Valley Children's Healthcare

Facility Orientation Guide





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Overview

Welcome to Valley Children's! As a non-employee worker, vendor personnel, student, or intern on assignment at our facility, it is essential that you contribute to our mission to provide quality pediatric healthcare. While on assignment, you are responsible to be compliant with Valley Children's policies, as well as Joint Commission on Accreditation of Healthcare Organizations, Title 22, and other regulatory agencies.

Purpose of This Guide

To ensure a safe and caring environment for patients, families, visitors, employees, and physicians, it is essential that you become familiar with and support Valley Children's policies, procedures, and programs outlined in this guide. It does not replace the contract established by your company or any standards that have been established between your company and Valley Children's Healthcare.

Instructions for Using This Guide

- 1. Carefully study each section.
- 2. Discuss any questions you have regarding this material with your company supervisor or with your hospital-assigned department supervisor.
- 3. Print and complete the Facility Orientation Guide Post Test on pages 39-40.
- 4. Print and sign the Facility Orientation Guide Acknowledgement on page 41.

Patient Safety or Quality of Patient Care Concerns

Report safety & quality of care concerns to Joint Commission toll free: 1-800-994-6610 or 1-630-792-3007



Our Culture

Our **Mission** guides us as we travel the road to our future alongside staff, physicians, children, families, our community and our partners throughout the region.

Our **Vision** captures the path we've traveled and showcases our commitment and passion to be the best.

Our Goals demonstrate we are committed to a consistent strategic planning process.

Our Values guide every decision and define our commitment and the actions supporting it.



Our Best

Our Best encompasses all of Valley Children's core beliefs and is exhibited through our Motto, Credo, Steps of Service and Values. Everyone throughout our network, regardless of role or position, is accountable for living up to 'Our Best' in their daily work and every interaction to help us provide the best possible service – internally as well as externally – and achieve our mission and vision. *Did you bring your best today*?

Motto

Our motto - We bring our best, knowing children are counting on us - helps guide and motivate us to bring our best every day.



Credo

Our credo is our belief. It outlines who we are, what we strive for and what we are trying to create:

Valley Children's Healthcare is the trusted champion for all children. We commit to excellence in everything we do.

We create a family-centered experience with compassionate care that comes from the heart.

Steps of Service

Our Steps of Service identifies the steps needed to engage in every interaction as having a beginning, middle and an end to create consistency as we engage with each other, our patients and our families.

- 1. Connect Genuinely
- 2. Own the Experience
- 3. Close Sincerely

Values





Pulse Check

To continuously reinforce the principles of Our Best, we have our network's daily communication titled *Pulse Check*, with an expectation that every member of Valley Children's Healthcare attends a Pulse Check huddle every day. Pulse Check is an invaluable tool to spread messages, recognize our work and promote communication throughout the network.

Workplace Diversity

Valley Children's is committed to being an organization that seeks and embraces diversity, actively pursues equity, and fosters an inclusive environment. We value diversity across multiple dimensions. We respect and value diverse life experiences and heritages and strive to ensure all voices are heard.

Our commitment is built on an unwavering belief that our differences are our strengths and will bring us closer to our organizational mission to provide high quality, comprehensive healthcare services to children, regardless of their ability to pay, and to continuously improve the health and well-being of children.

- **Diversity** is any dimension that can be used to differentiate groups and people from one another. Diversity is the differences. These differences include national origin, language, race, color, disability, ethnicity, gender age, religion, sexual orientation, gender identity, socioeconomic status, veteran status, political beliefs, and family structures. It also includes work experience, talents, education, personality traits, and perspectives of every member of the workforce.
- Equity means taking steps to remove barriers to opportunities and recognizing different groups of people requires different resources and opportunities. Equity recognizes that everyone doesn't begin in the same place in society. Some people face adverse conditions and circumstances that make achieving the same goal harder. Equity isn't about what's the same; it's about how a person starts. Equity takes historical factors into account when determining what's fair.
- **Inclusion** is creating an environment of belonging where employees feel welcomed, supported, respected, and valued, and provides an environment that encourages them to contribute their best work.

Efforts to strengthen diversity, equity and inclusion (DEI) help us to achieve our mission and vision. Ensuring DEI efforts are in place and practical will help improve communication, increase patient satisfaction, and ultimately deliver higher-quality care. By understanding how DEI affects all, we can improve the workplace culture at Valley Children's and provide better care to our kids. In addition, DEI efforts help us:

- Understand the background of employees and kids we serve, including culture, gender, sexual orientation, religious beliefs and socioeconomic status.
- Ensure healthcare workers have what they need to do their jobs and patients have what they need in and out of treatment settings to effectively benefit from best practices in treatment.
- Give employees and patients a voice to help provide and receive high-quality care and encourage the presence of a diverse healthcare staff in the treatment experience of patients.



Interpreter Services

Providing information and services in the patient's and family's native language is one of the most impactful ways to drive diversity, equity, and inclusion. When an interpreter can assist, it allows for more inclusive representation and participation.

Valley Children's serves the health needs of a diverse population with more than 100 documented languages and 37 distinct cultures. The Interpreter Services Department provides language assistance 24 hours a day and seven days a week for our patients and families. They provide face-to-face service as well as over-the-phone and video interpreting assistance.

The Interpreter Services Department has the following options:

- For in-person face-to-face interpreters, dial "0" or "35300."
- Interpreter services for rare languages or languages of lesser diffusion can be scheduled by submitting an online request on the George Page under Forms.
- Utilize our external vendor, VOYCE, for telephonic services for all other languages by calling #990 from any telephone.

The Interpreter Services department is available any time of the day to assist with questions or concerns by calling ext. 35250 during business hours or dialing "0" after hours.



Personal Guidelines

Personal Safety

Follow these safety guidelines:

- Observe all rules of safety and security
- Always wear identification when at any hospital site
- Report immediately to Security any suspicious people/behavior observed.
- Request a Security escort or go with a group if walking to or from your vehicle after dark or at any time you require additional security (dial extension 35115 for escort service)
- Be aware of what's around you/people behind you/or people taking "particular interest" in you.

Standards of Conduct

All non-personnel providing services on behalf of Valley Children's must conduct themselves in accordance with good professional and ethical standards consistent with the Hospital's Standards of Conduct (Policy # HRHC-5038)

Dress and Grooming Standards

Valley Children's strives to maintain a professional image to its customers and the public. In order to portray this image, all individuals working in the Hospital (including, but not limited to employees, volunteers, interns, students, non- employee workers, and vendor personnel) are expected to dress and maintain a personal appearance that is appropriate, safe, healthy, and professional. Students must wear their school uniform and badge every time they are in the hospital in a student capacity. Please refer to your Department Management for specific dress/grooming requirements, which may be unique to the department.

The following standards are specified in policy HRHC-5026 – Dress and Grooming Standards:

A. Professional Image

All clothing must be clean, pressed, and in good repair with the proper fit. Clothing should cover the mid- and lower-back and stomach. Undergarments should not be visible. All apparel should have modest necklines, backs, and length. Pants may not be dragging. Lab coats, if required by department management, should be worn over appropriate clothing as identified in this policy. A professional appearance must be maintained at all times.

B. Hair / Beards / Mustaches

Hair, beards and mustaches must be clean and well-trimmed. Extreme hair styles such as mohawks are not permitted. Hair colored green, purple, pink, blue, etc. is not permitted.

C. Tattoos

Tattoos must not present a distraction. Facial, neck and large tattoos including sleeves, or those consisting of nudity, profanity, racial in



nature, offensive, or that could be frightening to children must be covered and not exposed in any way unless coverage would pose an infection control risk.

