



Hospice of Cincinnati & Hamilton Annual Mandatory Education for Volunteers General Safety and Infection Control

FIRE SAFETY

The actions you take in the first few moments after the outbreak of a fire are *critical*. Your response to each fire alarm or drill must be the same as if it were an actual fire.

Fire Response

Know your department's fire plan.

REMEMBER THE EXPRESSION "R A C E":

Rescue staff, patients or visitors in danger.

Activate the fire alarm pull station—and call the emergency number.

GSH and Bethesda North - 911

Bethesda Oak - 911

Non-hospital sites - 911

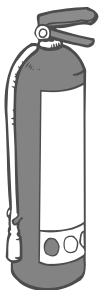
Contain or **C**onfine the smoke and fire. Close doors to keep the smoke and flame confined.

Extinguish the fire—or **E**vacuate. Know your department's fire plan.

At Hospice of Cincinnati:

- Rescue people in immediate danger.
- The automatic fire and smoke doors are released and closed.
- Dial the emergency number for that location and/or activate the fire alarm pull box.
- The Operator notifies the Fire Department.
- The Alarm Response Team responds to the fire area.
- Clear the corridors of patients and visitors. Clear the corridors of equipment.

Fire Extinguishers



Used properly, a portable fire extinguisher can save lives and property by putting out a small fire or controlling it until help arrives. You must know how to use the extinguisher. **Do not use a fire extinguisher prior to reporting a fire, which is done by activating the pull station or calling the hospital emergency number.**

There is no time to read directions during an emergency. Learn the locations and types of fire extinguishers in your work area.

How To Use A Fire Extinguisher “PASS”:

Stand 6 – 8 feet away from the fire.

Pull the pin: Some extinguishers require releasing a lock latch, pressing a puncture lever, or other first step.


Aim at the base of the fire: Point the extinguisher nozzle (or its horn or hose) at the base of the fire.

Squeeze the handles together: This  releases the extinguishing agent.

Sweep from side to side: Keep the extinguisher aimed at the base of the fire and sweep back and forth until the fire appears to be out. Watch the fire area. If the fire does not go out immediately, leave the area at once. **NEVER TURN YOUR BACK ON A FIRE.**

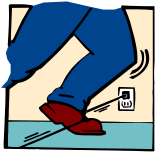
ELECTRICAL SAFETY

Electricity facts

- ◆ Leakage of electricity is felt
 - ◆ **Careless use** of electricity causes injuries.
 - ◆ Electrical hazards may
 - ◆ **Conductors** are metals or
 - ◆ **Insulators** are materials like rubber or plastic that resists the electricity and keep the current on its path.
- 
- as a shock. Electric shock can be severe enough to kill. causes **10 percent** of job-related deaths and many serious cause fires and/or explosions. other materials that conduct electricity.

A **ground** is connected to the ground through a conductor like a metal circuit box or a three-pronged plug to keep the wire from touching you and making you a conductor that electricity will go through.

Safety Procedures

1. Inspect electrical equipment and wires/cords before use for proper insulation, grounding and tight connections.
 2. Read and follow the manufacturer's instructions for your equipment.
 3. **Plug essential patient care equipment into red plugs** whenever possible.
 4. Avoid using extension cords whenever possible. If needed, they must be temporary, grounded, surge protected and not running across the floor.
 5. Plugs must match their receptacles. Never alter a plug.
 6. Do not fasten cords with staples.
 7. Make sure your hands are dry before you handle anything electric.
 8. Do not use any piece of electrical equipment that sparks, smells, smokes or shocks. Mark it “Out of Order” and report it to your supervisor immediately.
 9. Always obey barriers, signs and other warnings to stay away from electrical equipment.
 10. Patient care equipment must have a grounded plug and be inspected by Clinical Engineering.
 11. Personal electrical items must be inspected by Engineering and Maintenance or Clinical Engineering before use.
 12. Keep electrical cords away from heat or water.
- 

If you observe a problem with any of the above, report it immediately to your supervisor.

