Established in 1892, our mission is
To excel at the delivery of
health care to our community.

Orientation Guidebook
For Agency Personnel, Vendors, Contactors,
Nursing Schools, and Allied health Professional
Staff

January 2014
Dear Agency Personnel,

On behalf of all the employees, medical staff and volunteers at Huntington hospital, welcome to our organization!

We have been providing the finest quality service to our community for over 100 years, making us the first choice for health care in the San Gabriel Valley.

Our hospital was built upon our core values, and they remain strong today. These values—respect, integrity, excellence, and stewardship—are reflected in every thing that we do. Our fine reputation throughout the community is based upon the quality of care we provide to our patients and visitors every day and the extraordinary level of customer service practiced by our employees.

As we continue to build upon the successes of our organization, we look to you and all our employees to contribute by sharing your ideas and enthusiasm, and by conducting yourself in an ethical and professional manner.

Welcome aboard!

Sincerely,

Stephen A. Ralph
President and CEO
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Welcome!
This booklet is designed to help orient you to some of Huntington Hospital’s policies and procedures.

All agency nurses, nursing students, Faculty and any Allied Health Professional staff are expected to fully comply with Huntington hospital Standards of Care/Practice and policies and procedures. You are required to read the Huntington Hospital Orientation Guidebook and sign the Orientation Checklist form before beginning an assignment at Huntington Hospital. The review the policies and procedures on our intranet, please access the Huntington Hospital web page called SharePoint.

We are happy to answer any questions you may have, so please do not hesitate to ask. The department Manager and Patient flow Coordinator (PFC) on the unit to which you are assigned are available as a resource for you.

While working at the hospital, agency staff must comply with all applicable state and federal laws and regulations, including Joint Commission standards, HIPAA, all applicable hospital policies and procedures, by-laws, and rules and regulations.

Private Duty Agency Nurses
If you are a private duty agency nurse please follow these guidelines:

- You may not administer medications, perform any patient treatment, or document in the medical record.

- You may provide comfort measures and assist the patient with ADLs only.
Notes

Agency Personnel Orientation Objective

By reviewing this Guidebook, you will have obtained the following:

- An overview of Huntington Hospital values, mission vision and strategic plan
- A personal reference tool to locate and access basic hospital resources
- A cross-functional peer network
- A working overview of Huntington Hospital Standards of Conduct
- A basic Knowledge of house-wide safety and infection control practices
- A working knowledge of Huntington Hospital’s Customer Service Standards
Our History

120 Years Ago
In the winter of 1982, a group of community citizens formed the nonprofit Pasadena Hospital Association. Using temporary headquarters, the nonprofit group admitted patients and was supported by donation, membership dues and patient fees. In 1899, a nurse’s monthly salary was $70; the janitor’s was $20 per month and lodging.

In 1902, enough funds were raised to open a permanent 26-bed facility — the Pasadena Hospital Association. For the next 30 years, the hospital grew to include medical and administrative areas, nurse housing, a maternity wing, a power plant and laundry, and the hospital’s first x-ray equipment.

Becoming Hunting Memorial Hospital
During the Great Depression of the 1930’s, local residents and the hospital faced financial difficulties. An astute superintendent discovered a little-known clause in the will of the late Henry Huntington that provided a 2 million gift to any hospital in Los Angeles willing to name itself after his uncle and son. The superintendent successfully petitioned the courts, and in 1932 the Pasadena Hospital became known as the Collis P. and Howard Huntington Memorial Hospital.

In 1964, we built the Wingate Building, with one of the country’s first ICU units. From then through the mid-1980s, the Valentine and Han Buildings were constructed, and we performed the first open-heart surgery in the west San Gabriel Valley. In 1982, we merged with LA Viña Hospital of Altadena and the La Viña Building was established.

In 1985, a 4-phase building replacement project was begun to meet seismic standards. Phase 1 created new homes for the

Agency Personnel Guidebook

Violate any State and Federal Privacy regulations which include the sharing of any “personally Identifiable Information,” as defined above.

If an Agency Personnel dissatisfied with any aspect of the hospital’s operation, the Agency Personnel is encouraged to bring those concerns to Human Resources, so that the concerns may be addressed. Agency Personnel have ethical and other obligations to keep confidential proprietary and other information about the hospital.

Penalty for Violation: Agency Personnel violating this policy will be made a “Do Not Send”. Accordingly, Agency Personnel who have questions or uncertainty about SharePoint or Social Media usage in general are urged to consult with Human Resources or our Compliance Officer concerning the scope and application of this policy.
Social Media

Definitions:

Social Media: The phrase “Social media” refers to online communities and technologies/tools intended for the creation and sharing of user-generated content and information, and the engagement of personal and professional networks in conversations within those communities. Types of social media destinations include blogs, wikis, podcasts, video sharing sites, business review sites, and social networks. Examples of popular social media destinations include Facebook, Twitter, LinkedIn, MySpace, Yelp, Flickr, dig, and YouTube.