D. Jewelry

Earrings must be professional and appropriate for the job/role so as not to pose a safety risk. Nose piercings must be limited to a small stud no greater than 1/8 inch. Nose rings, gauges or any other facial or tongue piercings are not permitted and must be removed while on duty. Bandages may not be used to cover up body piercing jewelry. According to unit/department standards, conservative rings on fingers, up to a total of three, may be worn.

E. Clothing

The following are examples of items that are not permitted:

- Denim or denim look-alike clothing of any type including colored denim
- Shorts
- Work-out or beach attire including spandex
- Overalls
- Tight fitting pants or leggings unless they are worn under a skirt or dress that falls within policy guidelines
- Skirts and dresses shorter than two (2) inches above the knee
- Any clothing that allows for a bare midriff when performing the duties of his/her position
- Clothing with inappropriately low necklines, back lines or cleavage
- Tube/halter tops
- Tank tops that are less than 2 inches across the shoulders (unless underneath another item of clothing)
- Sweatpants/suits
- Hoodies/sweatshirts for staff working in a business office environment*
- Baseball hats, visors, caps, unless as part of a department uniform or themed day
- Sports team logos of any kind unless allowed on Organization sponsored themed days or as part of sponsored philanthropic support.
- T-shirts unless they have the Valley Children's logo*

*Direct Care Providers and staff who wear uniforms as part of their role: T-shirts, sweatshirts, and hoodies may be allowed regardless of day but must be pediatric friendly.

F. Shoes

- Must be appropriate height and style to the position
- Sneakers/tennis shoes are only permitted in direct patient care areas or as part of a department uniform
- Closed toed shoes required with scrubs and by all staff involved in patient care
- Unapproved footwear includes: Ugg style boots, Birkenstock style sandals, Rubber/Rain boots, Flip Flops and any sandals with a strap between the toes



G. Fingernails

Non-Patient Care

Nails, including artificial, must be kept clean and neatly trimmed. Length of nail should be reasonable to perform the duties of the job.

Direct Care Providers (anyone who enters patient rooms/space and provides direct clinical care, and/or handles patient care equipment or supplies).

- As per Centers for Disease Control (CDC) and Infection Prevention purposes to prevent the spread of microorganisms, artificial nails are prohibited.
- Artificial nails is anything applied to natural nails. This includes, but is not limited to, artificial nails, tips, wraps, appliques, acrylics, gels, shellac, dips or other products.
- Regular nail polish may be worn without chips or cracks. Nails shall be maintained at ¼ inch or less in length.

H. Other

- All perfumes, colognes or other strong odors are not permitted in all areas of the organization for the comfort and health of our patients, families and coworkers.
- Colored or dark eyeglass lenses may not be worn unless prescribed by a physician.
- Employees who work in uniforms provided by the organization or are on call and required to return to the campus may change into appropriate attire upon their arrival.

I. Themed Days

Announced by the organization, will allow dress corresponding to the theme of the day. Themed dress must be suitable to work environment and within dress and grooming standards unless approved as exception. Departmental theme days may be approved by the Executive of the area.

Smoke and Tobacco Free Environment

Valley Children's Healthcare is committed to providing high quality, comprehensive health care services to children. Smoking and tobacco use has been clearly identified as a major cause of preventable disease and secondhand smoke has been documented as having serious adverse effects on children and adults. Therefore, Valley Children's provides a smoke and tobacco free environment throughout the Hospital and in all spaces owned or leased by Valley Children's.

The use of tobacco products in any form in/on any facility, property, or grounds owned or leased by Valley Children's is **prohibited** to reduce the health risks associated with smoking and tobacco use for our employees, patients, visitors, volunteers, non- employee workers, vendors, interns, students, and physicians. All individuals accessing Valley Children's campuses, satellite locations, and facilities for any reason must respect our commitment and our practice for the health and well-being of our employees, patients, families, and visitors (Policy # EC-1098).



Valley Children's provides designated parking for all workforce members. Hospital Security regularly patrols on foot or by mobile vehicle parking lots. Valley Children's assumes no liability for damage, fire, vandalism, or theft that might occur while the vehicle is parked on Hospital property. Requests for video surveillance are evaluated based on critical need, personal injury, or requested by Law Enforcement.

It is the personal responsibility of all workforce members to adhere to Valley Children's parking guidelines and only park in designed parking lots. Parking in dirt areas surrounding the Hospital is not permitted. Hospital Security provides 24-hour escort service requested. Escort services may be requested by calling Security at 353-5115.

Parking Areas

All hospital parking lots have designated parking as follows:

a. Yellow striped areas

The yellow striped areas are designated for employees, non-employee workers, students, vendors, and interns parking, unless a sign is posted stating other restrictions. A parking decal shall be displayed on the windshield, of every registered vehicle, in order for Hospital Security to identify their vehicle should the need arise.

b. Blue striped areas

The parking spaces that are striped blue are strictly for physician/provider or executive parking. Employee parking is not permitted in these spaces during any shift/day of week. Every vehicle parked in these spaces shall display a blue physician/executive decal on their windshield. Individuals parked in these stalls without a blue parking decal will be cited.

c. White striped areas

The white striped areas are for visitors/patients/volunteers. Workforce members can only park in these areas on weekdays from 6:00 PM to 8:00 AM and on weekends. If utilizing hospital services as a patient, you must notify Security immediately upon arrival or entering the hospital, if parked in designated visitor parking areas by calling 353-5115. Individuals parked in visitor parking between 8:00 AM and 6:00 PM will be cited. **No parking is allowed at any time in Visitor/Emergency Visitor parking areas Lot D, Rows 1 and 2 without approved placards (see e).**

d. Green striped areas

The parking spaces that are striped green are for designated Electric Vehicle charging stations.

e. Handicapped areas

The handicap stalls are for individuals with a state issued handicapped placard.

f. Authorized Transport, Emergency Surgery, Imaging, and Trauma on call

Only authorized Transport, Emergency Surgery, Imaging, and Trauma on-call personnel,



who are actually responding as "on-call" for emergent care, may use the On-Call Transport, Emergency Surgery, Imaging, and Transport designated parking spaces, **respectively**. The Security- authorized and signed "On-Call" parking placard must be prominently displayed on the vehicle dashboard with the parking decal. Additional authorized "On-Call" vehicle decals, issued by Security, may be displayed when issued for On-Call parking areas.

g. RV parking

There are six designated RV spaces available for patient and family use. Hospital Security should be contacted to confirm availability of a RV space. The Security Department will issue guidelines for RV parking to the family.

h. Parking Permits

Each vehicle operated by a workforce member is required to have the appropriate Security issued hospital parking permit (decal) physically attached to the <u>lower</u> <u>passenger side corner</u> of the front windshield. You must register and obtain a new parking decal each time there is a change in vehicle. A separate parking decal is required for each vehicle that may be parked onsite. Anyone parking without the proper parking permit (decal) matching a registered vehicle will be cited as parking against policy. Contact Security at 353-6017 to obtain a parking decal.

Corporate Compliance

Corporate compliance is our commitment to follow all the legal requirements applicable to a pediatric hospital. Our goal is to prevent unlawful and unethical behavior from occurring in the workplace. Through our initiatives, we want always to act honestly and ethically and live up to our value of integrity.

The Corporate Compliance program assists in preventing and detecting illegal or unethical activity by ensuring we follow our written policies and procedures and applicable state and federal laws and regulations. *It also* helps to protect our organization against fraud, waste, abuse, and other potential areas of liability.