HAZARDOUS MATERIALS PROGRAM

The Right to Know

Some products used at TriHealth contain *one or more chemicals* that may pose a physical or health hazard. Training must precede working with any hazardous materials and also whenever the hazards change.

Physical Hazard Categories:

- Flammables/Combustibles
- Explosives
- Corrosives
- Irritants

Health Hazards include:

- Heart problems
- Kidney and Liver damage
- Reproductive problems including sterility
- Cancer

OSHA's Hazard Communication standard directs employers to instruct employees of potential risks and hazards.

Employees have the "Right to Know":

- The potential hazards involved in their daily work routine.
- Chemical hazards with which they will be working.
- How to detect toxicity caused by chemical exposure in order to evaluate corrective actions.

Each department/site maintains a Chemical Inventory of all hazardous products in the organization. Each department must maintain its own Chemical Inventory.

Safety Data Sheets (SDS)

Content is mandated by OSHA.



Safety Data Sheets are now located in MSDS Online on LinkNet, under the Quick Links tab. Department specific SDSs can be found in the MSDS Online tabs labeled 'All Products', 'Location' and 'Manufacturers' or searched using the 'MSDSonline Search' tab.

Never work with a product that does not have a label, even if you know what the product is and the hazards it presents. Put aside any product that is not properly labeled and bring it to the attention of your supervisor. Replacement labels can usually be obtained by contacting the manufacturer. Finally, assume every product is hazardous unless the label or training tells you otherwise.

Medical Equipment

EQUIPMENT REPAIR PROCEDURE

If a piece of patient care equipment fails during use, the following actions should take place:



- Remove the equipment from the clinical setting.
- Tag the piece of equipment as being faulty, with a **complete** description of the problem and a contact person from the appropriate department.
- Call the appropriate department listed below to perform the repair.

If an employee, patient, physician, student, volunteer or visitor was injured by the failing piece of equipment, **Risk Management Services should be notified immediately** and a Safety Event Report should be filled out (and an Employee Injury/Illness Report, if appropriate). Make sure any involved equipment, packaging and instructions are saved and that the equipment is removed from service. (See Safe Medical Devices Act.)

SAFETY EVENT REPORT

IRIS Safety Event Reports are completed to identify, and document safety issues or concerns that impact the care of patients or the safety of patients, staff members or visitors. A safety event can be submitted by anyone who has access to **LinkNet**: staff member, physician or volunteer.

When an actual safety event, near miss or potential safety hazard is identified:



- ◆ If the party involved is injured, care for those injuries as your first priority.
- ◆ Alert your immediate supervisor.
- ◆ Retain any equipment involved just as it was during the incident and remove it from service.
- ◆ Complete and submit the Safety Event Report located on LinkNet.
- ◆ The computerized Safety Event Report will automatically be sent to Patient Safety and your department manager.
- ◆ If serious harm or injury occurs, notify Risk Management at 569-4051 and Patient Safety at 569-5181. After regular office hours, ask the operator to page the person on call for Risk Management.

Safety Event Reports are not to be placed in the patient's medical record nor should it be stated in the medical record that a safety event was completed. The Safety Event Report should be a clearly stated, factual record of the incident. Avoid speculating, stating opinions or assigning blame or criticism regarding the event.

Ergonomics

PROTECTING YOUR BACK

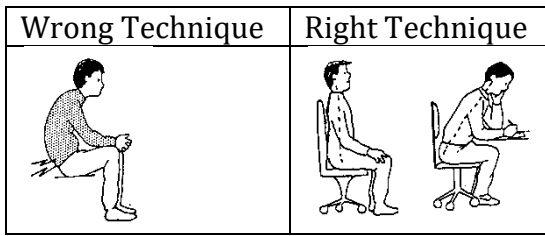
Don't be a victim of back pain. Learning how to move and hold your spine properly will reduce your risk of back pain. Most strains and sprains to your back are caused by over-stretching the back's muscles and ligaments. Learning how to move correctly and position your spine properly will reduce your risk of back problems.

