

ANNUAL SAFETY EDUCATION

Culture of Safety

As health care organizations continually strive to improve, there is a growing recognition of the importance of promoting a culture of safety. A culture that actively practices safety will discuss and learn from its errors. Achieving a culture of safety requires an understanding of the values, beliefs, and norms about what is important in an organization and what attitudes and behaviors related to patient safety are expected and appropriate.

- Why is a Culture of Safety important?
- Reduces adverse events
- Emphasizes patient and staff safety
- Increases individual commitment to patient safety
- Ensures safety issues are addressed

At Aultman Health Foundation, we believe that employees are inspired by an organization's commitment to safety, where each employee advocates for the safety of patients as well as staff. This is achieved through an environment in which safety related issues are openly discussed. We are committed to improving patient and staff safety, encouraging and practicing teamwork, and providing a blame-free environment where reporting errors is encouraged.

Review of Emergency Pages

The Ohio Emergency Codes were adopted by Aultman Hospital in 2003. They continue to be the standard that all Ohio hospitals use for notification of emergencies. Community first responders (police, fire, EMS) dedicated to public safety have adopted these codes.

Code Red: Fire (Paged Overhead)

Fire pull stations are located near the exits and stairwells. Please locate the one closest to your unit. In the event of a Code Red, please follow the fire safety recommendations as instructed later in this newsletter.

Code Adam: Infant/Child Abduction (Paged Overhead)

Dial 36777 if an infant or child is missing or known to be kidnapped. If this occurs at an off-site facility, dial 911 before calling Security. Upon hearing this paged overhead, employees must secure all halls, stairwells, exits, and bridges leading to and from the hospital. Any person carrying an object large enough to conceal a newborn infant should be stopped and the package should be checked. If the person does not let the package be inspected, do not allow them

to leave the property. Call Security Services immediately at 36777. See the Code Adam policy in the RED Emergency Management Manual.

Code Black: Bomb/Bomb Threat

Keep the caller on the line, signal to another employee to call Security Services immediately at extension 36777. If this occurs at an off-site facility, dial 911 immediately. Begin asking the caller the questions from the back of the Green Bomb Threat sign on your unit for specific questions to ask the caller. Remember to write down their responses! Hold the green sheet in the air to signal someone to call Security Services at extension 36777.

Things to Remember during a call:

1. Remain calm!
2. Keep the caller on the line as long as possible.
3. Ask and write down as much information as you can (be aware of sound of voice, accents, background noise, etc.)

If a suspicious item is found: **DO NOT TOUCH IT.** Call Security immediately.

This newsletter will help you to meet your mandatory safety education requirements. The Joint Commission (TJC) Hospital administration, the Occupational Safety and Health Administration (OSHA) and various other regulatory agencies require an annual education on these topics.

Various other education topics are also included at the conclusion of the newsletter. It is your responsibility as an employee to read and understand these topics and apply them as needed.

In order to meet your requirements, you must read this newsletter and follow the directions based on your role in the organization, complete the test, and return your test to your supervisor. All tests will then be returned to Education & Development for tracking. If you have any questions while reading the newsletter or taking the posttest, please contact your supervisor or the Safety staff at extension 35875 or 34293.

Hospital Incident Command System (HICS)

HICS is a nationwide system created to coordinate disaster responses among government agencies, hospitals, police, fire and EMS. This can join hospitals and other response agencies together in a crisis. Everyone can communicate more quickly and effectively when using the structure of the Incident Command System. HICS is a flexible system designed around standardized positions rather than specific people.

The Incident Command Center is located in the Heart Center Classroom on the third floor of the 2010 Building.

When a disaster, **CODE YELLOW**, is called, each unit should send a representative to the Labor Pool with the number and type of staff members in their units. **The Labor Pool will always meet in the Morrow House Auditorium. DO NOT REPORT DIRECTLY TO THE EMERGENCY DEPARTMENT. Please refer to your red manual for other specific duties.**

Review of Emergency Pages *(continued)*

Code Yellow: Disaster (Paged Overhead)
An internal/external disaster has occurred. Each department or unit has a specific plan. Refer to the RED Emergency Management Manual. Send additional staff to the labor pool in the Morrow House Auditorium. **DO NOT REPORT DIRECTLY TO THE EMERGENCY DEPARTMENT.**

Code Gray: Tornado/Severe Weather - Phase I and Phase II (Paged Overhead)
Tornado or severe weather has been seen or reported within 20 miles of the facility. Refer to the RED Emergency Management Manual for specific job duties.

Code Orange: Hazardous Material Spill/Release
Confine the hazardous material and refer to the ORANGE Hazmat/Hazmat manual for further instructions. Notify the Spill Consulting Team at ext. 36888

Code Blue: Cardiopulmonary or Respiratory Arrest (Medical Emergency - Adult/Pediatric) (Paged Overhead)
Dial 35222 to activate. If this occurs at an off-site facility, dial 911 immediately.

Code Pink: Infant Medical Distress (Paged Overhead)
Newborn in distress in L&D, NICU, or OB
Dial 35222. If this occurs at an off-site

facility, dial 911 immediately.