Everyone is responsible for preventing, detecting, and reporting behavior that may violate the law or policy. Compliance concerns should be reported to one of the following:

- Your supervisor, manager, or director
- Corporate Compliance Officer, Sylvia Coyle at 353-5046
- Corporate Compliance Help Line at 1-800-597-2199
- Online at <u>https://valleychildrens.alertline.com</u>

Once a concern has been identified, the Compliance Office will take action by:

- Investigating the concern.
- Correcting and mitigating the activity.
- Educating, training, and continuing to monitor and audit for compliance.
- Illegal or improper conduct is subject to disciplinary action, including termination.

Our organization or organization members can incur severe penalties for non-compliance including but not limited to payment denials, monetary penalties, incarceration, government auditing and monitoring and exclusion from government healthcare programs.

Valley Children's takes concerns regarding compliance seriously and will not tolerate retaliation against an individual who, in good faith, raises questions or reports suspected violations. When reporting a situation, confidentiality will always be maintained and information will only be shared with those necessary to complete the investigation.

Confidentiality & HIPAA Compliance

Everyone at Valley Children's Healthcare is responsible for the privacy and security of patient information. Any person who does business with or on behalf of the organization as an employee, contract employee, business associate, student or physician must:

- Understand the reasons to maintain privacy of protected health information (PHI) and agree to abide by confidentiality policies and procedures.
- Understand that information that is deemed confidential by Valley Children's Hospital and/or specific legal statutes shall be kept confidential and shall not be copied, electronically accessed, transmitted, or removed from the premises of the Hospital under any circumstances, without the prior written consent of Hospital Administration.
- Report any concerns related to patient privacy to their manager, Valley Children's Healthcare contract representatives, or the Privacy Officer.

Confidential Information

Confidential information may be in the form of electronic, verbal, magnetic, photographic film and/or written data. General types of confidential information may relate to patient, employment, medical affairs, or general hospital information. In addition, unauthorized access of confidential information about Valley Children's Healthcare, its employees, patients, visitors, or customers is strictly prohibited. Persons who breach confidentiality standards will receive disciplinary action for the violation and may face monetary fines under Civil Code Section 56.36.

Confidential information will not be discussed outside the working environment with unauthorized individuals, or outside of the context of conducting Hospital business. Confidential information will not be discussed within the Hospital in public areas or with unauthorized individuals.

Protected Health Information

Confidential information or Protected Health Information (PHI) is defined in Valley Children's policy as:

"Information containing any individually identifiable health information (IIHI) including patient name, mental or physical condition, diagnosis, birth date, social security number, insurance or payment information, address, telephone numbers, email address, treatment received and/or recommended and financial data."

Electronic patient health information (EPHI) is any protected health information stored in an electronic format.

Health Insurance Portability and Accountability Act of 1996 (HIPAA)

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) is a federal law that required the creation of national standards to protect sensitive patient health information (PHI) from being disclosed without the patient's consent or knowledge.

As a contracted employee, business associate, student or intern working for the healthcare organization and in the healthcare field, you must understand how HIPAA impacts our organization and the penalties associated with violations of the rules and regulations. Failure to protect patient privacy can result in **fines of \$100 up to \$50,000 per violation** based on the level of negligence. Multiple HIPAA violations can result in fines surpassing **\$1.5 million**. Criminal penalties may also be imposed of **up to \$250,000 in criminal fines and serve up to 10 years in prison**.

Privacy Regulations

Privacy Regulations ensure a national flow of privacy protections for patients by limiting the ways that health plans, pharmacies, hospitals and other covered entities can use patient's personal medical information. The regulations protect medical records and individually identifiable health information, whether it is on paper, in computers or communicated orally.

Key provisions of privacy standards include:

Patients' rights to:

- Access medical records
- Restrict or limit disclosure of information
- Request alternatives in confidential communication
- Accounting of disclosure
- Notice of Privacy Practices Complaints

Top Five Privacy Concerns

- 1. Failure to have the individual's valid authorization for a disclosure that requires an authorization
- 2. Disclosure of more data than is minimally necessary to satisfy a request for information
- 3. Refusal or failure to provide the individual with access to or a copy of his/her rights
- 4. The lack of adequate safeguards to protect identifiable health information
- 5. The impermissible use or disclosure of an individual's identifiable health information

Notice of Privacy Practices

The notice of Privacy Practices is distributed in healthcare settings. This important document informs an individual of his or her rights and the hospital's legal responsibilities concerning the use and disclosure of protected health information.



- The Notice of Privacy Practices is fundamental to a privacy program.
- It is the public "written pledge" that patient's protected health information will be secure.
- It outlines how we may use or disclose your health information (without authorization) for treatment (T), payment (P), or health care operations (O).
- It outlines the rights related to the patient' health information including the right to access, to request to amend and/or restrict information, and a right to request an accounting of disclosures.
- It provides information on how to contact the Valley Children's Healthcare Privacy Officer.

Access to Protected Health Information

All members of Valley Children's Healthcare should only access PHI when there is a business need including a direct treatment relationship. One of the challenges for any Privacy Program is helping staff balance their access to PHI for business needs including the treatment relations with the appropriateness of access to PHI.

At **no time** should a workforce member access a family member (spouse, adult child, minor child) or their own medical record. Accessing your own medical record is a violation of Valley Children's Healthcare policy.

Although you may have access to the EMR software as part of your assignment and/or work, it is never appropriate to access the PHI of a staff member, physician or any other patient if you do not have a direct treatment relationship or business need. Valley Children's Healthcare electronically audits access to medical records within the EMR.

Minimum Release

There are times that medical information on a patient can be released as part of ongoing treatment, payment, or for healthcare operations; however, it is important to only release the information needed for the purpose. Releasing more than the information necessary to someone other than the patient can be a privacy concern and also a violation of the Valley Children's Healthcare Minimum Release policy # HC-0035.

De-Identification of Protected Health Information (PHI)

Workforce members need to ensure proper security when sending, storing or using confidential information to avoid breaches. Workforce members must understand what PHI is and when it needs to be protected. This includes understanding the HIPAA Safe Harbor de-identification principles.

The **Privacy Rule** was designed to protect PHI through permitting only certain uses and disclosures of PHI provided by the Rule. The process of de-identification, by which identifiers are removed from the health information, mitigates privacy risks to individuals and thereby supports secondary uses of information.

The **HIPAA Safe Harbor** method for de-identification requires removal of 18 identifiers of the individual or of relatives, employers, or household members of the individual. Combinations of identifiers are irrelevant, **all 18 identifiers (also known as PHI-18)** need to be removed to satisfy the Safe Harbor method. Contact the Valley Children's Healthcare Corporate Compliance Officer, Privacy Officer or Information Security Office to ensure that protected health information is properly de-identified.