Most back problems occur when lifting due to:

- Incorrect lifting techniques
- Inadequate use of assistance (mechanical and/or other staff)
- Lack of worker fitness

TO HELP PREVENT BACK PROBLEMS:

1. MAINTAIN GOOD POSTURE



To help prevent strains to the lower back, maintain the spine's length at all times-not just when lifting. Slouching when standing or sitting puts a strain on your back muscles. This can cause your back muscles to be already tired out and weakened before you even try to lift anything.

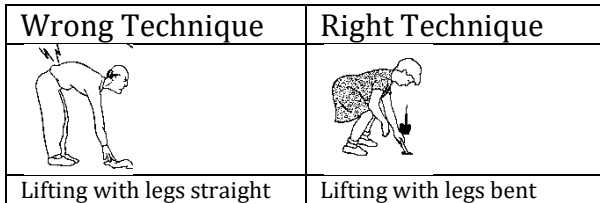
2. BE PHYSICALLY FIT FOR YOUR JOB

A. GET ADEQUATE REST - If you are tired, your muscles are tired too! Stop periodically to stretch in order to ease away any muscle tension.

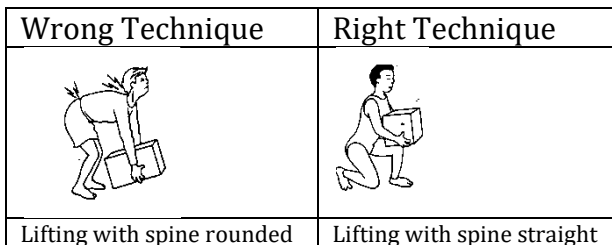
B. EXERCISE - Exercise should be part of your daily routine for the rest of your life. It will allow you to maintain good range of motion and strength of all of your joints. The best way to start your day at home is with **back and leg stretches**. Think of stretching like brushing your teeth: Don't leave home until it's done! Do **strengthening** exercises and 30 minutes of **aerobic activity** 3 to 4 times a week.

Also, think of work as an athletic event. Football players don't show up on game day without first preparing their bodies to work hard. You should do the same.

3. LEARN AND MASTER CORRECT LIFTING TECHNIQUES





With your feet at least shoulder width apart, bend your knees at the same time you bend at your hips, so that your hips push backwards and at least one foot stays flat on the floor.





When you lift, you want the line of your spine to be straight. That's why your hips have to push backwards. Keeping your stomach muscles tight when you lift will help to support the back and keep it straight.

When you lift at a full arm's distance, it puts a tremendous overload on your back. Always keep a load close to your body. Bend your legs to get close to a workload on the floor, use a stepstool or ladder if the load is above shoulder height.

Wrong Technique	Right Technique
	
Spine Twisted	Spine Straight

Always face whatever you are doing or lifting. Move your feet to turn so that you do not twist your spine. Move your whole body and not just your arms.


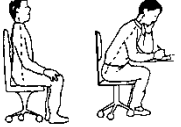
Wrong Technique	Right Technique
	
Lifting too much weight	Lifting within your ability



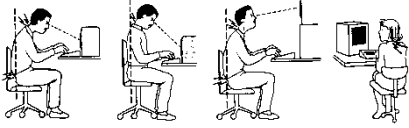
Size up a load before you lift it. Don't try to lift objects that are too heavy for you or whose size and shape are too awkward to allow a good grip. Work as a team and use mechanical aids such as lifting belts around patients' waists, transfer boards for sliding or Hoyer's lifts for completely immobile or very obese patients.

WORKING IN AN OFFICE & WORKING WITH COMPUTER TERMINALS

It is important to pay attention to posture when sitting for long periods of time. Even when sitting, you want to keep the spine straight so that you don't overtire the back's muscles and ligaments. This includes sitting at work, at meals, at home watching TV, playing video games, or using a computer.

