

# The Insider

## HAND HYGIENE: STOP Infections (Partner in Your Care)

EVERYONE must use proper hand hygiene. When hands are visibly dirty, contaminated, or soiled, wash with soap and water.

If hands are not visibly soiled, it doesn't mean they are clean. Use an alcohol-based sanitizer for routinely decontaminating hands.

Including but not limited to:

- When you come to/leave work
- Before/after any patient care
- In/out of patient rooms
- Taking off/putting on gloves
- Between dirty to clean site care
- After touching dirty equipment or surface
- Before/after eating or preparing food

## ISOLATION PRECAUTIONS

### Standard Precautions:

Put a barrier (Personal Protective Equipment: gowns, gloves, mask, eye shield) between you and blood or body fluids with EVERY patient. Consider every patient colonized or infected. Cover your mouth when you cough or sneeze. Perform hand hygiene after coughing and anytime you are entering or leaving a patient care environment. Use safe injection practices and make sure a mask is worn by the doctor during Lumbar Punctures. All patient care items *must* be disinfected between patients with appropriate disinfectant wipes or bleach wipes.

### Transmission Based Isolation:

Airborne Respirator: PAPR (negative airflow room)

Airborne Contact: Gown, Gloves and PAPR (negative airflow room)

Contact: Gown & Gloves

Contact Enteric: Gown & Gloves, hand hygiene with soap and water

Droplet: Surgical Mask, Gown & Gloves

Neutropenic: Very careful hand washing, no-one ill in room, no flowers, plants, unwashed fruits or vegetables

Sharps: Dispose uncapped needles, syringes, and sharps immediately into puncture resistant containers

## PROTECT YOURSELF & OTHERS WITH STANDARD PRECAUTIONS ALWAYS AND FOREVER.

“Dirty to Clean Foam in Between”

## MANAGEMENT OF INFORMATION – CONFIDENTIALITY

All patient information (verbal, written or electronic) is considered privileged and confidential.

Patient information is protected by passwords, restricted access, and audit trails to ensure proper access of information.

Passwords must not be shared.

Never access patient information without a work related reason.

Email which contains patient information, leaving the Kadlec or Providence network, must be encrypted. Contact the IT Help-line for assistance.

Violation of confidentiality is subject to disciplinary action, up to and including termination, depending on the severity of the violation.



### OUR MISSION

Provide safe compassionate care.

### OUR VISION

Simplify health for everyone.

### PROMISE STATEMENT

Together, we answer the call of every person we serve: Know me, care for me, ease my way.

### CORE OUTCOME

Creating healthier communities together.

### OUR VALUES

#### SAFETY:

Safety is our highest priority and is the core of every thought and decision.

#### RESPECT:

We treat everyone with acceptance and honesty, valuing individual and cultural difference.

#### INTEGRITY:

We earn the trust of the community through ethical behavior and transparency.

#### STEWARDSHIP:

We believe that everything entrusted to us is for the common good. We strive to care wisely for our people, our resources and our community.

#### COMPASSION:

We reach out to people in need and give comfort. We nurture the spiritual, physical and emotional well-being of one another.

#### EXCELLENCE:

We hold ourselves accountable to the highest standards of quality and safety.

#### COLLABORATION:

We join together and with others across the community to advance the interest of the patient and the family.

## PATIENT EXPERIENCE THROUGH A PLANETREE LENS

As the guiding model for patient-centered care at Kadlec, Planetree shapes our approach to the patient experience. By living the Planetree philosophy we recognize that illness can be transformational. Our calling is to attend to each patient as a whole person, nurturing them in mind, body and spirit by supporting their mental, social, emotional, spiritual and physical needs. We strive to create healing partnerships with our patients, and their loved ones, empowering them to engage in their health and make choices based on their own personal values and beliefs.

As caregivers we acknowledge that we are all human beings, caring for other human beings and that caregiving is best achieved through kindness and compassion to our patients, our peers and our community.

## CODE OF CONDUCT

It is the policy of Kadlec to provide services in compliance with all State and Federal laws governing its operations and consistent with the highest standards of business and professional ethics. This policy is a solemn commitment of our moral obligations to our patients, community and to us. A copy of the full Kadlec Code of Conduct is available on PolicyStat or from the Compliance & Privacy Officer.

## COMPLIANCE

To report a compliance concern: Refer to KWeb Compliance Hotline to; File a report, Ask a question, Locate the Integrity Line; and Access additional resources.

## PERFORMANCE IMPROVEMENT (PI)

- Kadlec is committed to continuous Quality Improvement
- Policy 815 describes the PI responsibilities of Leadership, Medical Staff, and hospital staff
- PDCA (Plan-Do-Check-Act) is Kadlec's model for improvement
- Each department monitors specific Quality and Service Measures
- Understand your department Pursuit of Excellence Board!