Personally Identifiable Information (PII): PII can be any information that may directly or indirectly be used to identify a patient or employee, and does not have to expressly refer to that person by name. Any information that can be used to uniquely identify, contact, or locate a single person or can be used in conjunction with other sources to uniquely identify a single individual is considered “Personally Identifiable Information.”

Use of Hospital Resources: hospital property, including but not limited to internet access, computer hardware and software, and SharePoint may not be used by an employee for social media activities without the express prior written consent of the Hospital.

“Off-Hours” or “Off-Campus” Social Media Usage: Except as permitted by law, no hospital employee or Agency Personnel may post, via any social media channel, whether during working hours and in the office or elsewhere at any other time, information or comments that:

- Are unlawfully discriminatory or harassing;
- Are unlawfully defamatory or disparaging of the Hospital;
- Are protected by the attorney/client privilege or work-product doctrine; or that reflect a lack of professionalism as a Hospital Employee.

Huntington Today

The hospital is a non-profit medical center licensed for 636 beds with extensive inpatient and outpatient services, teaching and community outreach programs.

We continue as a nonprofit community hospital, now providing comprehensive medical care and community services, including:

- Extensive emergency, trauma care, and surgical capabilities including minimally invasive surgery
- Full-service women’s and children’s health programs
- Comprehensive radiology services
- The Huntington Hospital Cancer Center and Huntington-hill breast center
- Cardiology and Rehabilitation services
- Della Martin Center for Behavioral Services
- Senior Care Network and education programs.
- Pasadena Community Urgent Care Partnership

In addition, we maintain a research and treatment center for sleep disorders and are a teaching affiliate of the university of Southern California School of Medicine.

You Are A Part Of Our Future

Much of who we are and will become is due to the generosity of our community members. Our obligation is to continue providing the highest level of care and to leave our hospital in a better condition than when we found it. Every person who works here is part of our history, and we entrust you to help us contribute to our continued
Who We Are at Huntington Hospital

Our Mission
Our Mission statement expresses who we are and our purpose as an organization.

At Huntington Hospital, our mission is to excel at the delivery of health care to our community.

Core Values
Our values express how we do things as an organization to accomplish our mission and guide our decisions.

Respect
We affirm the rights, dignity, individuality and work of each person we serve, and of each other.

Integrity
We honor the commitments that we make, believe in fairness and honesty, and are guided by our ethics.

Stewardship
We wisely care for the human, physical and financial resources entrusted to us.

Excellence
We strive for excellence, quality and safety, and we are committed to providing the best care, work environment, and service possible.

Our Vision
Our vision states where we want to go.

To become the finest community-based, regional Medical center in Southern California.

Cerner
Cerner is a computer format we use for order entry, patient documentation, billing, pharmacy, human resource and many other management functions. Implemented in 2013, the system is upgraded regularly to keep us current and efficient.

Patient Charts
We will use conventional patient charts, but most of the patient data is stored in electronic format, allowing multiple users simultaneous access to medical records.

Several aspects of the patient chart still remain in hard copy in many departments, such as the following:

- Physician Orders
- Photo or diagrams
- Valuables
- Some consents & Checklists

Cerner Practice Program
Cerner features a training region. If you want to practice charting, please contact the training Assistant in workforce Development at ext. 2020 for more information and assistance.
Computer Systems

SharePoint

Huntington Hospital's intranet, referred to as SharePoint, is a vast resource of up-to-date hospital information, including the following:

- Policies and Procedures
- Department Information
- Micromedex
- Joint Commission Information
- Hospital Map
- Cafeteria Menu
- Compliance Hotline
- MSDS
- Bee Safe Event Reporting

To access SharePoint, simply double click on the internet explorer icon on the desktop. Alternately, you can access via the start menu, under Programs.
Chain of Command

(Administrative Policy & Procedure Manual, #007)

The Chain of command is a safe and standardized mechanism for all HH employees to communicate knowledge about any situation, which may cause harm to a patient or information about an administrative issue.

Before initiating the Chain of command, please discuss your concerns with the caregiver or staff member involved. Results are best for employees and patients when a problem or concern is resolved closest to the concern or event.

If you are still concerned and cannot reach a satisfactory resolution, please initiate the appropriate Chain of Command.

Your Responsibility

It is your duty to take action when you have a concern. Be sure to discuss and develop a working knowledge of the chain of command in your department with your supervisor.
You can assist in preventing workplace violence by:
- Watching for warning signs.
- Listening to your intuition.
- Reporting anything that doesn’t seem “right” to Human Resources or Security.