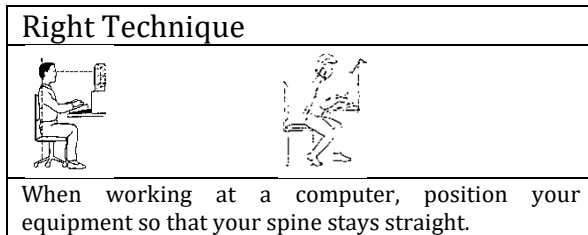
Wrong Technique	Right Technique
	
When sitting don't slouch	

Use a chair that allows both feet to be flat on the floor or use a foot support (a phone book may work). Sit all the way back in your chair with the back of your low spine and hips firmly against the back of the seat. Shift position every so often as shown: don't sit or stand for too long at a stretch.

Wrong Technique


The monitor should:

- Be positioned so that your body and head are both facing forward.
- Sit at approximately arms length from the monitor.
- Be positioned to minimize glare. Try drawing drapes, adjusting blinds, or dimming overhead lighting.
- Be adjusted so that the top of the computer is at about eye level when sitting at the computer.



The keyboard should: Be positioned so that when your elbows are bent to 90°, your hands rest comfortably on the keyboard with your wrists straight.

Note: do not use wrist rests while you are typing. Use them only briefly when you pause from typing – which should be done for a moment at the end of every page.

All illustrations in this section, except fourth one on page 14 are from the *Back Pain Book*, Mike Hage, illustrated by Karen Dirr, 1992 by Peachtree Publishers, Atlanta, Georgia.

INFECTION PREVENTION

Work Practices:

Standard Precautions

Standard Precautions is a collection of barrier techniques (**gowns, gloves, masks, eye protection or use of a fluid face shield**), **use of safety devices, and performance of hand hygiene which includes handwashing or the use of the alcohol rinse/foam**. Use of these practices are designed to protect employees from infections caused by contact with patients' blood or body fluids and are used **for all patients at all times regardless of the patient's diagnosis or presumed infectious state**. This is the law from OSHA as required by the Bloodborne Pathogen Standard. Protect yourself by handling all blood and body fluids as if they are infectious using Standard Precautions and personal protective equipment (PPE).

HYGIENE

Hand hygiene is a general term that applies to handwashing, antiseptic hand wash, alcohol hand wash, or surgical hand antisepsis. The purpose of hand hygiene is to prevent or decrease the transmission of pathogens from one patient to another, and to decrease the risk of a health care worker becoming colonized or infected by pathogenic organisms.

Whenever possible, handwashing facilities (sinks) and/or alcohol hand rinse/foam will be readily accessible to employees, patients and visitors. Hand hygiene should be performed before and after direct patient contact, after touching equipment, surfaces or furniture in the patient's room, after removing gloves and upon entering or exiting patient rooms, selecting either **A. handwashing with soap and water** or **B. use of an alcohol hand rinse/foam**. There are **NO** exceptions.

Periodically offer your patients and visitors the opportunity to wash their hands, especially just before meals.

A. Handwashing with Soap and Water:

The purpose of handwashing is to remove transient microbial contamination acquired by recent contact with infected or colonized patients or environmental surfaces.

Indications for handwashing with soap and water include:

- ❖ When hands are visibly soiled or contaminated with organic material
- ◆ Before doing an invasive procedure
- ◆ When coming on duty and leaving the hospital
- ◆ After going to the bathroom
- ◆ Before going to lunch, dinner or breaks



Handwashing procedure:

- ◆ Wet hands with water
- ◆ Apply soap and rub hands together vigorously for **at least 15 seconds** covering all surfaces of the hands and fingers.
- ◆ Rinse hands with water and dry thoroughly
- ◆ Use a paper towel to turn off faucet
- ◆ Apply hospital-approved lotion

NOTE: When caring for the patients with diarrhea, infectious gastroenteritis, Norovirus, or C. difficile, wash hands with soap and water for hand hygiene. Alcohol hand rinses/foams are not as effective at killing C. difficile spores and some intestinal viruses.