Code Violet: Violent/Combative Patient
Dial 36777 for Security. If this occurs at an off-site facility, dial 911 immediately.

Code Silver: Person with Weapon/Hostage Situation (Paged Overhead)
Dial 36777 for Security. If this occurs at an off-site facility, dial 911 immediately. Isolate patients, visitors, and staff, if possible. Reroute all operational traffic away from areas above, below or adjacent to the incident. Work cooperatively with the responding police jurisdiction and the Security Department.

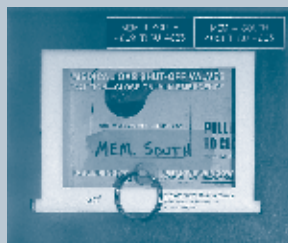
Code Brown: Missing Adult Patient (Paged Overhead Mr. or Mrs.)
Dial 36777 and contact all units on floor where patient was last seen. If this occurs at an off-site facility, dial 911 immediately. Put staff at all entrances/exits to floor. Security will monitor remainder of hospital. Code Brown will be paged overhead and prefaced with a Mr. or Mrs. depending on the sex of the patient.

Medical Assistance: Non-Patient Experiencing a Medical Problem
Dial 36777 if a visitor or employee needs medical assistance. If this occurs at an off-site facility, dial 911 immediately.

Emergency Preparedness Plan for Utilities

Medical Gases

In the event of a fire, the unit manager or charge person determines if the fire is severe enough to shut off the medical gases. Call the following departments if the oxygen is shut off: Respiratory Therapy, Maintenance, Safety, Security, and your Administrator. Know where your medical gas shut off is located and how to operate it.



Gas Shut-Off Valve

Communications

In the event of telephone failure, use the green-labeled telephones located in selected areas throughout the hospital. Please locate the green-labeled phone closest to your unit. This phone will have a large green sticker on the top. A listing of green-labeled phones can

be found in the red Emergency Preparedness manual. Security Department two-way radios have also been placed in all departments where green telephones are located as well as several other strategic locations across the facility. Additional locations include NICU, CVSICU, CVOR, CCU, Pediatrics and Psychiatry. If this occurs at an off-site facility, use the hospital supplied cellular phones. In the event that cellular service is not available refer to the Security-supplied two-way radios. Remember to keep both units charged and readily accessible.

Electric

In the event of a power failure, the red outlets will be powered by a generator and can be used for life saving equipment. Only life saving equipment is to be plugged into the red outlets. Coffee pots, microwaves, toaster, etc. are not to be plugged into these outlets at any time.

Fire Safety

Fire is a threat in hospitals. According to the National Fire Protection Association thousands of fires in hospitals are reported every year. Many patients are helpless in fire emergencies due to illness and special needs - this increases their risk of death.

There are four classes of fires:

Class A fires involve the burning of ordinary combustibles like wood, paper, clothes, rubber or certain plastics.

Class B fires involve the burning of gases and liquids

Class C fires involve the burning of electrical equipment such as appliances, air conditioning and heating units, motors, and generators that are plugged in.

Class D fires involve the burning of certain metals.

Types of Fire Extinguishers

Fire extinguishers are an important defense for putting out fires. They can save lives. Make sure you know where the fire extinguishers are kept and how to operate them.

In healthcare facilities, fire extinguishers are designed to put out Class A, Class B, and Class C fires. ABC extinguishers can be used to fight any type of hospital fires and are marked with an ABC. If a fire starts, think and act quickly and safely. Remember to act quickly and safely while following the steps associated with **R.A.C.E.** and **P.A.S.S.**

- R** - Rescue (anyone in harms way)
- A** - Alarm
- C** - Contain (the fire)
- E** - Extinguish/Evacuate

To activate the extinguisher:

- P** - Pull the pin
- A** - Aim the nozzle at the base of the fire
- S** - Squeeze the handle together
- S** - Sweep the extinguisher from side to side

1. Be prepared before a fire occurs...
2. Review how to move patients to another unit on your floor and how to move patients to a unit on a floor above or below your own.
3. Review exit routes
4. Keep the hallways of your work area free from obstructions.
5. Never block smoke doors or fire exits
6. Be familiar with smoke and fire walls.
7. Keep calm



Security Services

Security officers help provide a safe and secure environment for all employees, patients, and visitors. Services offered by the Security Department include escorts, tire changes, securing of valuables and response to emergency situations. Offices are located in the registration area of the emergency room and the ground level of the Memorial Building next to the stockroom. Employees are responsible for reporting any suspicious activities or persons to Security immediately at extension 36268.

Hazardous Materials

OSHA's Hazard Communication Standard, known as "Right to Know" is designed to educate and protect employees from contact with hazardous chemicals at work. Thousands of injuries and illnesses occur in healthcare facilities each year due to hazardous chemicals.

Toxicologists test materials and report the level of material we can work in without having bad effects. This amount is called an "exposure limit." Although we can work safely with hazardous materials below this limit, the best way is to keep our exposure as low as possible. To do this, use the lowest amount needed for a job, use good ventilation, wear proper protective equipment, and avoid contact with skin and eyes.