**Meal/Rest Periods**
All Agency Personnel are entitled to a 30-minute unpaid meal period for every work period in excess of five hours, and two paid 10 minute rest periods. Agency Personnel who work more than ten hours are entitled to two meal periods, unless they choose to waive one of the two meal periods, and three paid 10 minute rest periods. Meal periods are unpaid if the Agency Personnel is relieved of all duties and is free to leave the premises. Meal periods will be paid if Agency Personnel has agreed with the hospital, in writing, to work an on-duty meal period. Refer to your Agency Personnel contract.

**Key Telephone Numbers & Resources**

**My Department Information**

- My Extension
- Department ext.
- Orientation Guide
- Manager
- Director
- VP

**Other Information**

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Our Resources

<table>
<thead>
<tr>
<th>Position</th>
<th>Name</th>
<th>Extension</th>
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<tbody>
<tr>
<td>Compliance Officer</td>
<td>Terence Ou, ext. 5335</td>
<td></td>
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<tr>
<td>Compliance hotline</td>
<td>(866) 311-4231</td>
<td></td>
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<tr>
<td></td>
<td>(Confidential Reporting)</td>
<td></td>
</tr>
<tr>
<td>Infection Control</td>
<td>Jacqueline Cocker, ext. 5138</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Josue Barbosa, ext. 5304</td>
<td></td>
</tr>
<tr>
<td>Safety</td>
<td>Donna Hansen, ext. 2021</td>
<td></td>
</tr>
<tr>
<td>Security</td>
<td>Hal Wardell, ext. 3790</td>
<td></td>
</tr>
<tr>
<td>Quality</td>
<td>Edna DeLeon, ext. 3391</td>
<td></td>
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<tr>
<td></td>
<td>Jean Irizarry, ext. 3391</td>
<td></td>
</tr>
<tr>
<td>Risk Management</td>
<td>Farnaz Datomi, ext. 3383</td>
<td></td>
</tr>
<tr>
<td>Customer Relations</td>
<td>Debora Jackson, Ext. 5211</td>
<td></td>
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<tr>
<td>Facilities</td>
<td>Rene Guadez, ext. 5267</td>
<td></td>
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<tr>
<td>Hospitality</td>
<td>Alexandra Vargas, ext. 2639</td>
<td></td>
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<tr>
<td>Biomedical Equipment</td>
<td>Jesse Lopez, ext 8680</td>
<td></td>
</tr>
<tr>
<td>HR Business Partner</td>
<td>Ellen Henderson, ext. 2367</td>
<td></td>
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<tr>
<td></td>
<td>Sharon Klun, ext. 2237</td>
<td></td>
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<tr>
<td></td>
<td>Dorinda Perry, ext. 3390</td>
<td></td>
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<tr>
<td>HR &amp; Employment Services</td>
<td>Robert Hamilton, ext. 5443</td>
<td></td>
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<tr>
<td>Payroll</td>
<td>Amanda Lewis, ext. 3083</td>
<td></td>
</tr>
<tr>
<td>Workforce Development</td>
<td>Lynette Dahlman, ext. 2374</td>
<td></td>
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<tr>
<td>Registry Contracts</td>
<td>Gari Reed, ext. 5194</td>
<td></td>
</tr>
<tr>
<td>Cerner</td>
<td>Help Desk, ext. 5347</td>
<td></td>
</tr>
</tbody>
</table>

On the basis of race, color, religion, national origin, ancestry, physical disability, medical condition, marital status, sexual orientation age or sex, including sexual harassment of employees or applicants in any form.

Huntington Hospital does not tolerate verbal, physical or visual conduct by any employee, physician, volunteer, vendor, patient or visitor which sexually harasses, disrupts or interferes with another’s work performance or which creates an intimidating, offensive, or hostile work environment.

Our policy specifically prohibits sexual harassment. Management has a responsibility to maintain the workplace free of any form of harassment and to investigate any allegation of inappropriate conduct when such conduct is reported.

Any Agency Personnel who believes that the actions or words of supervision or a fellow employee constitute harassment has a responsibility to report as soon as possible to management, or if the employee prefers, to Human Resources. All complaints of harassment are investigated promptly and in an impartial and as confidential a manner as possible by Department Management and Human Resources.

**Violence-Free Workplace**

We are committed to providing an environment conducive to the health and safety of its employees and Agency Personnel through prevention of workplace violence. Violence includes, but is not limited to harassment, verbal or physically assaultive behavior, actual or threatened violence by employees against co-workers or other persons, sabotage, stalking, or targeting an individual.

Threats made in jest are considered inappropriate and will be tolerated and could result in discipline for Agency Personnel, up to and including termination of employment.
Attendance
To reach our goal of providing the highest quality of patient care, each employee must maintain regular attendance and must report to work on time.

All Agency Personnel must adhere to attendance and tardiness standards as well as notify their department supervisor/manager or the supervisor/manager’s designee before any and all absences or tardiness. Agency Personnel who display patterns of chronic, excessive, or repeated unexpected absenteeism and/or tardiness will be subject to disciplinary action up to being a “Do Not Sent.”