## Our Vision for Customer Service

Kadlec is the premier place to go for health care, where service exceeds every customer's expectations.

We are committed and accountable to partner with each other to exceed customer expectation and needs. We achieve this through mutual respect, "being there" for our customers, responding to their needs, and celebrating our success!

## SAFETY PROGRAM

EMERGENCY - Dial "4444"  
Off Campus/Clinics - Dial 911  
Code Red – Fire  
Code Silver – Active Shooter Event  
Code Gray - Disruptive Person  
Code Blue - Cardiac Arrest  
Pediatric Code Blue - Pediatric Cardiac Arrest  
Amber Alert - Infant/Child Abduction  
Code Black - Bomb Threat  
Code Violet - Controlled Access  
Code Violet ED - Controlled Access ED

Safety concerns can be reported to:

- Direct supervisor/manager/director
- Quality Risk Report (QRR) (can report anonymously)
- Environment of Care Committee
- Administrative support (ext. 4001)
- Safety officers: Jason Rose (KRMC Hospital) and Kristi Mellema (Kadlec Clinic)
- Patient Safety Manager: Teresa Robinson
- Integrity Line (can report anonymously – see more information below)
- Joint Commission/ Department of Health

## PUBLIC SAFETY

Police/Fire - Dial 4444  
Off Campus/Clinics - Dial 911  
Security:  
Emergency 4444 (Off site/Clinics 911)  
Non-Emergency 4710  
Smoking or tobacco use is not permitted on any Kadlec property.

## EMERGENCY PREPAREDNESS PLAN

Know your responsibility during an emergency and where your department specific manual is located.

## FIRE SAFETY

Remember RACE:

- R – Rescue
- A – Activate
- C – Contain
- E – Evacuate/ Extinguish

Locations in my area: \_\_\_\_\_

Nearest Pull Station: \_\_\_\_\_

Nearest Fire Extinguisher: \_\_\_\_\_

## SAFETY DATA SHEETS (SDS)

SDS documents for your area can be found on Maxcom located on KWeb.

Maxcom provides information on hazardous materials/chemicals, including details on chemical and physical dangers, safety procedures, and emergency response techniques.

## Right to Know Law

The Hazardous Communication Standard (Right to know law) entitles all employees to be made aware of any hazardous materials they may come in contact with in the workplace.

Chemical Spills – call Facilities.

## Environment of Care

- Medical Equipment
- Utilities
- Safety
- Control of Hazardous Materials and Waste
- Life Safety
- Emergency Preparedness
- Security

## FISH! Philosophy

- Play!
- Make Their Day!
- Be There!
- Choose Your Attitude!

### EMPLOYEE/ HEALTH SERVICES/ HURT Line

Employee Health Services (EHS)  
Ext. 4179 Monday – Friday 8:00am-4pm

Free Illness Prevention:

- Strep throat screenings
- Mask fittings (if required)

Free screening for infectious disease and immunization are available:

- TB Quantiferon (High Risk Departments)
- Hepatitis B vaccine (OSHA 1 & 2 positions only)
- MMR vaccine
- Tdap vaccine
- Varicella vaccine
- Annual Influenza vaccine

Individuals with suspected latex allergy/glove reaction should let their supervisor know.

Report a Work Related Injury or Exposure by notifying your supervisor or the PCC **IMMEDIATELY**. Go to **Workplace Health and Safety** in the HR portal or your department HURT box where you will receive additional instructions. Then call the HURT LINE ext. 4878 if assistance is needed. Report all needle sticks or accidental exposure to blood or other body fluids **IMMEDIATELY** to assess risk exposure and need for post-exposure Prophylaxis. Call Employee Health Ext. 4179 for exposure/injury follow up.

After reporting an exposure, go to the Hurt box provided in your department and pull out the exposure (red) folder and follow the instructions in the packet. Be sure to fill out all of the required forms. Send completed forms to Employee

### CONSCIOUS OBJECTION

Kadlec recognizes that some employees might not want to participate in an aspect of patient care or treatment due to cultural/religious values, ethics and beliefs. Some employees have the right to ask for an accommodation. Reference the Conscious Objection Policy via HR Portal.

### STAFF EDUCATION

Kadlec encourages continued professional development through:

- Housewide & Department Orientation
- Learning plans and goals
- Department meetings
- In-services and conferences
- Tuition Assistance Program for degree programs and certifications
- Real time Feedback and Annual Performance Reviews

### ETHICS PROCESS

The Ethics committee is available at Kadlec to provide assistance in treatment decisions, provide education regarding ethical issues, and assist with patient rights policy review. Contact the Primary Care Physician, Chaplain, Hospital Social Worker or the Patient Care Coordinator (PCC) to initiate an Ethics Consult.