B. Alcohol Hand Rinse/Foam

The purpose of using the alcohol hand rinse/foam is to inhibit or kill transient and resident hand flora. Since the alcohol hand rinse/foam does not remove soil or organic material, handwashing with soap and water must be performed if hands are visibly soiled. Only a hospital approved alcohol hand rinse/foam may be used.

Indications for use of the alcohol hand rinse/foam include:

- ◆ Upon entering or exiting a patient room
- ◆ Before and after routine patient care, even if the hands appear clean
- ◆ Immediately after removing gloves
- ◆ After contact with a patient's intact skin
- ◆ After contact with inanimate objects in the immediate vicinity of a patient
- ◆ Before contact with particularly susceptible patients, such as patients with invasive devices, immunosuppressed patients and newborn infants
- ◆ Before donning sterile gloves when inserting invasive devices such as central intravascular catheters and indwelling urinary catheters

Alcohol hand rinse/foam procedure:

- ◆ Apply enough alcohol-based hand rinse/foam to cover the entire surface of the hands and fingers (generally considered 1.5 ml, the amount dispensed from one pump, or an application the size of a nickel). The alcohol-based hand rinse/foam should come into contact with all surfaces of the hand.
- ◆ **Rub** the solution vigorously into hands until dry. Pay particular attention to the tips of the fingers, the thumbs, and the areas between the fingers.
- ◆ Use of the alcohol hand rinse/foam when caring for patients in precautions is permitted, with the exceptions noted in Section A, Handwashing with Soap and Water.

Care of Nails

Artificial nails, nail art, acrylic nails, gel nails, nail wraps and nail jewelry, etc., have been implicated in outbreaks of hospital-associated infections in a variety of healthcare settings. Employees who touch patients in the course of their duties are prohibited from wearing artificial nails. Artificial fingernails are defined as any material applied to the nail for the purpose of strengthening or lengthening nails including, but not limited to:

- ◆ Wraps, acrylic, gel, silk or fiberglass
 - ◆ Gel overlays
 - ◆ Acrylics
 - ◆ Tips
 - ◆ Tapes
 - ◆ Any appliquéés other than those made of regular nail polish
1. Nails need to be trimmed so they are no longer than $\frac{1}{4}$ inch past the tip of the finger. They may need to be shorter to avoid puncturing gloves or injuring patients in certain situations if determined by the employee's manager.
 2. **Polish, if worn, must be fresh without cracks or chips, not acrylic or gel polish.**
 3. Attention must be given to cleaning around the base of the nails, cuticles, as well as the undersides of nail tips when washing hands.
 4. Nail piercing is prohibited.

Hand lotions

Employees are encouraged to use hospital-approved hand lotion as it can prevent or minimize skin dryness and irritation caused by contact dermatitis. Petroleum-based lotions compromise the integrity of the latex in disposable gloves and should **NOT** be used. Hand lotion compatible with TriHealth hand hygiene products is available through Logistics. Managers or department heads may keep a par level of lotion in the clean utility room or order them via Lawson #117572. The Owens and Minor Vendor number is 1670.

❖ Use disposable gloves appropriately

Disposable gloves should be changed and hand hygiene performed:

- After touching body substances, non-intact skin, or contaminated items.
- Between patient contacts to avoid transfer of germs to other patients or the environment.
- Between tasks and procedures on different body sites with the same patient to prevent cross contamination of those body sites.
- Do not touch equipment or the environment while wearing contaminated gloves.

HIPAA PRIVACY

The following is a reminder of some of the key provisions of the HIPAA privacy requirements. Also, please note some of the frequently asked HIPAA questions and answers that are listed following the key provisions.

Uses and Disclosures of Protected Health Information ("PHI")

- A health care provider may disclose patient health information, without the patient's authorization to do so, for the purpose of *Treatment, Payment, or Health Care Operations*.
- Most other uses or disclosures require authorization from the patient.
- Certain uses and disclosures are exempt from having to have the patient's Authorization (e.g., disclosures required by Ohio law such as Tumor Registry and Trauma Registry disclosures).