Licenses
For positions that are required by Huntington Hospital to be licensed, registered or certified, it is the Agency Personnel’s responsibility to provide proof of renewal as it is required.

Without proof of current, valid license, registration or certificate, the Agency Personnel will be prohibited from performing his/her job.

Dress Code
Each Agency Personnel has the primary responsibility for maintain our standards of grooming, dress and hygiene that are consistent with professional appearance. Every Agency Personnel affects the overall image of the Hospital with respect to patients, visitors, the community, and individual work areas. All Agency Personnel are expected to maintain a professional appearance and dress according to the requirements of this policy and to wear their Agency photo I.D. badge above the waist at all times.

Harassment-Free Workplace
Huntington Hospital maintains a strict policy prohibiting any form of harassment, including sexual harassment and harassment of employees, applicants, or Agency Personnel.

Compliance Program
Standards of Conduct
Our Mission and core values are accomplished through a set of standards referred to as our standards of business conduct. These are presented in detail in The Standards We Live By booklet. Please refer to the booklet for more complete information or see policy and procedure #013 entitled “Standards of Business Conduct.”

Key Compliance Issue
At Huntington Hospital, our compliance program focuses on the issues summarized below:

- **Fraud and Abuse:** Any incorrect statements that are made with an intent to gain some kind of benefit, e.g., those associated with providing, charging, coding, billing or being reimbursed for health care services.

- **Conflicts of Interest:** A situation in which an individual is in a position to influence a decision that may result in personal gain for him or her (or for a relative) as a result of business dealings or incentives offered, such as gifts.

- **Privacy and security of Patient Information:** Patient information can be used to provide treatment, receive payment for treatment and for other activities that support the hospital’s operations. Otherwise, the information should be kept confidential.

The Compliance Hotline
Use the compliance Hotline, which is managed by an outside company, to have questions answered or concerns addressed. You can leave an anonymous call if you wish to keep your confidential. The Compliance hotline is available 24 hours a day, 7 days a week.
The Compliance Officer

The compliance officer’s responsibility is to ensure that the compliance program functions to receive questions and concerns about legal and regulatory issues and to address them appropriately.

You may contact the compliance officer directly with any questions or concerns at (626) 397-5335.

Equal Employment Opportunity

The Hospital believes that all persons are entitled to equal employment opportunity and does not discriminate against its qualified employees or applicants because of race, color, religion, sex, pregnancy, national origin, ancestry, citizenship, age, marital status, sexual orientation, or disability. Equal employment opportunity includes recruitment, hiring, training, promotion, transfer, discipline, layoff, and termination, and other aspects of employment.

Furthermore, we do not exclude participation from any Hospital program or activity, deny benefits to or discriminate against any individual solely by reason of his or her disability. We offer equal employment opportunity to qualified disabled persons in all aspects of the employer-employee relationship, and we will provide reasonable accommodation to the know physical or mental limitations of an otherwise qualified disabled employee or applicant.

Drug-Free Work Environment

Huntington hospital maintains an alcohol and drug free work environment to ensure that employees perform their duties safely, productively and efficiently.

All job offers are contingent upon favorable results of the pre-employment drug screening test. Employees and Agency Personnel are not allowed to unlawfully manufacture, distribute, possess or use any drugs and/or alcohol, while on hospital property or while operating any hospital vehicle.
Infection Control Program

The goal of Huntington Hospital’s Infection Control program is to provide a safe and healthy environment for patients, visitors, volunteers, and hospital staff.

Hand Hygiene
Hand hygiene is the single most effective thing you can do to stop the spread of infection.

- Decontaminate hands before and after contact with patients and contaminated surfaces.
- Use either soap & water (minimum 15 sec.) or hand sanitizer
- No artificial nails are allowed on patient caregivers.
- Natural nails must be trimmed to less than 1/4 above fingertips.
- Keep your work environment clean.
- Separate clean and dirty equipment and supplies

Standard Precautions
“Standard Precautions” refers to Huntington’s approach to ALL patients ALL of the time.

- Everyone is potentially contagious.
- Use Personal Protective Equipment when exposure to blood or body fluids is possible.
- Remember this rule of thumb; “If it is wet and not yours, do not touch it or let it touch you.
Transmission-Based Precautions
Read and follow the signs for Contact, Droplet, and Airborne transmission-based precautions posted in your unit.

OSHA TB Standard
- Know the Symptoms of TB.
- Patient must be in a negative-pressure room.
- If contact is possible, get fit-tested for and use the N-95 mask when dealing with patients in Airborne Precautions, as required by OSHA.
- Agency personnel will not care FOR PATIENTS IN THE airborne Precautions Rooms unless they have been fit-tested.

OSHA Bloodborne Pathogen Standards
These standards protect you from Hepatitis B, C and HIV exposure.
- Keep personal food and drink out of the patient care areas—nursing stations, hallways, patient rooms.
- Use sharps safely.
- Dispose of biohazardous waste in covered and labeled containers. Keep containers behind closed doors.