The 18 identifiers that need to be removed to properly de-identify are shown here:

The 18 Identifiers				
Patient Names	SSN	Social Security Numbers		Vehicle Identifiers, including license plate numbers & serial numbers
All date elements (except years) including birthdate, admission or discharge date, date of death, & age		Medical Record Numbers		Website URLs
Address (all geographic subdivisions smaller than state, including street address, city county, and zip code)		Health Insurance Beneficiary Number		IP Addresses
Phone Numbers	\$	Account Numbers		Biometric Identifiers- finger or voice print
Fax Numbers		Certificate & License Numbers		Photographic images not limited to images of the face
Email Addresses		Device Identifiers & serial numbers	O m	Any other characteristics that could uniquely identify the individual

Privacy Safeguards

If your role requires you to handle PHI, the following precautions can help protect patient privacy:

- Follow proper faxing protocol
 - Verify recipients fax number prior to sending PHI
 - Make sure the receiver of the information is authorized to receive the information
 - o Always use the approved fax transmittal sheet
- Don't leave documents containing PHI on printers, fax machines, or unsecured on your desk
- Properly dispose of all paper, especially those containing PHI, into locked shredding bins



- Follow the organization's proper paper (confidential and non-confidential) waste disposal procedures. Non paper products (IV bags, syringes, etc.) with PHI labels should be placed in red biohazard containers.
- Slow down when working with ePHI or paper PHI. Check all documents before handing off to families
- Question individuals in the workplace without badges
- Lock computers anytime you step away
- Verify callers before releasing any information
- Don't take or share pictures of patients
- Never use your personal social media with patients or patient families.
 - Never post a picture of a patient/families
 - Never post about a patient's care
 - Never tweet about patient's or our families

IT Security

As a user of computer resources at Valley Children's Healthcare, you are obligated to ensure that the confidentiality and security of the data/information on the systems is maintained. All patient records, business information, employee information, and medical staff information are considered confidential. Authorization to information is directly dependent upon either a requirement to care for a patient or to conduct your job function. Access to your medical information or your child's medical information is only authorized if you have signed a release of information form in the Health Information Management department for each time that access is desired.

Security Regulations

Valley Children's information security program is designed to protect Electronic Protected Health Information (EPHI) by implementing security tools and procedures and establishing policies to identify, classify, and mitigate risks and vulnerabilities to the confidentiality, integrity, and availability of EPHI.

If you have questions or concerns related to the safety or security of your electronic devices or hospital computer equipment, please contact Valley Children's Privacy Officer at 353-5046.

Protected Health Information (PHI) and Research

The use of confidential information and the use of the hospital information systems are entrusted to employees for the following circumstances:

- For use of direct care and treatment of a patient
- For use in appropriate hospital operations and business

Research is an investigation or an inquiry through the collection of data. The Hospital has rules and policies that apply to all investigations or inquiries for external research purposes. Collecting and using <u>any</u> hospital data/information for a personal project with our Institutional Review Board (IRB) permission is a violation of Corporate Compliance, HIPAA,



and JCAHO regulations.

The Institutional Review Board in conjunction with the Outcomes and Research Department has established policies, based on government rules and regulations.

- The policies define what is considered research and the conduct by which research must be carried out
- All research projects are guided and approved by the (IRB) at Valley Children's Hospital (aka Human Subjects committee)
- Collecting and using any hospital data/information for a personal project without IRB permission is a violation of Corporate Compliance, HIPAA, Government and JCAHO regulations

Patient Rights

Patients and their families have rights and responsibilities. It is the Hospital's intent that they be aware of these rights and responsibilities during the hospital stay and after discharge. Patient Rights are posted at all patient registration and admission sites and other identified locations visible by patients/families. Families who have concerns regarding the enforcement of these rights should be referred to Customer Service at 353-5660.

For more information, consult the Patients, Rights and Responsibilities policy #PRHC-5003.

21st Century Cures Act

The 21st Century Cures Act prohibits "Actors" from a practice that is likely to interfere with, prevent, or materially discourage access, exchange, or use of electronic health information (EHI). Actors are considered healthcare providers, health IT developers or health information networks/health information exchanges. Although patients are at the center – an actor cannot block other individuals or entities who have a proper need to access patient information (e.g., Payors). Information blocking can interfere with patients who seek their own EHI, providers who seek EHI for treatment or quality improvement, payers who seek EHI to confirm a clinical value or patient safety and public health.

The information that must be made available in electronic file format is displayed in the chart below:



USCDI v1				
Assessment and Q Plan of Treatment Q	Laboratory • Tests • Values/Results	Provenance *NEW Author Author Time Stamp Author Organization		
Care Team Members	· · · · · · · · · · · · · · · · · · ·	- Huttor organization		
Clinical Notes *NEW • Consultation Note • Discharge Summary Note Medications • Medications • Medication Allergies		Smoking Status 🐇		
		Unique Device Identifier(s) for a Patient's Implantable Device(s)		
History & Physical Imaging Narrative Laboratory Report Narrative Pathology Report Narrative Procedure Note Progress Note	Patient Demographics • First Name • Last Name • Previous Name • Middle Name (including middle initial) • Address NICW	Vital Signs • Diastolic Blood Pressure • Systolic Blood Pressure		
Goals • Patient Goals	Middle initial) Address *NEW Suffix Birth Sex Number *NEW	Body Height Body Weight Heart Rate Weight		
Health Concerns 😥	Problems 🗱	Respiratory rate length and sex Body Occipital-frontal		
Immunizations	Procedures %	Temperature circumference for children >3 years old		

As required by Federal law, the medical records of Valley Children's patients, contain the current version of the standardized set of health data classes and constituent data elements for nationwide, interoperable health information exchange. These patient medical records are available electronically through the MyChart portal. Electronic PHI (ePHI) can be accessed directly through MyChart or indirectly through applications that interface with the portal and MyChart.

For more information, consult additional Hospital policies:

- PR-1024 PHI, Minimum Release
- PR-1012 PHI Disclosure Tracking
- AD-1017 PHI User Access Audit
- PR-1025 Proper Notification of Privacy
- IMHC-5002 Electronic Security Incidents



Patient Safety Alerts

To support our safety culture, we are guided by three safety behavior expectations for <u>all</u> staff:

- 1. Everyone makes a personal commitment to safety. "We do the right thing"
- 2. Everyone is accountable for clear and complete communication. "We are one team."
- 3. Everyone supports a questioning attitude. "We get results."

Based on transparency, it's the organization's policy and practice to communicate unusual or unexpected events as soon as possible. Any incident that could, might, or has caused harm should be reported (see image for various types of safety events). Examples of an unexpected event or unusual occurrence are:

- Giving patient wrong medication dose
- Performing an x-ray on the incorrect body part
- Fall incident

It's our responsibility to communicate these types of events by completing the electronic "Patient Safety Alert" form on the George page under Forms. If you have any questions or concerns about patient safety, contact the Quality and Patient Safety Dept. at 353-5049.

Valley Childrens

Injury & Illness Prevention & Reporting

Prevention

Injury and illness prevention is the responsibility of everyone working in the facility. Failure to comply with the safe standards of practice will cause cancellation of a work agreement.

Periodic safety inspections are conducted throughout the organization to ensure a safe working environment and to ensure compliance with safe and healthful work practices. The risk of injury or illness is dependent upon the type of work being performed.

IMPORTANT!

- > Safety is everyone's responsibility.
- > Follow the injury and illness prevention practices in the area assigned.
- Ask to see the "Safety and Emergency Preparedness" plan if you are unaware of what is expected.
- Be aware of safety hazards and report suspected hazards immediately to the department supervisor.
- > Frequent hand washing is the BEST way to prevent the spread of infection.

Reporting Work Related Injuries

Report work related injuries according to your established company or school guidelines. In addition, contact the department supervisor if the injury requires immediate medical attention.

IMPORTANT!

Following safety rules can prevent many work related injuries. In the event of an injury, report immediately to your department supervisor and to your company or school supervisor.

Infection Prevention & Control

Employees, volunteers, physicians, and non-employee workers may be at risk to exposure of infectious patients or acquire infection outside the hospital. They may then transmit the infection to susceptible patients, co-workers, or other community contacts.