Verifying the Requestor

- Employees must take reasonable



and appropriate measures to verify the identity and

“need-to-know” of all persons requesting PHI.

For example: The Medical Records Department must see a patient’s picture I.D. before releasing a copy of the records to him/her.

- Verification is required only when the Requestor is not already known by the TriHealth employee.
For example: The clerk personally knows Dr. Smith. Dr. Smith has asked to see the patient’s record in order to treat her. The clerk does not need to see Dr. Smith’s I.D.

Minimum Necessary

- Employees must make reasonable efforts to disclose only the minimum amount of health information necessary to accomplish the purpose of the disclosure.
- Also, access by an employee to a patient’s health information and requests by an employee to access health information should be only for the minimum information necessary to do his/her job.
- This rule does not apply to treatment situations. In other words, if a health care provider needs access to a patient’s entire medical record in order to treat the patient, then the health care provider can have access to the entire record.

If you become aware of any HIPAA violation or a suspected violation, please report this immediately to TriHealth's Security Officer at 569-6167. Security will initiate an incident report to track the situation.

COMPLIANCE PROGRAM

Hospice of Cincinnati follows the TriHealth compliance program including the Code of Ethical Business and Professional Behavior. Compliance is about “doing the right thing” at all times in all settings. We want to prevent, detect and correct compliance issues. If you have a question of concern about an activity being unethical, illegal or wrong you may contact:

- Your supervisor, manager or any member of the TriHealth management team
- Contact the Corporate Compliance Officer
- Call the TriHealth Alerline

EMERGENCY PROCEDURES

Emergency Situations

Suspicious Looking Package

Contact Security immediately and until cleared by Security.

stay away from the package. Instruct anyone in the area to stay

Bomb Threats

- Obtain as much information as possible from a telephone informant (see Bomb Threat Checklist on LinkNet. Contact Security immediately. GSH - 911, Bethesda Oak/North
- Evacuate the area or areas where the bomb may be; do not return until “All Clear” given.
- Security is in control until outside authorities arrive.
- Do not touch a suspicious package.



possible from a telephone informant (see Bomb Threat Checklist on LinkNet. Contact Security immediately. GSH - 911, Bethesda Oak/North

- Make a list of unusual items in the area and give to Security/Police.
- Do not try to restrain or apprehend a person on site and make sure Security/Police know they are present.
- Be observant. Notice the person's clothing, height, weight, color of hair/eyes, direction going.

**DO NOT TAKE A
BOMB THREAT LIGHTLY**

Hostage Situation

- React with caution.
- Inform Security immediately – they are in control until outside authorities arrive.
- Off sites should contact the Police.
- Never approach or try to apprehend the perpetrator. This may result in injury.
- Evacuate all other employees.

Severe Weather

- Hospitals alerted by overhead announcement of “watch” or “warning”.
- Off-sites tune to 700 WLW and follow department plan.
- Severe weather **watch**: conditions are favorable for severe weather.
- Severe weather **warning**: severe weather is passing by the site.



Response: refer to your department plan.

Utility Outages

- Refer to your department plan.
- Be familiar with your department's responsibilities.
- For off sites, contact the building owner/maintenance.

Remember, during electrical outages at Oak, North, GSH and Hospice, backup generators will come on automatically. Under generator power not all electrical outlets will work. Those that will work are red in color or some may say “emergency” on the outlet. The red electrical outlets are only to be used for critical equipment. Unplug all non-critical equipment until power is restored.

SMOKING POLICY

Policy

Smoking or use of tobacco products is prohibited in TriHealth facilities and on TriHealth campuses including:

- Bethesda North Hospital
- Bethesda Medical Center
- Bethesda Butler County Medical Center
- Bethesda Surgical Center
- Good Samaritan Hospital
- Good Samaritan Hospital at Western Ridge
- Bethesda Oak Campus
- Corporate Health including TriHealth Fitness and Health Pavilion
- SeniorLink
- Hospice of Cincinnati
- TriHealth Physician Partners and Physician Institutes



products is prohibited in TriHealth facilities and on TriHealth campuses including: at Arrow Springs

NOTE: See policy for certain exceptions applying to Hospice of Cincinnati patients. Also, policy may not apply beyond employees around leased spaces for diversified services.