If an Exposure Occurs
Exposures include sharps injuries and splashes or sprays of blood or body fluids onto mucous membranes—mouth, nose, eyes—or non-intact skin.

If an exposure occurs:
1. Notify your supervisor IMMEDIATELY.
2. First Aid treatment for injuries is provided in either Pasadena Community Urgent Care Center or the Emergency Department.

Workplace Policies
The Employee Handbook contains information about the employment guidelines and practices of Huntington hospital. The following key policies are important for all employees to know. You can find complete information on these policies and the Employee Handbook on SharePoint Huntington Hospital's intranet.

- Equal Employment Opportunity #810
- Drug Free Work Environment #840.2
- Attendance #822
- Licenses #850
- Dress Code: #886
- Harassment-Free Workplace #840.1
- Violence-Free Workplace: #813
- Meal Periods: #856
- Agency Personnel #8749.007
- End of Life #8740.057
- Advanced Directives #8740.004
- Restraints: #8740.142
- School of Nursing & Allied Health Affiliating #8740.117
- Patient Identification for Clinical Care and Treatment #8470.117
- Organ Tissue Donation #8740.109
- Pain Management #8740.116
Customer Service: CARE
Our Customer Service philosophy is simple:
**Compassion And Respect to Everyone**

Who are our customers? Everyone and anyone who walks through our doors— including ourselves. We are one, big Huntington Family, and no one is excluded from our CARE.

How Do We Show We Care?
Remember these three bottom-line customer expectations:

- **Value me as an individual**  
  Get to know me and my unique situation.
- **Do whatever it takes to respond to my needs**  
  Use your best judgment to provide me with a great solution (within legal and regulatory guidelines).
- **Leave me in a better place**  
  Make me or any problem better so that I can move on, with gratitude.

Remember the 6 Basic Customer Needs

<table>
<thead>
<tr>
<th>Friendliness</th>
<th>Be genuinely warm and welcoming.</th>
</tr>
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<tbody>
<tr>
<td>Empathy</td>
<td>Acknowledge their feelings; show sensitivity to their situation.</td>
</tr>
<tr>
<td>Fairness</td>
<td>Treat everyone equitably don’t play favorites.</td>
</tr>
<tr>
<td>Control</td>
<td>Allow others to maintain their dignity by sharing control and decision-making</td>
</tr>
<tr>
<td>Alternatives</td>
<td>Offer choices; to get their opinions and feedback.</td>
</tr>
<tr>
<td>Information</td>
<td>Inform others in an open, timely, and relevant manner; confirm understanding.</td>
</tr>
</tbody>
</table>

The agency or school is financially responsible for the cost of the treatment (in the Contract Agreement). Any further treatment required by the health care worker is provided according to the agency policy and procedure or academic institution directive.

3. In the event of Bloodborne pathogen exposure, to be most effective, the medication to prevent HIV must be given within 24 hours of the exposure.

Infection Control Policies and Procedures
Please review the policies and procedures on SharePoint upon reporting to your unit or department as follows:

1. Go to SharePoint.
2. Click on the “Policies and Procedures” section (located about halfway done the page on the right side.)
3. Click on “Administrative Policies and Procedures”
4. Click on “Section 700 — Infection Control.”
5. Choose the policy you need and click on the title. There are 3 tabs, so if you don’t see the one your need, click on the next tab.

Infection Control Staff are available 24/7 through the page operator or at ext. 5138 or 5304.
Don’t hesitate to call with questions and concerns
Patient Safety and Quality Program

What are National Patient Safety Goals?
A list published nationally by The Joint Commission (TJC) of actions to reduce patient injury.

Why are the Goals important?
They are critical because they prevent death and injury, they are the standard of care in the United States and they are TJC requirements, and HH will be assessed by performance of these Goals.

<table>
<thead>
<tr>
<th>The Joint Commission (TJC) National Patient Safety Goals 2014</th>
<th>Huntington Hospital Practice</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Goal</strong></td>
<td><strong>TJC Requirement</strong></td>
</tr>
<tr>
<td>Identification</td>
<td></td>
</tr>
<tr>
<td>NPSG.01.01.01</td>
<td>(Policy 8740.117)</td>
</tr>
<tr>
<td></td>
<td>Two Patient Identifiers are used when:</td>
</tr>
<tr>
<td></td>
<td>- Administering blood products, meds or treatments, or food delivery</td>
</tr>
<tr>
<td></td>
<td>- Specimen containers labeled in pt’s presence</td>
</tr>
<tr>
<td>NPSG.01.03.01</td>
<td>(Policy 8740.185)</td>
</tr>
<tr>
<td></td>
<td>Eliminate transfusion errors related to patient misidentification</td>
</tr>
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</tr>
</tbody>
</table>

Diversity and Cultural Competence

Building Cultural Competence

To live by this rule and be culturally competent, we need information about each other. The way we obtain that information is by doing the following;

- Asking each other for information about our values, beliefs, and ways of doing things.
- Suspending judgment and keeping our minds open to learning
- Telling each other what we want, which sometimes takes courage.
- Honoring our differences and avoiding seeing them as any kind of statement on who we are
- Accepting the reality that we are each unique, each have group identities which we share and don’t share, and allowing each of us to be ourselves.