Hand Hygiene

Practicing hand hygiene is a simple yet effective way to prevent the spread of germs. We all need to take part in doing the right thing to protect our patients, families and each other. Cleaning your hands is the single most important procedure for preventing hospital-associated infections. You must wash hands <u>with soap and water</u> in the following circumstances:

- When hands are visibly dirty
- When contaminated with blood
- When contaminated with other body fluids
- If the patient has diarrhea or C.difficile symptoms
- Before eating
- After using a restroom

How to perform Hand Hygiene			
 How to perform When using soap and water: Wet hands and apply the soap. Lather all surfaces of your hand including under nails. Scrub hands for at least 20 seconds. Rinse your hands under running water. Use towel to turn off tap/faucet. Dry hands thoroughly using a method that does not contaminate hands. Make sure towels are not used multiple times or by multiple people. Avoid using hot water, to prevent drying of skin. 	 M Hand Hygiene When using alcohol-based hand sanitizer: Apply product on hands and rub hands together. Cover all surfaces including fingertips. Rub hands until they feel dry. This should take around 20 seconds. 		

As per Centers for Disease Control (CDC) and Infection Prevention purposes to prevent the spread of microorganisms, artificial nails are prohibited for direct care providers (including anyone who enters patient rooms/space and provides direct clinical care, and/or handles patient care equipment or supplies).



We have policies and procedures in place that focus on prevention of diseases that are of particular concern to hospital personnel. Standard Precautions are in place and have been designed to reduce the risk of transmission of bloodborne pathogens (i.e., HBV, HCV, HIV, etc.) and pathogens from moist body substances. Standard Precautions apply to (1) blood; (2) all body fluids, secretions, and excretions *except sweat*, regardless of whether or not they contain visible blood; (3) non-intact skin; and, (4) mucous membranes. Standard Precautions are designed to reduce the risk of transmission of microorganisms from both recognized and unrecognized sources of infection. All personnel shall utilize Standard Precautions as described below during patient contact, during contact with potentially contaminated surfaces or objects, and when performing at-risk procedures.

Summary of Standard Precautions

The following are standard precautions that are to be taken by all Valley Children's staff:

- 1. Wear gloves when it is likely that hands will touch blood, body fluids, secretions, excretions (e.g., urine, feces, wound drainage, oral secretions, saliva, sputum, emesis, tears, gastric contents, CSF, breast milk, tissues, etc.), non-intact skin, mucous membranes, or contaminated items.
- 2. Protect skin and clothing from exposure to splashes or sprays of blood, body fluids, secretions, or excretions by wearing a body fluid gown and/or a plastic apron when exposure is anticipated.
- 3. Wear a mask and eye protection or a face shield during procedures and patient care activities that are likely to generate splashes or sprays of blood, body fluids, secretions, and excretions.
- 4. Wash hands often and well, especially after contact with blood, body fluids, secretions, excretions, and contaminated items, whether or not gloves are worn. Wash hands before and after entering a patient room and any patient contact.
- 5. Discard uncapped needle/syringe units and other sharps in puncture-resistant sharps containers. Needles should not be recapped unless necessary, not broken, cut or bent, but shall be disposed of intact into the sharps container. If a needle must be recapped, then a one-handed "scoop" technique should be used to recap or a re-sheathing device used to hold the cap during recapping.
- 6. Handle, transport, and process used linen and trash soiled with blood, body fluids, secretions, and excretions using appropriate barriers when necessary (such as gown and/or gloves) or using a "no touch" technique (such as not touching the soiled area). Linens heavily soiled with blood shall be disposed of in the red biohazardous trash bins, not soiled linen bins.
- 7. Environmental surfaces soiled with blood, body fluids, secretions, or excretions must be properly cleaned and disinfected.

8. Patient care equipment soiled with blood, body fluids, secretions, or excretions must be handled with appropriate barrier precautions (e.g., gloves, gown when necessary, and "bagging" of the item) and must be cleaned and disinfected. All reusable equipment should be cleaned between patients. Report an exposure immediately to your department and company supervisor.

Tuberculosis

Tuberculosis (TB) is a contagious, infectious disease caused by bacteria called Mycobacterium Tuberculosis. Tuberculosis is primarily a disease of the lungs but can affect other parts of the body.

Transmission of TB is a recognized risk in health care facilities. An effective TB infection control program is in place to ensure detection, isolation, and treatment.

Tuberculosis facts:

- Transmitted through the air in tiny droplets from an infected person's cough, sneeze, etc.
- Cannot be contracted by touching contaminated items such as bed linen, doorknobs, utensils, etc.
- Patients with, or suspected of having TB, are handled with special precautions such as isolation rooms, negative airflow rooms, special masks for staff entering the room. Only staff members who have been "fit tested" may wear this type of mask and enter the room. A sign outside the room will state **AFB Isolation**.
- Patients wear special masks when being transported outside the TB isolation room.

A thorough discussion of disease precautions is contained in the Tuberculosis Control Plan, which is available in Infection Prevention, Control, and Hospital Epidemiology Department or online on the hospital intranet.

All Valley Children's employees and volunteers are screened annually for TB infection with a TB (PPD) skin test. All non-employee workers must have similar testing through their company in order to perform work that involves any patient contact at Valley Children's Healthcare.

Influenza

Valley Children's Healthcare has implemented a required seasonal influenza vaccination program for all employees, volunteers, students and other non-employees who facilitate our health care mission.

Required vaccination among healthcare workers is recommended by leading professional organizations including the American Academy of Pediatricians, American Academy of Family Physicians, and Association for Professionals in Infection Control and Epidemiology. Our seasonal flu vaccine policy provides the highest standard of care. The risk for severity of complications due to a seasonal flu infection is much higher for children in our care than adults and healthy individuals. Among pediatric admissions to hospitals nationwide, 1 in 1,000 currently contract influenza while in the hospital. Our goal is to keep our patients safe from harm while they are in our care.



Please note the following requirements and information:

- Valley Children's will provide all health care personnel over the age of 18 with free influenza vaccination if they have not already had the vaccination prior to attendance at our facilities for the immediate flu season.
- Non-employee health care personnel must provide qualified proof of immunization if they do not receive the immunization at Valley Children's.

Exemptions to vaccination may be granted for medical reasons or religious beliefs. Individuals requesting an exemption due to medical reasons must provide a Physician Letter completed by a California licensed physician who has examined them. Medical reasons will be evaluated individually based upon recommendations from the Centers for Disease Control and Prevention. Acceptable medical reasons would include documented adverse reaction to influenza vaccine or documented allergy to a vaccine component. Requests for exemption during pregnancy will be evaluated similar to other medical conditions but is not generally accepted as a medical contraindication.

Individuals requesting a religious exemption may be asked in some cases to provide a letter from clergy or other authority supporting the exemption. Individuals may also be asked to discuss the nature of his/her religious belief(s), practice(s) and accommodation. All requests for religious exemption will be evaluated Employee Health on an individual basis.



Emergency Management

Valley Children's **Emergency Management Program** prepares us to bring our best in an emergency. The program manages and coordinates mitigation, preparedness and emergency response and recovery activities within the organization.

The Hospital's **Emergency Operations Plan** (EOP) is an "all hazards" plan that describes how the hospital will prepare, manage, and recover from a threat, hazard, or other incident.

The **Department Emergency Response Plan** (DERP) outlines department or location specific emergency response procedures to be taken in response to an emergent situation that would most likely disrupt the normal operations of the department.