### PATIENT RIGHTS

All adult and pediatric inpatients receive a copy of the Patient's Bill of Rights at admission. The Patient Rights are also posted in all outpatient waiting rooms.

### SENTINEL EVENTS

Joint Commission has defined a sentinel event as a patient safety event (not primarily related to the natural course of the patient's illness or underlying condition) that reaches a patient and results in:

Death, permanent harm, severe temporary harm OR one of the following:

- Patient suicide within 72 hours of discharge
- Unanticipated death of a full-term infant
- Discharge of an infant to the wrong family
- Abduction of any patient receiving care, treatment and services
- Any elopement of a patient from a staffed around the clock care setting, leading to death, permanent harm or severe temporary harm
- Hemolytic transfusion reaction involving administration of blood or blood products having major blood group incompatibilities
- Rape, assault or homicide of any patient, staff member, practitioner, visitor or vendor
- Invasive procedure including surgery on the wrong patient, wrong site or wrong procedure
- Unintended retention of a foreign body after surgery or procedure.
- Severe neonatal hyperbilirubinemia (bilirubin >30)
- Prolonged fluoroscopy with cumulative dose >1500 rads to a single field, or any delivery of radiotherapy to the wrong body region or >25% above the planned radiotherapy dose.

### PATIENT ADVOCACY

Every KRMC staff member is a patient advocate. The patient or family has the right to express their concerns about care and services without fear of retaliation. Every attempt should be made to resolve patient care concerns ASAP by those present at the time. If the concern cannot be resolved at the time, or the patient requests it, contact the Patient Advocate. In addition complete a Quality Review Report (QRR) via KWeb so an appropriate follow-up can be made per CMS and JC Standards.

### RISK MANAGEMENT (RM)

Events that pose a threat to the organization include any risk, event, error, hazardous condition, or set of circumstances that has harmed or could lead to patient harm or loss to the organization are reported by completing a QRR via KWeb. Serious events or patient harm events should be reported to RM immediately or the PCC after hours.

### ADVANCED DIRECTIVES

Advanced Directives refer to oral or written instruction about future medical care in the event that the patient is unable to express their medical wishes. Two types of advance directives:

- A Health care directive (Living will) is designed to answer questions about life sustaining treatment if the patient has a terminal condition
- Durable Power of Attorney-Healthcare appoints someone to represent the patient's wishes if the patient is unable.

Information about Advance Directives (AD) is provided to all patients 18 years or above upon admission. A copy is requested if the patient already has one. If the patient wishes to establish an AD the physician is notified for discussion and orders as indicated. Presence or absence of one does not impact routine healthcare.

### POLST

The Physician Orders for Life Sustaining Treatment (POLST) is used to communicate the patient wishes regarding life sustaining treatment in accordance with their Advanced Directives. This form was developed by WSMA and is considered a physician's order by EMS personnel and also honored by ED physicians when presented.

### PATIENT SAFETY 2017 National Patient Safety Goals

#### Patient Identification

- Use at least two patient identifiers (Name and DOB)
- Eliminate transfusion errors related to patient misidentification

#### Communication

- Evaluate the timeliness of reporting test results to the right staff person on time

#### Medication Safety

- Label all medication or solution containers on & off the sterile field in a procedure setting
- Reduce the likelihood of patient harm associated with the use of anticoagulant therapy
- Maintain and communicate accurate patient medication information (Med Rec)
- On admission, document the medication the patient currently takes
- Compare the patient's current medications with those ordered and resolve conflicts
- Provide the patient written information on medications the patient should be taking when he/she is discharged
- Explain the importance of managing medication information to the patient at discharge or the end of an outpatient encounter

#### Clinical Alarm Systems

- Establish policies and educate staff about alarms management and the importance of timely response when an alarm is heard

#### Health Care Associated Infections

- Comply with current CDC hand hygiene guidelines
- Improve compliance with hand hygiene guidelines
- Implement evidence based practices to prevent Health Associated Infections (HAI) due to Multi-Drug Resistant Organisms (MDRO)
- Implement evidence based practices to prevent central line associated bloodstream infections (CLABSI)
- Implement best practices for preventing surgical site infections (SSI)
- Implement evidence-based practices to prevent catheter associated urinary tract infections (CAUTI)

#### The organization identifies patients at risk for suicide

- Identify patients at risk for suicide
- Provide a safe environment
- Provide prevention information at discharge

#### Universal Protocol - Time out

- Conduct pre-procedure verification
- Mark the surgery site if laterality or levels are involved
- A time out is performed and documented before the procedure

#### HELPFUL HINTS

- Wear your ID badge at all times
- It is OK not to memorize what to do, but you must know where to find the information
- Know the location of all your manuals