Being ourselves is the only way we can be and do our best.
Diversity and Cultural Competence

Diversity
It is the policy of the hospital that Agency Personnel should act in accordance with their cultural values, ethics, and religious beliefs in order to preserve their personal integrity.

Accordingly, Agency Personnel have the right to request not to participate in an aspect of patient care, including treatment, where there is a perceived conflict with the Staff members’ cultural values, ethics, or religious beliefs. Agency Personnel shall not be penalized, harassed, or embarrassed for requesting not to participate in the particular care of a patient based on these beliefs.

This policy does not mean the Agency Personnel may refuse to give care based on a patient’s race, religion, or creed. It also does not mean that a staff member may impose their beliefs on a patient or that the request not to participate in an aspect of patient care or treatment will be granted.

- Treat Others As They Want To Be Treated

| Communication | NPSG.02.03.01 (Policy 8740.195) | Report all Critical Test Results within 1 hour to ordering MD as follows:
|               | Timeliness of reporting critical test results and diagnostic procedures | - Notify RN or Physician upon identification of a critical test result
|               |                             | - Document notification in the electronic medical record *(document critical test result, time of notification, and person notified)*
|               |                             | *If ordering MD cannot be reached within 30 minutes, call the Attending MD or Medical Director*
| Medication Safety | NPSG.03.04.01 (Policy 8740.199) | All medications on and off the sterile field must be labeled unless they are immediately administered. Label must include drug name, strength, amount, expiration date when not used in 24 hrs, and expiration time when expiration occurs in less than 24 hrs
|               | Label meds, or solutions in perioperative, procedural or bedside settings | Hospital-wide protocols and policies are utilized for the dosing and administration of anticoagulation medications
|               | NPSG.03.05.01 (Policy 8740.009) | Reduce the risk of harm associated with anticoagulation therapy

- Report all Critical Test Results within 1 hour to ordering MD as follows:
  - Notify RN or Physician upon identification of a critical test result
  - Document notification in the electronic medical record *(document critical test result, time of notification, and person notified)*
    *If ordering MD cannot be reached within 30 minutes, call the Attending MD or Medical Director*

- All medications on and off the sterile field must be labeled unless they are immediately administered. Label must include drug name, strength, amount, expiration date when not used in 24 hrs, and expiration time when expiration occurs in less than 24 hrs

- Hospital-wide protocols and policies are utilized for the dosing and administration of anticoagulation medications

- Reduce the risk of harm associated with anticoagulation therapy
Teamwork Training
Effective teamwork is crucial to doing our work well. Each of us has the power to influence how our team functions. Remember the keys to great teamwork with the acronym C.H.A.R.T.S.

C.H.A.R.T.S.
- **Communication**
  Communication is the glue of teamwork; keep it frequent, clear, and relaxed.
- **Honesty**
  Honesty keep the team informed, aware, alert, and involved. Honesty makes trust possible.
- **Accountability**
  Everyone needs to “own” the purpose, goals, and work of the team, to take responsibility for team success and failure, and to not blame or shame but stay in the game. Everyone needs to contribute and do their best.
- **Reflection**
  Reflection allows the team to discuss performance, generate new ideas, learn from mistakes, and grow. Reflection must not be about personal attacks, but about feedback for improvement.
- **Trust**
  To work well together, team members must trust one another—their skill levels, integrity, commitment and accountability. Team members must be interdependent, and that requires trust.
- **Spirit**
  A team’s energy is its spirit, which manifests itself in feelings such as pride, fun, and the power to achieve great things.

Remember, help your team work together in a positive, productive, and enjoyable manner every day.
Abuse and Neglect,
Abuse can happen to anyone, and all employees are responsible for reporting abuse.

Trust your instincts and report it even if you only suspect abuse. Report it immediately to the patient’s RN, doctor, Social Worker or your Supervisor. Remember it is confidential. Reporting abuse begins a discussion so we can help improve the lives of our patients and their families. Refer to Abuse and Neglect Policy and Procedure, #101.

Types of Abuse
- Physical
- Sexual
- Emotional
- Neglect
- Exploitation

Blood donation Program
We use 14,000 blood products annually, and as our census increases so will our need. Blood only lasts for 35 days, so we must continually renew our supply to ensure the safety of our community.