The **Hospital Incident Command System** (HICS) is used by the hospital to manage threats, planned events, or emergency incidents. HICS is activated at the direction of the on-duty Patient Throughput Manager or Administrator On-Call. The **Hospital Command Center** (HCC) may be activated to support incident management.



Plain Language Emergency Alerts

Plain language emergency alerts use clear and easily understood words to notify all listeners of potential or actual emergency situations. They are used to alert individuals of developing events, some of which may require the activation of the organization's Emergency Operations Plan (EOP). Notification of an emergency incident can happen in a number of ways including an announcement over the public address system (overhead), pop-up on computers and alerts on desktop and/or wireless phones.

Emergency alerts are categorized as one of the following:

- 1. Facility Alerts
- 2. Medical Alerts
- 3. Security Alerts

In an emergency, a plain language emergency alert notification will include the type of alert and event. It may also have the location and action required (if any). See the list of emergency alerts along with the appropriate reporting and response action.

	Type of Incident	How to Report	How to Respond
	Fire Alarm Activation	 Activate nearest pull station. Report fire alarm activation and give exact location. 	Close all doors in your area. If you are not in the immediate area of the fire, do not go through fire doors. Use RACE and PASS response if necessary.
Facility Alert	Hazardous Material Spill/Release	 Provide exact location (floor, department, room). Type of chemical (if known). Approximate size of the spill. 	In the event of an immediate threat to life: 1) Rescue everyone in the area, 2) Evacuate through the nearest double doors, 3) Report incident by calling 222. For all other situations, use SIN for initial response: 1) Stop what you are doing 2) Isolate the area 3) Report incident by calling 222.
ŭ	Network/Utility Interruption	 Provide the location. Type of utility or technology system affected. 	The type of system impacted determines the required response. Remain alert for status updates and actions reported from the Hospital Command Center.
ť	Medical Emergency	 Provide the location and situation. 	Remain with the individual until arrival of the Emergency Medical Response Team.
Medical Alert	Mass Casualty Incident: Alert An event has occurred or will probably occur, that is expected to affect normal operations of the hospital.	This type of incident is reported directly to the Emergency Department by the local Emergency Medical Services Agency.	Continue with normal job duties until you are told otherwise by your Response Leader.
Mec	Mass Casualty Incident: Respond The event victims are on their way or have arrived at the hospital.		Follow department-specific Response Plan.
Security Alert	Active Threat Announced in the event of a person brandishing a weapon or threatening to hold people hostage.	 Provide the location. Any known information of threat or suspects. 	 DO NOT PUT YOURSELF IN DANGER. REMAIN CLEAR OF THE INCIDENT AND THE SHOOTER. 1) Notify others of the situation. Remain calm & alert. 2) Seek cover/protection behind closed doors. Lock or barricade doors if able. Close window coverings. 3) Turn down or silence phones and alarms. Do not make noise. 4) Stay in rooms with patients/families as available.
	Missing Person	 Provide last known location. The age of the missing person. Any known information about the situation. 	Observe and report to 222. Be aware of and report to the department's monitoring location. If you observe someone matching the description, ask them to wait with you and notify Security by calling 222. If they refuse, do not attempt to stop them.
	Security Assistance Needed for Verbally Threatening/Combative Person This alert is NOT announced overhead.	 Provide the exact location. Indicate Individuals involved. Any known information about the situation. 	Attempt to defuse the situation by calming the individual. Security personnel will respond to assist with the person and/or securing the area.
	Bomb Threat	 If you receive a threat over the phone: Remain calm & listen - do not interrupt the caller. Stay on the phone as long as possible. Obtain as much information as possible. Signal a staff member to call 222 to report a Bomb Threat and provide as much information as possible. 	 Immediately stop and turn off hand-held radios, cell phones and pagers. Ask visitors to do the same. Remain calm and begin to search for suspicious package(s). If the item is found, do not touch, tamper or move. Report item to the Operator.
	Suspicious Package/Bomb Threat	Provide exact location including any features such as shape, size, color, etc.	Evacuate the area if safe to do so.

HIIM HIM

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Call 222 for all hospital emergencies <u>or</u> the appropriate number for your location.



The hospital is divided into **fire/smoke compartments** designed to contain smoke and isolate the fire. The doors to these compartments can be identified by a red hat sticker. In hospital corridors, if a fire is not in the vicinity of your location when the fire alarm sounds, stay where you are and let the fire doors close around you. Do not attempt to return to your unit/department or continue to your destination until "Facility Alert + Fire Alarm Activation + All Clear" is announced overhead.

If evacuation is necessary for an emergency, one of the following will be instructed:

- Horizontal evacuation is evacuating without the use of stairs and should always be the first consideration for safety.
- Vertical evacuation uses stairs during an evacuation and may be required if the entire floor becomes unsafe.
- All locations outside of the hospital building require a complete building evacuation if the fire alarm is activated.

RACE is an acronym used to remember your duties in case of fire.

- Rescue all patients, visitors, employees, staff and volunteers from immediate danger.
- Alarm by pulling the closest fire pull-station and by dialing the emergency number for your location.
- Contain the area by closing all doors.
- Extinguish the fire if the fire is small (using P.A.S.S). Evacuate individuals in the area.

PASS is an acronym used to remember how to properly use a fire extinguisher. Never use an extinguisher without an escape route. Be sure you have access to an exit in case you are unable to extinguish the fire.

- Pull the pin.
- Aim at the base of the fire.
- Squeeze the handle of the extinguisher.
- Sweep from side to side across the base of the fire.

There are two types of extinguishers available. Multi-purpose Dry Chemical (ABC) Extinguisher is used to extinguish most types of fire including wood, paper, cloth, flammable liquid, and electrical fires. CO2 (Carbon Dioxide) Extinguisher extinguishes flammable liquid and electrical equipment fires. It is your responsibility to know where the nearest extinguisher is located to your department. If unsure, check with your supervisor.

Sheltering

Lockdown is a sheltering technique used to limit exposure of occupants within a facility to an imminent hazard or threat outside. If ordered to **shelter-in-place**, you should take steps to prepare for evacuation as outlined in your department's Emergency Response Plan (DERP).



Electrical Safety

Valley Children's strives to maintain an electrically safe environment by following guidelines mandated by regulatory agencies. Important electrical safety facts include:

DO	DON'T
Keep cords away from heat & water.	Don't use equipment if cord is frayed or cracked, plug is bent or damaged in any way.
Turn equipment off BEFORE plugging or unplugging it and prior to cleaning or repairing.	Never plug or unplug a cord when hands are wet.
When unplugging, always pull on the body of the plug, not the cord.	Don't use equipment that feels unusually warm to the touch, smells like it's burning, or makes noise when turned off.

If someone is experiencing electrical shock, push or pull the individual away from the electricity with an item that does not carry electricity, such as rubber, glass, plastic, or dry wood. After the individual has been moved from the source of electricity, immediately begin emergency care, and call for emergency assistance.

Contact your department supervisor with electrical safety questions or problems. All equipment brought into patient care areas must be inspected by Bio-Medical Services prior to use at 353-5200.

Medical Device Safety

Federal law requires reporting any serious patient or employee injury, illness, or death in which a medical device may have played a role. Follow these steps if a medical device incident occurs:

- 1. Inform supervisor.
- 2. Complete and file an incident report and Patient Safety Alert (when applicable).
- 3. Remove the faulty device from service and tag as appropriate.
- 4. Save all items associated with the use of the faulty device.

For on the job injuries, please seek medical care by Employee Health between 7am-4pm on weekdays or the Emergency Department during all other times.



