial 1111 to announce Code Yellow.
  - When announcement is heard on overhead paging system, respond according to hostage/abduction plan.

**To know what to do for these announcements, consult your department Emergency Preparedness Reference Guide (flip chart) or your Emergency manual.**

### **Security**

The security staff responds to emergency and routine needs, promotes positive guest and employee relations, valet/shuttle services, and lost/found. A 24 hour security staff is assigned to JRMC. Call x5072 for assistance. The Chief of Security's number is (412) 469-5936.

## **V. ENVIRONMENT OF CARE**

JRMC employees should not operate equipment they have not been trained on. Contact your department supervisor regarding operation training. Every critical system has a backup. Emergency outlets are the red outlets.

All **medical equipment** is inventoried and tagged by Clinical Engineering with an asset number and, as mandated by industry standards, is on a scheduled preventative program. Use the asset number when communicating problems. All **medical equipment problems** are to be reported to Clinical Engineering (x5046 Monday - Friday daylight). Tag broken equipment and deliver or call Clinical Engineering. If this is critical equipment, contact the operator and have the on-call technician paged.

**Nurse call, fire alarms, and medical gas system alarms** are reported to maintenance (x5074). If no one is available and you have an emergency situation, all employees are authorized to shut-off the medical gas. A medical gas shut-off is made by nursing in conjunction with either the Fire Department, the Corporate Safety Officer, or a Facilities Management Representative. For department specific instructions refer to your Environment of Care (EOC) flip chart.

**Utilities Problems:** contact Maintenance (Monday-Friday daylight x5074, off hours, use pager x7044). Utilities can be "in the process of failing", be proactive, contact Maintenance if you suspect a problem.

**Chemical Spills:** Refer to Material Safety Data Sheets (MSDS) for chemical spill instructions. If you do not know the location of the Material Safety Data Sheets (MSDS) in your department, ask your manager or supervisor. If you require outside help (Monday-Friday, daylight), contact Risk Management, (412) 469-7043. If unavailable, call the operator using the emergency 1111 number.

## **VI. CELL PHONES**

Cell phone usage is not permitted within 10 feet of any electronic medical equipment. This includes, but is not limited to, cardiac rehab, emergency, patient care floors, ultrasound, CHF clinic, women's center, laboratory, and EEG & Sleep lab, to name a few.

The same guidelines apply to emergency cell phones, 2-Way radios, cellular blue tooth wi-fi devices, blackberries, and other equipment utilizing cell technologies. Cell phones must be off when entering restricted areas. Cell phone cameras are not to be used within the hospital for HIPAA privacy concerns.

## **VII. INFECTION CONTROL**

Infection Control is everyone's responsibility whether you work in an office setting or you are involved in direct patient care activities. Simple measures like cleaning keyboards and telephones with hospital

approved disinfectant wipes and performing hand hygiene often through the day are key to protecting yourself and your co-workers. Your basic knowledge will help you protect yourself and others.

## 1. Hand Hygiene

Hand hygiene is important not just at work, but also in your life. When your hands are soiled, wash them with soap and water for at least 10-15 seconds. The correct way to do this is: (1) push or roll down paper towels, (2) turn on the water, (3) apply soap and vigorously clean all the surfaces of your hands including nail beds and rings (sing "Happy Birthday" to yourself twice for the correct timing while doing this), (4) rinse your hands and let the water run, (5) dry your hands with paper towels, (6) turn off the faucets with the paper towels. Discard the paper towel, or use it to open the bathroom door handle before leaving.

**Alcohol hand sanitizers** can be used when hands are not visibly soiled. These sanitizers are located outside each patient room, near the grill in the J Café, and in strategic areas of the hospital.

**Always perform hand hygiene** after using the bathroom, touching common items that many other people touch, removing gloves, using Kleenex or tissues, coughing or sneezing into your hands, before you eat or drink, and before entering any patient room

**Artificial nails and nail wraps** are prohibited for direct patient caregivers. Also, **commercial hand creams and lotions** are not permitted for use by direct patient caregivers. These products contain mineral oil or petroleum, which microscopically break down latex and other exam gloves integrity very quickly. The exam gloves are rendered not protective by these products and place you at risk.

## 2. Isolation Practices

All patients at JRMC are treated using Standard Precautions. The old terminology for Standard Precautions is Universal Precautions. Standard precautions means:

- *Wearing gloves when in contact with any patient's blood and/or body secretions or excretions.*
- *Wearing a gown if soiling of your clothing is possible.*
- *Wearing a face mask if you have a cold or if the patient is likely to spew secretions towards your mouth and nose.*
- *Wearing goggles or a fluid shield facemask when a patient's secretions or excretions are likely to be aerosolized at your face.*
- *No eating or drinking in work areas where blood and/or body fluids may be placed or areas of high contamination (computers, phones, charts, etc).*
- *No application of cosmetics, lip balm or lipstick, or handling of contact lenses in areas where blood and/or body fluids may be placed or areas of high contamination (computers, phones, charts, etc).*
- *Clean all common equipment with disinfectant between uses.*
- *Teach all visitors to perform hand hygiene before entering a patient room and when leaving the patient room.*

It is your responsibility to anticipate your potential exposure and to protect yourself from that exposure by utilizing Standard Precautions with every patient. All sizes of gloves will be provided in every patient room. Gowns, face masks, and goggles are available on every stock cart in the hospital.

In addition to Standard Precautions, more **formal types of isolation** are used for specific **infectious diseases**. They are airborne isolation, droplet isolation, resistant organism isolation, contact type 1 isolation, contact type 2 isolation, strict isolation, stop see nurse isolation, and neutropenic precautions.