At Huntington Hospital, few than 1% of all employees donate. Your gift can save two or more lives. Our patients, family, and community need your ongoing support.
**Suicide Risk Prevention**

| NPSG.15.01.01 (Policy 8740.161) | Conduct suicide risk assessment on all patients being treated for chief complaint or primary diagnosis of emotional or behavioral disorder
- Know the triggers for obtaining an in-depth suicide assessment by the DMC staff
- Obtain order for Psychiatric Evaluation (5150 Evaluation) by a DMC Liaison (reassess as needed)
- Provide a safe environment for those identified at risk (Call for a 1:1 Observer)
- Provide suicide hotlines and other appropriate information to patient/family which is given by the DMC Liaison and/or Social Worker at any time during the admission, including in ED, in the hospital or in DMC |

| Universal Protocol (Policy 8740.192) | Follow the Universal Protocol
- Complete the Pre-Procedure check list for all patients having invasive or surgical procedures
- Conduct a pre-procedure verification process
- Mark the procedure site (Proceduralist to perform marking)
- Conduct a final verification “time out” immediately before starting a procedure |

**Universal Protocol**

*Properly dispose of sharps after use*
*Always report slip or trip hazards.*

**Hazard Reporting**
Report all safety hazards immediately. Use the online Bee Safe Event Reporting system. Call ext. 2727 and complete an Unsafe Condition Report form.

**Smoking Standards**
Smoking is **NOT** permitted anywhere on campus. This includes sidewalks and parking lots.

**Security Services**
Security services include Management of Aggressive Behavior (MOAB) training, canine (K-9) and bicycle patrols, around-the-clock escorts, and vehicle assistance. Contact security at ext. 5282. In case of an emergency, dial 6#. Emergency Kiosks are located in parking structure and lots.

**You can help**
Here are a few ways you can help:
- Increase awareness when a Code is called.
- Be aware of your area and report suspicious people.
- Lock up valuables, both yours and your patients.
- Have a parking hangtag on your vehicle.
- Wear your ID badge on the upper part of your body, with photo facing out.

Working together, we can help keep ourselves, each other, and our patients and visitors safe.
Utilities
Red outlets or switches indicate equipment which is supplied by emergency power. Medical gas can be turned off by authorized personnel only, including our Facilities staff. Instructions are located next to the valve.

Medical Equipment
Power cords or plugs are not to be used if frayed or wires are exposed. Medical equipment must have a current “inspection label.” Please check the label each time you use equipment. No extension cords are permitted in patient-care areas.

Incoming medical equipment is inspected by the Clinical Technology Department. Patients bringing in their own equipment must have their equipment inspected by Clinical Technology.

Workplace Injuries
If a workplace injury or exposure occurs, report it to your department manager immediately and proceed to Employee Health with the required paperwork for evaluation and treatment. Employee Health is located on the ground floor, Wingate building. If the injury or exposure occurs after the normal business hours, your Manager will refer you to PCUC or the ED.

Keys to Preventing Injuries
- Think First
- Use proper body mechanics
- Push, don’t pull, and never twist and lift.
- Ask for help if you need it.
- Use transfer belts or lumbar supports and our patient lifting equipment.
- Conduct ergonomic assessments.
- Use lift or transfer equipment when appropriate under direction of unit staff.

Other Patient Safety Strategies at Huntington Hospital
In addition to implanting National Patient Safety Goals, we also pursue the following activities:

- We participate in the Joint Commission Survey and strive to be continuously ready for an unannounced Survey. We need to demonstrate safe practice in our patient care at all times.
- We have Performance Improvement Teams to achieve quality excellence, such as our Medication Use Team.
- We have a Failure Mode & Effect Analysis (FMEA) Team that assesses risk and prioritizes improvements in our systems and operations, such as our “safe Delivery of food to Pediatric Patients” 2006 team.
- We have a root Cause Analysis (RCA Team that analyzes the root cause of a problem after its occurrence.
- We track Core Measure Indicators, which are certain disease categories targeted by Joint commission for improvement. The Core Measures are: — Emergency Department Indicators.
- We have a Patient Safety Plan that augments our safety policies and procedures. The Patient Safety committee guides the patient safety activities in the hospital.
- We have a Lean Six Sigma Quality program.
Reporting Events, Problem, or Injuries

The Risk Management team at Huntington monitors and analyzes any safety- and care-related events. They want to hear from you if you have been involved in an event or “near miss” or have discovered one. These events are defined as follows:

- **Good Catch or Near Miss:** This is defined as an unusual event that does not result in a negative patient outcome but has a high risk of recurrence with potential adverse patient outcome. Report good catches immediately.

- **Event (Or Incident):** This is any event or condition that is not consistent with the normal or usual operation of the hospital or department, resulting in patient or visitor injury or property damage.

Report events or near misses through the following mechanisms:

- An online Event Reporting System called Bee Safe
- Hotline at extension 2727
- Generic Event Report Form (Orange) for departments with limited or no computer access

Utilize your Chain of Command (refer to p. 40) when you have a patient safety issue or concern. We are all responsible for patient safety and have a duty to speak up.