Abuse Reporting

At Valley Children's, we are <u>all</u> mandated reporters. It is our responsibility to report suspected abuse and neglect of any kind to Child Protective Services and/or law enforcement. Proof of abuse or neglect is <u>not</u> required.

Child Abuse

When the victim is a child (under the age of 18) and the perpetrator is any person (including another child), the following types of abuse must be immediately reported to CPS and/or Law enforcement:

A. <u>Physical Abuse</u>- A non-accidental injury resulting from punching, beating, kicking, biting, burning, or otherwise harming a child. The injury may be the result of a single or repeated episode and can range in severity.

Note: Corporal punishment (*any physical force intended to cause pain or discomfort*) may not in and of itself be child abuse; however, it <u>may be</u> if it causes internal or external injuries.

B. <u>Emotional Abuse</u> (*including verbal abuse*)- When a person causes or permits a child to suffer unjustifiable or significant mental suffering. Acts or omissions by parents or caregivers that have caused, or could cause, serious behavioral, cognitive, emotional, or mental disorders.

Emotional abuse includes verbally inappropriate behavior such as belittling, blaming, sarcasm, rejection, name calling, screaming, humiliation, demeaning, foul language, threatening, or language inflicting fear, and emotional distress. This is considered verbal abuse and should be reported.

C. <u>Neglect-</u> An act, omission, or pattern of care that demonstrates a serious disregard for the child's health, welfare, and safety.

Neglect can be <u>physical</u>, <u>educational</u>, <u>medical</u>, or <u>emotional</u>. This includes, but is not limited to, failing to provide basic needs like food, shelter, clothing, medical and mental health care, education, proper hygiene, and protection from harm.

D. <u>Sexual Abuse</u>- Child sexual abuse includes both sexual assault and sexual exploitation with minors under the age of 18 years old who are unable to give legal consent.

Dependent Adult Abuse

At times, we see patients who are **dependent adults**. Dependent adults are defined as individuals between the ages of 18-64 and having physical or mental limitations which restrict their ability to carry out normal activities or protect their rights.

Dependent adult abuse is defined as:

- Physical abuse
- Neglect
- Financial abuse
- Abandonment, isolation, abduction
- Treatment resulting in physical harm or pain or mental suffering



Reporting Requirements

If you observe, know of, or have reasonable suspicion of abuse or neglect, it is your responsibility to report it <u>immediately</u>. If you are uncertain or have questions, contact the Valley Children's Social Work Department for assistance at 353-5270.

In accordance with Penal Code 11166, you must report to Protective Services whenever you have knowledge of or observe an individual whom you know or reasonably suspect has been the victim of abuse or neglect.

How to report child abuse:

- 1. Report immediately by phone to Child Protective Services and/or applicable Law Enforcement.
- 2. Complete a Suspected Child Abuse Report (SCAR) within 36 hours and submit to the agency for the county in which the individual resides.

How to report dependent adult/elder abuse:

- 1. Report immediately by phone to Adult Protective Services and/or applicable Law Enforcement.
- 2. Complete a Report of Suspected Dependent Adult Abuse within two business days and submit to the agency for the country in which the individual resides.

The identity of the reporting party is confidential and may only be disclosed to official agencies and professionals involved in the investigation, prosecution or recordkeeping of these cases. Identity should not be shared with the patient and/or family. Any violation of confidentiality of this information is a misdemeanor punishable by up to six months in county jail and/or a fine of up to \$500.

Failure to report is a misdemeanor, punishable by up to six months in jail and/or up to a \$1000 fine. Failure to report may result in a civil lawsuit, especially if the victim is further victimized and loss of professional license or credential.

Workplace Harassment

Valley Children's Healthcare is committed to providing a work environment that is free from harassment. There are specific Federal and State laws that define harassment and hospital policies that support those laws, which guide practice in our organization. Harassment and/or discrimination of any kind are **strictly prohibited** and will **not** be tolerated.

Unlawful harassment includes verbal, visual or physical conduct directed towards another person or persons that is abusive or demeaning, or that is designed to threaten, ridicule, intimidate, coerce, or taunt, where such conduct is based, in whole or in part, on a person's race, color, religious creed, sex, pregnancy to include childbirth, breastfeeding or related medical condition for any eligible female employee, national origin, ancestry, citizenship, age, marital status, military status, veteran status, family status, physical disability, mental disability, medical condition, genetic information, sex stereotype, sexual orientation, gender/transgender/gender expression/gender identity (including whether or not you are transitioning or have transitioned) or other characteristic protected by federal, state or local law, regulation or ordinance.

Sexual harassment is unsolicited or unwelcome sexual advances, requests for sexual favors, discrimination or other physical or verbal conduct of a sexual nature.

Examples of harassment include, but are not limited to, the following:

- 1. Verbal conduct such as derogatory jokes, name calling or comments, bullying behavior, slurs, or unwanted sexual advances, invitations or comments, posts or messages.
- 2. Visual displays such as derogatory or sexually oriented posters, photography, cartoons, drawings or gestures.
- 3. Physical conduct including assault, unwanted touching or intentionally blocking normal movement or interfering with work because of sex, race or any other protected basis.
- 4. Threats and demands to submit to sexual requests or sexual advances as a condition of continued employment, or to avoid some other loss, and offers of employment benefits in return for sexual favors.
- 5. Communication via electronic media of any type that includes any conduct that is prohibited by state and/or federal law or Valley Children's policies.
- 6. Adverse employment action against employee such as termination, demotion or suspension, based solely on his/her report of harassment.

Harassment must be reported immediately to your department supervisor or the Employee Relations Department. All claims of harassment are handled with the utmost confidentiality to protect the rights of all persons involved.



Workplace Crisis & Prevention

Valley Children's Healthcare is committed to working collaboratively to create and maintain a workplace that is free from any type of violence. It's up to all members of Valley Children's Healthcare to do their part in preventing workplace violence by recognizing and responding appropriately to potentially violent situations.

<u>Workplace Violence</u> is defined as any act or threat of physical violence, harassment, intimidation, aggression, or other threatening, disruptive behavior that occurs in our work environment. Examples of workplace violence include verbal or written threats, verbal abuse such as insulting or berating, hitting, punching, kicking, shoving, choking (even if unintentional), threatening behavior such as slamming doors, throwing objects, punching walls, shaking fists, or destroying property, or shooting, stabbing or sexual assault.

Any acts of or threats of violence on premises will not be tolerated. Non-employees engaged in violent acts or threats on premises will be dealt with immediately and appropriately based on relationship to the organization and circumstances at hand. Appropriate response could include formal action, removal from the area, report to the proper authorities and, most severe cases, might include prosecution to the full extent of the law.

It's your responsibility to:

- Be alert to the possibility of aggressive/disruptive behavior, or violence by anyone on site.
- Report any threat, violent incident, or other workplace violence concerns.
- Avoid injury during an actual act of violence in the workplace by recognizing potential problems and by using preventative measures in advance of a concerning incident.
- Understand Valley Children's Healthcare policies and know how and when to reach out to others for assistance.
- Be aware of your environment, stay safe knowing where exits are located.
- Minimize or eliminate risks in your environment
- Ensure patients exhibiting risk factors or warning signs are easily observed.
- Respond to disruptive behavior with others, a team approach ensures safety, professionalism, and witness to the intervention

Risk Factors

The healthcare facility can represent a high-stress environment for patients, families, and staff. The following can increase stress between patients, families, physicians and staff:

- Crisis Behaviors
- Economic Factors
- Precipitating Factors (being late due to traffic, fear of bad news, anxiety about appt, etc.)