The “Tobacco Free / Smoke Free Campuses policy applies to all employees, volunteers, medical staff, patients, visitors, contractors, vendors and tenants.

Discriminatory Harassment Definition

Discriminatory Harassment may include, but is not limited to, such inappropriate conduct as offensive verbal “kidding”, “teasing” or jokes; foul or obscene language or gestures; displays of foul or obscene printed or visual material. For example, verbalized slurs, offensive comments and behaviors against a person based upon the individual’s color, race, religion, national origin, age, sexual orientation, gender identity, disability, veteran or military status, sex (including pregnancy) or genetic information are not tolerated.

What do you do if you experience harassment or someone reports to you that they have experienced harassment?

The following is a quote from TriHealth’s Harassment Free/Diversity Inclusive Policy (#13_ER23.00):

If an employee feels that he or she has experienced or witnessed discrimination or harassment, he/she is to immediately notify their Employee Relations Consultant (or supervisor if Employee Relations is not available) regardless of whether the conduct constitutes a violation of the law.

If complaints are substantiated, appropriate disciplinary action will be taken that are believed to be sufficient to prevent any further discrimination, harassment, or retaliation from occurring up to and including termination.

DIVERSITY AND INCLUSION

Diversity is all around us. It impacts us daily, personally and professionally. We must be aware of the opportunities that diversity brings. At TriHealth, we believe that effective *diversity management* is key to providing quality care to our patients as well as providing a respectful and inclusive work environment for our staff.

We define *diversity* as the unique differences and similarities that our employees, patients, families, physicians, volunteers, and communities bring to our environment. At TriHealth, diversity includes much more than race and gender. It is a variety of characteristics, visible or not, that distinguish one individual from another. These characteristics include but are not limited to age, culture, religious beliefs, sexual orientation, gender, gender identity, race, physical size and physical abilities.

We believe that by embracing diversity, we can create a more positive, professional environment, provide an enriched work experience for our employees and physicians, and promote continuous improvement to provide excellent and compassionate care. By developing a diverse workforce, we will increase our talent pool, reinforce our mission, and strengthen TriHealth in ways that will maximize our performance and competitive advantage to the patients and communities we serve.

The phone number for the Office of Diversity is 569-6288.

INTERPRETER SERVICES

Interpreter Services for Limited English Proficiency (LEP) and Hearing/Speech Impairment

REMEMBER! Family or friends of the patient *are never* to be used for interpreting **key communication points of treatment/care**. Interpreter services are available at all times at **no cost** to the patient. Scheduling interpreter services in advance of the need, if possible, is preferred.

Key Communication Points of Treatment are medical encounters where a qualified medical interpreter *is required*. Key points include but are not limited to:

- “Acknowledgement of Informed Consent” or Informed Consent
- Assessment
- Discharge Planning
- Explain legal rights and/or financial obligations
- Explain medications and possible side effects
- Explain surgical or medical procedures, tests or care
- General Consent
- Health education
- History
- Home Health visit
- Physical exam
- Psychiatric evaluations and treatments

For **practical needs** (e.g., meals, blanket, light, etc.), family and friends may assist with communication.

Language Identification Cards for Limited English Proficient (LEP) Patients

The patient’s preferred language is documented at registration/admission. The LEP brochure, which lists multiple languages, allows the patient to point to the language he/she speaks. For a copy of this brochure contact the Patient Relations Department: BNH at 865-1115 or GSH at 862-2582.

Hearing Impaired: Special telephones (TDD-telecommunication device for the deaf) can be provided to our deaf patients by calling Logistics: BNH at 865-1338 or GSH at 862-1951.