For More Information about our Quality, Patient Safety and Risk Management Programs:

- Contact your immediate Supervisor.
- Contact the Quality Management Department, ext. 3785
- Contact the Risk Management Department, ext. 2090.

Fire Procedures

In the event of a fire, follow the R.A.C.E. procedures:

- **RESCUE** people from immediate area.
- **ALARM** by activating the alarm pull boxes, calling 6#, and alerting co-workers in the area.
- **CONFINE** the fire by closing doors.
- **EXTINGUISH** the fire if safe or **EVACUATE** if appropriate.

Also remember:

- Fire drills are conducted in inpatient and outpatient areas. Ask your supervisor what to do during drills.

Fire Extinguishers

Learn the location of the alarm pull boxes and fire extinguishers in your area. Follow the P.A.S.S. method:

- **PULL** the pin.
- **AIM** at the base of the fire.
- **SQUEEZE** the top handle or lever.
- **SWEEP** from side to side until the fire is completely out; ensure that is does not re-ignite.

Hazardous Materials

These materials include chemical, biological and radioactive material. Material Safety Data Sheets (MSDS) are located on SharePoint. If exposed to a hazardous material, do the following:

1. Wash off your skin or eyes with water.
2. Report to Employee Health or the ED.
Code Silver
Armed Intruder/Hostage Situation
Seek cover or protection. Warn others. Call 6#.
Give operator information as above. If you hear Code Silver called, do not enter the area identified.

Code Orange
Hazardous Material Spill
Alert people in the area to stay away and call out Code Orange. Remove all people in the immediate area. Notify your supervisor. Provide decontamination assistance to persons contaminated. Identify the chemical. Review the MSDS sheets. Determine level of response; Level 1 for department resolution; Level 2 for emergency Response Team assistance obtained by calling 6#; Level 3, for outside agency assistance. Call the safety officer at ext. 3790.

Code Triage
Internal Emergency
Hospital Incident Command System (HICS) will be implemented. Refer to the emergency Plan in your unit or department.

Code Triage
External Emergency
Hospital Incident Command System (HICS) will be implanted. Refer to the Emergency Plan in your unit or department.

Code Trauma
ED Trauma Team
Tier I
Trauma Team Responds to trauma patient arriving to the emergency department (ED)

Tier II

Code AMI
ED Code
Acute Myocardial Infarction or Stroke team responds to an AMI patient in Ed.

Refer to the Quick Reference Guide posted by your desk for more detailed information. Also consult with your desk for more detailed information. Also consult with your supervisor or with your Safety Officer at ext. 2021.

If you continue to have concerns, you can report issues directly to Joint Commission at [www.jointcommission.org](http://www.jointcommission.org).

Remember that we have a non-retaliation, no-retribution policy, so no disciplinary action will be taken against you for calling us or Joint Commission. Quite the contrary, we appreciate the time, concern, and care you give to matters of health and safety here at Huntington Hospital.
Environment of Care: Safety and Security

Huntington Hospital wants you and all other persons on the camps to be safe. Our environment of Care program, which implements house-wide safety and security systems and activities, strives to:

- Reduce and control environmental hazards and risks.
- Prevent accidents and injuries.
- Maintain safe conditions for patients, staff, and others.
- Maintain an environment that is sensitive to patient needs for comfort, social interaction, and positive distraction.
- Maintain an environment that minimizes unnecessary environmental stresses for patients, staff, and others.

Hospital Emergency Codes

Refer to the Environment of Care Quick Reference Guide for Emergency Procedures and to your in-unit (or department) safety training.

On the following pages is a summary of our codes.

- **Code Red**  
  Fire  
  Remember to follow RACE steps of RESCUE people, ALARM activation, COFINE the fire by closing doors, and extinguish if safe or EVACUATE.

- **Code Blue**  
  Medical Emergency  
  A medical team responds to a patient who is experiencing a cardiopulmonary arrest. Patient is pulseless.

- **Code Rapid Response**  
  Medical Emergency  
  A Medical team responds to a call for emergent help to medically evaluate a patient.

- **Code Pink**  
  Infant Abduction  
  All hospital staff should be alert for any suspicious persons or vehicles around the campus and parking structures.

  If the abductor with the infant is observed, staff should follow the person and detain them by talking or offering assistance and notify security immediately by dialing 6# with the location and any information.

- **Code Purple**  
  Child Abduction (pediatrics)  
  Follow the same procedures as with a code Pink.

- **Code yellow**  
  Bomb Threat  
  Call 6#. Do not touch any suspected object. Search your area systematically from three levels; below waist level, from waist to top of head, and from head to ceiling.

- **Code Gray**  
  Combative Person  
  Call 6#. Give operator your name, department, and extension, location of situation, and brief description.