

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
- From Dirty to Clean Tasks
- After touching dirty equipment or surface
- Before/after eating or preparing food
- After using the restroom

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), Gown and Gloves

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. Always use your own log in.

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

Health for a better world.

PROMISE STATEMENT

Know me, care for me, ease my way.

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.

THE KADLEC EXPERIENCE

Excellence is driven by a personal connection to our mission, vision, values, and promise. As an organization, and as individuals, we strive to partner with each other and our patients to provide safe, compassionate care. Through our actions, we strive to demonstrate the behaviors that deliver on our promise: know me, care for me, and ease my way. We take pride in our personal and environmental appearance, knowing that a good first impression puts our patients' minds at ease. We value good communication as the foundation of a positive experience and work to build trust through communication tools such as AIDET and the tones, tools, and behaviors of Caring Reliably. Our commitment to our patients and peers is rooted in our values and evidenced by responding to their needs in proactive and positive ways. When it comes down to it, we each represent Kadlec and are responsible for working to create the best place to work and receive care.

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 and Kadlec.org.

COMPLIANCE

Report all compliance and privacy concerns on the Integrity Line by calling 1-888-294-8455 or clicking the “compliance hotline” link on the intranet or on Kadlec.org

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 People, Service, Quality, Finance, and Growth measures.
- Understand your department Promise Board!

SAFETY PROGRAM

EMERGENCY - Dial “4444”

Off Campus/Clinics - Dial 911

Code Red – Fire

Code Silver – Active Assailant/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/Safety Committee
- On Call Administrative support: 136-4001
- Safety officer: Beki Hammons
- Patient Safety Manager: Teresa Robinson
- Integrity Line (can report anonymously – see more information below)
- Joint Commission/ Department of Health Medical Equipment Failure - Report to Clinical Engineering.

PUBLIC SAFETY

Police/Fire - Dial 4444

Off Campus/Clinics - Dial 911

Security:

Emergency 4444 (Off site/Clinics 911)

Non-Emergency (Security) 136-4710

Smoking or tobacco use is not permitted on any Kadlec property.

EMERGENCY OPERATIONS PLAN

Know your responsibility during an emergency and where your department specific Standard Operating Procedures binder (SOP) is located for instructions.

FIRE SAFETY PREPAREDNESS

Fire Safety	Fire Extinguisher
Remember RACE: R: RESCUE A: ACTIVATE C: CONTAIN E: EVACUATE/ EXTINGUISH	Remember PASS: P: PULL A: AIM S: SQUEEZE S: SWEEP

Locations in my area: _____

Nearest Pull Station: _____

Nearest Fire Extinguisher: _____

SAFETY DATA SHEETS (SDS)

SDS documents for your area can be found on Maxcom link located on the Kadlec Health website.

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 caregivers 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

CAREGIVER HEALTH SERVICES

Caregiver Health Services (CHS)
136- 4179 Monday – Friday 8:00 am-4:30pm

Free Illness Prevention:

- Mask fittings (if required)
- PAPR Trainings

Free screening for infectious disease and immunization are available:

- TB Quantiferon
- Hepatitis B vaccine
- MMR vaccine
- Tdap vaccine
- Varicella vaccine
- Annual Influenza vaccine

Individuals with suspected latex allergy/glove reaction should discuss alternatives with their supervisor.

Report a Work Related Injury or Exposure by notifying your supervisor or the PCC **IMMEDIATELY**. Go to Sedgwick **Leaves and Work Injuries** in the HR portal (caregiver.ehr.com) to report your injury/exposure. Call CHS 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 CHS at 136-4179 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. Fax completed forms to CHS at 509-942-2161.

CONSCIOUS OBJECTION

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

CAREGIVER 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 Health Ethics committee is available to support staff, physicians, patients and family members with ethical dilemmas arising from care involving a variety of medical facts, complex decisions, and a wide range of personal values. To initiate a consult, contact the Primary Care Physician, Chaplain, Hospital Social Worker or the Patient Care Coordinator (PCC).

RISK MANAGEMENT (RM)

Safety events are reported via Datix Event Report (QRR) located on the KWeb. In addition, injury to a visitor, damage to equipment, property (including buildings and vehicles), or any set of circumstances that could lead to loss or injury must be reported via Datix QRR located on KWeb.

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 or temporary harm OR one of the following:

- Suicide within 72 hours of discharge including from the ED
- 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 (unauthorized departure) of a patient leading to death, permanent or severe temporary harm to the patient
- Hemolytic transfusion reaction involving administration of blood/blood products with major blood group incompatibilities
- Rape, assault or homicide of any patient or staff member, LIP, visitor or vendor while receiving care, treatment, and services or while on site leading to death, permanent or severe temporary harm
- Invasive procedure, including surgery, on the wrong patient, the wrong site, or that is the wrong (unintended) procedure
- Unintended retention of a foreign object in a patient after an invasive procedure, including surgery
- Severe neonatal hyperbilirubinemia (bilirubin >30 milligrams/deciliter)
- Prolonged fluoroscopy with cumulative dose >1,500 rads to a single field or any delivery of radiotherapy to the wrong body region or >25% above the planned radiotherapy dose
- Fire, flame, or unanticipated smoke, heat, or flashes occurring during an episode of patient care
- Any intrapartum (related to the birth process) maternal death
- Severe maternal morbidity not primarily related to the natural course of the patient's condition when it results in permanent harm or severe temporary harm (Maternal morbidity defined as 4+ units of PRBC or admit to ICU)

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 concerns by staff 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 DATIX Quality Review Report (QRR) via KWeb so an appropriate follow-up can be made per CMS and JC Standards.

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. If the patient has an AD that is not on file, a copy is requested. 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 Washington State Medical Association and is considered a physician's order by EMS personnel and also honored by ED physicians when presented.

PATIENT SAFETY 2020 National Patient Safety Goals

Patient Identification

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

Communication

- Ensure the timeliness of reporting test results to the right caregiver

Medication Safety

- Label all medication or solution containers (syringes, cups, basins) on & off the sterile field in a procedure setting
- Reduce the likelihood of patient harm associated with the use of anticoagulant therapy, including Direct Oral Anticoagulants (DOACs)
- 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 keeping up-to-date medication information and providing it every time they visit a doctor.

Clinical Alarm Systems

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

Health Care Associated Infections

- Comply and improve compliance with current CDC 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 especially when laterality or levels are involved
- A time out is performed and documented before every procedure.

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 prominent areas throughout the hospital and clinics.