Crisis prevention and intervention strategies provide staff & physicians with the skills to implement early and effective verbal intervention, also known as **verbal de-escalation**.



We all must be aware of the risk factors and early warning signs and should begin asking the following questions when noticing a potential conflict:

- How can I intervene safely and effectively before the behavior gets out of control or dangerous?
- Am l in a safe situation and have my resources for help?
- Have I identified concerns of aggressive behavior, or patterns that now need to be reported to others?

When conflict is left unresolved, it has the potential to grow into a crisis. Prevention strategies identify concerns early throughout our environment. These risk factors can aid in early detection and intervention to support a proactive and positive resolution before concerning behavior can manifest.

Common risk factors to identify an	Six Observable Behavioral
increase for risk of violence	Risk Factors
 Prior history of disruptive, aggressive, or violent behavior (patient, family, or visitors) Violations of clear expectations for standards of conduct Neurological or cognitive impairment (includes poor impulse control or anger, autism, traumatic brain injury) History of substance abuse History of violence Family conflict 	 Confused Irritable Loud, boisterous Verbally threatening Physically threatening Attacking objects

Documenting risk factors in the available medical record is required when any of the identified behavioral risk factors have been noted as well as communicating concerns with involved staff during handoff or SBAR communications to remain proactive and aware of potential risks.

Hazards

Identifying hazards that can exist in the work environment and patient care areas may include equipment as well as supplies that are used routinely every day. We must take the time to recognize and/or alert others, including leadership, to items used in our environment that could be used as a weapon that cannot be removed from a room for the long term or bolted down.

These hazards can include commonly used items such as:

- IV Poles
- Heavy equipment
- Lamps
- Scissors, not secured
- Removable parts of furniture



Valley Children's maintains a Visitor Conduct policy that outlines unacceptable conduct by visitors and our Zero Tolerance for violence in our healthcare environment. Visitors are expected to follow our visitor conduct expectations. Identified among the unacceptable conduct includes abusive, aggressive, violent behaviors or disruptive individuals under the influence of drugs and alcohol. All members of Valley Children's must report any concerns of workplace violence to their department leadership as soon as possible. Early reporting with concern and effective intervention will support positive outcomes.

Do not ignore the warning signs of violence, report early and don't let the situation escalate. If you believe you are a victim or are at risk for potential violence, please notify your supervisor immediately. Security is a valuable resource and available to assist if needed by dialing 222 or 911 if you are off-site.

Examples of reportable incidents include but are not limited to:

- Verbal threats to inflict bodily harm, including intimidation
- Aggressive or inappropriate conduct, such as shouting, cursing, throwing, or pushing objects, punching walls, and slamming doors.
- Acts of intentional or unintentional physical harm or attempting to cause physical harm including biting, choking, grabbing, hair pulling, kicking, punching, slapping, pushing, pulling, scratching, or spitting.

To report a Workplace Violence concern or incident, use the Workplace Violence Reporting link under Online Resource on the George page. Once reported, Safety and Employee Health will evaluate the reported event. A safety investigation will be initiated; you may be contacted for more details. For an on-the-job injury, please seek medical care by Employee Health between 7am-4pm or Emergency Department during all other times.

If you would like the opportunity to ask questions, speak with someone further, attend an interactive course, or request additional information from a person knowledgeable about Valley Children's Workplace Violence Prevention Plan, or assist in future reviews of the Plan, please email **WorkPlaceViolencePrevention@valleychildrens.org**. You will receive a response to your request within one business day.



Facility Orientation Guide Post Test

You must answer all of the following questions and achieve a passing score of 100%.

1. The mission of Valley Children's Healthcare is:

- a) Give free coffee to employees and visitors
- b) Recruit the best employees
- c) Provide high-quality, comprehensive health care services to children regardless of their ability to pay, and to continuously improve the health and well-being of children
- d) Raise money for the hospital

2. The correct order of the "Our Best" Steps of Service are:

- a) Own the Experience, Close Sincerely, Connect Genuinely
- b) Connect Genuinely, Own the Experience, Close Sincerely
- c) Close Sincerely, Connect Genuinely, Own the Experience

3. What phone extension do you dial in case of an emergency in the hospital?

- a) 211
- b) 222
- c) 911
- 4. Confidential information at Valley Children's Healthcare can be in any of the following forms: electronic, verbal, magnetic, photographic film and/or written data.
 - a) True
 - b) False
- 5. At <u>no time</u> should a workforce member or contracted staff access a family member (spouse, adult child, minor child) or their own medical record.
 - a) True
 - b) False
- 6. If injury or illness occurs, the correct action to take is:
 - a) Report the illness or injury according to your established company/school guidelines
 - b) Contact your department supervisor
 - c) All of the above
- 7. Frequent hand washing is the best way to prevent the spread of infection.
 - a) True
 - b) False
- 8. To prevent exposure to hazardous substances, non-employee workers must:
 - a) Follow hospital policies, procedures, rules, and regulations
 - b) Report all hazardous conditions to the department supervisor
 - c) Use Personal Protective Equipment (PPE) when required
 - d) All of the above



9. Put the following actions in correct order as they should occur in the event of a *Facility Alert – Fire Alarm Activation* announcement:

E (Extinguish)	Extinguish small fires (if you feel comfortable to do so safely)
R (Rescue)	Move patients, visitors, employees, staff, and volunteers from immediate danger
A (Alarm)	Activate the nearest fire alarm and dial 222 to report the location, cause (if known), and current extent of the fire
C (Contain)	Close all the windows and doors in the are
Answer:	

- 10. During your assignment at Valley Children's, you are mandated by law to report suspected abuse and/or neglect of children and dependent adults.
 - a) True
 - b) False
- 11. Valley Children's Healthcare is committed to providing a work environment that is free from harassment.
 - a) True
 - b) False

12. What are the alert categories for plain language emergency alerts?

- a) Security and Medical Alerts
- b) Facility, Security and Medical Alerts
- c) Facility, Safety and Medical Alerts
- 13. To support our safety culture, all staff are guided by which of the following safety behavior expectations:
 - a) Everyone makes a personal commitment to safety.
 - b) Everyone is accountable for clear and complete communication.
 - c) Everyone supports a questioning attitude.
 - d) All of the above

14. Prevention of workplace violence includes the recognition and reporting of which of these behaviors?

- a) Verbal threats to inflict bodily harm
- b) Disruptive behavior under the influence of drugs or alcohol
- c) Intentional or unintentional biting, grabbing, kicking, punching
- d) Shouting or cursing
- e) All of the above

Facility Orientation Guide Acknowledgement

For Non-Employee Workers/Students/Vendors/Interns

I acknowledge that I have received a copy of the Valley Children's Healthcare Facility Orientation Guide. I understand it is an overview of my responsibilities while working at Valley Children's and the requirements therein are a part of the organization's policies and procedures, as well as Joint Commission on Accreditation of Healthcare Organizations, Title 22 requirements and other regulatory agencies.

In order to ensure a safe and caring environment for patients, families, visitors, employees, and physicians, I agree to become familiar with and support the hospital policies, procedures, and programs outlined in the Guide. I acknowledge it does not replace the contract established by my company or any standards, which have been established between my company and Valley Children's Healthcare.

I will carefully study each section and discuss any questions I have regarding this material with my company supervisor or with my hospital-assigned department supervisor.

Company Name	
Company Representative	
Print name	
Signature	_Date