**If you have questions** pertaining to Standard Precautions or Blood & Body Fluids, ask your manager/supervisor or call the Infection Control Department at (412) 469-5188. To reach the Infection Control Nurse on off shifts, weekends, or holidays call the hospital operator.

## VIII. OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION (OSHA)

### 1. Exposures

Bloodborne pathogens are Hepatitis B, Hepatitis C, and Human Immunodeficiency Virus (HIV). The JRMC Infection Control Manual deals with all of the specifics of how JRMC complies with


the law to protect you as a healthcare worker. However, you are also responsible for points in the law yourself.

You are obliged to protect yourself from exposures by:

- *Receiving Hepatitis B vaccine in a series of three injections, given at 0, 2, and 6-month intervals. You must complete the entire series to be immune. This vaccine is offered free of charge for any employee who may potentially have contact with patients, blood and/or body fluids through Employee Health at x5808.*
- *Wearing personal protective equipment when exposure to blood or body fluids potentially containing blood is anticipated.*
- *Engaging all safety devices before proper disposal (all sharps and syringes are disposed of in rigid containers).*

If you have a puncture or splash to your face involving mucous membranes, you must notify your supervisor immediately, complete the appropriate paperwork, **and be seen as soon as possible** at Employee Health or in the Emergency Department. Never delay being evaluated.

## 2. Hazardous waste

The universal symbol for hazardous or infectious waste is . Hazardous waste is defined as blood or items contaminated with visible blood. Hazardous waste is disposed of in three ways at JRMC. First, rigid sharps containers are used for any sharp item including needles, all syringes, glass vials, lancet devices and any item that may puncture another person. Second, red plastic bags are used to contain drapes and bulk items that are heavily soiled with blood or body fluids laced with blood. Third, suction container contents are solidified (and are not emptied) before disposal with solidifying agents. Items with visible blood or sharps are never disposed of in regular trash.

## IX. FEDERAL FALSE CLAIMS ACT

The Federal False Claims Act applies to the submission of claims by health care providers for payment by Medicare, Medicaid, and other federal and state health care programs.

The Federal False Claims Act prohibits, among other things:

- *Knowingly presenting, or causing to be presented, to the federal government a false or fraudulent claim for payment or approval.*
- *Knowingly making or using, or causing to be made or used, a false record or statement in order to have a false or fraudulent claim paid or approved by the government.*
- *Conspiring to defraud the government by getting a false or fraudulent claim allowed or paid.*
- *Knowingly making or using, or causing to be made or used, a false record or statement to conceal, avoid, or decrease an obligation to pay or transmit money or property to the government.*

If anyone has knowledge or information that any such activity may have taken place, they should notify his or her supervisor or call the Compliance Hotline (412-267-6333). Information may be reported to the hotline anonymously. In addition, federal and state law and our policy prohibit any retaliation or retribution against persons who report suspected violations of these laws to law enforcement officials or who file “whistleblower” lawsuits on behalf of the government. Anyone who believes that he or she has been subject to any such retribution or retaliation should also report this to the Compliance Hotline.

## X. STAFF REQUESTS FOR NONPARTICIPATION IN CARE DELIVERY

JRMC does recognize the potential for conflicts to arise between an employee’s cultural, ethical, and personal religious beliefs and the care they are expected to provide. Specific aspects of care or treatment that may cause conflicts, especially those relating to the care of the terminally ill, could be as follows: withholding/withdrawing treatments, the administration of blood transfusions, medication or tube feedings, ventilator care, dialysis or performing CPR.

The employee’s request not to participate in an aspect of care or treatment, based on a perceived conflict, **must be submitted in writing** to their immediate supervisor and/or department manager with a copy to the vice president of human resources. This written request shall delineate the specific aspect of care and the reason there is conflict with this aspect of care. Refer to policy #30-700 for further information.

## **XI. RESOLVING ETHICAL DILEMMAS**

The primary function of Jefferson Regional Medical Center is the treatment and prevention of disease in the patients it treats. Patients have the right to considerate care that protects their dignity and respects their personal values, including cultural, psychosocial, and spiritual values. The values held by the patient, patient's family, physician, or the hospital may come into conflict. Ethical concerns are especially difficult when they involve decisions about foregoing life-sustaining treatment, but they may also arise when decisions need to be made about diagnostic tests or other treatments. Dilemmas may arise for staff in carrying out their duties such as questions regarding how to respond to a patient who is refusing a procedure, how to respond to a confused patient, or when and how to discuss decisions about resuscitation.

Resources for Staff: Director of Spiritual Care (412-469-5856), Social Services Department Director (412-469-7556), Patient Representative (412-469-5178).

## **XII. SPIRITUAL CARE**

The Spiritual Care department (412-469-5855) is available to assist patients and families with emotional/spiritual needs, distressing diagnosis or prognosis, when the patient or family has to make difficult decisions regarding treatment, a tough patient/family, or if an employee is having a stressful day or a "hit the wall" moment. The Spiritual Care department can assistance with completing **Advance Directives**. Local priests provide non-emergent Sacrament for the Sick and share daily responsibility for emergent Catholic sacramental needs since there is no assigned priest at JRMC. If a patient has previously been anointed, but the patient/family insists upon receiving the Sacrament of the Sick, you can offer to contact their parish priest or to page the chaplain.

The chaplain is in the hospital Monday - Friday, 8 a.m. to 4 p.m. and is also available for emergencies, on pager (412-263-7126), 7 days a week. Calls between 11 p.m. and 5 a.m. should be for dire situations.