Chemicals can enter the body through four common ways:

Ingesting or Eating the Material

Eating or ingesting chemicals usually occurs when food and hazardous chemicals are used or stored in the same vicinity.

Workplace Violence

Every staff member has the responsibility of preventing workplace violence through early detection and reporting. If you become aware of a potentially violent situation, you must report it to your supervisor and to Security Services at extension 36268.

Concealed Weapons

Ohio's concealed carry law allows individuals to obtain a license to carry a concealed handgun in Ohio including into private businesses. Aultman has adopted a policy to restrict the carrying of handguns or any concealed weapons onto any of its properties (excluding governmental law enforcement officers). Employees are not permitted to carry firearms with them while performing in the role of their job regardless of location. Signs are posted at all main entrances of Aultman. Security and the unit supervisor should be notified immediately if anyone is believed to be carrying a weapon. At no time should any employee take unnecessary steps that could put your safety at risk.

Chemical Labeling

You may have noticed special labels on various chemicals at the hospital. Labels contain the chemical identity, hazards, and name/address of the manufacturer.



Every chemical should have a warning label. A warning label will show:

- The chemical name of the product
- Any hazardous warnings
- Any hazardous ingredients
- The name and address of the chemical manufacturer
- Target organs (the end organs the chemicals can affect)

You can work safely with chemicals by utilizing your Orange HAZMAT MANUAL.

Hazardous Materials *(continued)*

Through the Skin

Absorption through the skin usually requires significant contact time and can be minimized by preventing, using protective clothing (i.e. eye protection, gloves and good hygiene practices).

Breathing or Inhaling

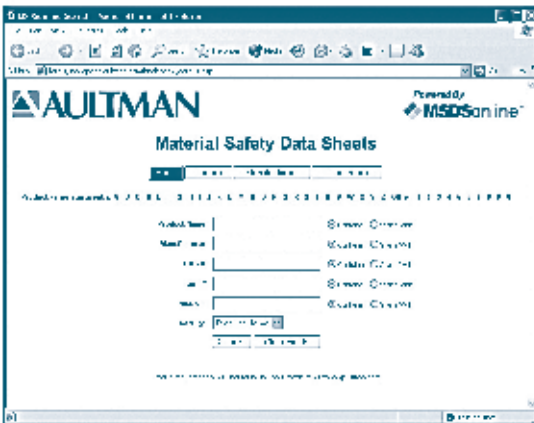
Inhaling chemicals is usually the most significant route of entry. Using only the amount of chemical or product necessary for the job, keeping containers closed except when moving or using materials and keeping good ventilation can reduce the risk of breathing the chemical

Punctures, Cuts, Open Wounds

Chemicals can enter the body through punctures, cuts and open wounds. If you have any of these injuries present, make sure they are adequately covered and you are using personal protective equipment.

Material Safety Data Sheet (MSDS)

The MSDS gives information on a chemical's hazards, how to handle the chemical, how to protect oneself when using the chemical, first aid instructions and the chemical's routes of entry. As a healthcare worker, you may need to use MSDS(s) for your own safety when working with chemicals. Our current system for getting MSDS information is MSDS Online™. You may get to this system by using the intranet and logging onto the Aultman home page, <http://intranet.aultman.com>. Click on "Applications", then, click on "MSDS Online". You can search for a MSDS by name, manufacturer, facility, or alphabetically. Please practice this process and call your supervisor immediately if you have any questions. In the event that computer service is not available and the Orange Hazmat Manual can not be located, contact Security Services for assistance.



During business hours, questions can be addressed to Lani Drozda, Chairman of the Hazmat Subcommittee, at extension 36167 or Christian Feller, Safety Director, at extension

35875. Remember...NEVER MIX CHEMICALS TOGETHER!

Code Orange (Chemical Spills)

A orange spill card is available to help with the cleanup of spills. The spill card has directions on the steps to take care of all chemical spills. If a mercury or chemical spill occurs in your area, call the Help Desk at Extension 36238. You must also complete a variance report and an Employee Injury/Illness Form, if an employee is involved.

Blood Spill Safety

Blood spills must be cleaned using a solution of 1:10 bleach to water, Red Z or an appropriate spill kit. Additional supplies are available for order through Purchasing.

Hazardous or Unknown Substances Policy

Aultman does not accept, for testing or storage, any materials that are not used in routine business operations. Any person that has such material will be referred to the appropriate health department or county HAZMAT team. Refer to the HAZARDOUS OR UNKNOWN SUBSTANCES policy in the Hospital Administrative manual.

The treatment of contaminated individuals is reviewed in the CONTAMINATED PATIENT POLICY in the Emergency Department policy manual. Any employee coming across a situation as described above must call the Lead Shift Officer-Security (extension 36777) who will then call the Safety Director.

Electrical Safety

Cords on all electrical items should be inspected daily and before each use. Do not use any appliances with frayed or damaged cords.

White stickers listing the inspection date and the follow up inspection date are placed on hospital-owned equipment that is on a preventative maintenance schedule. It is your responsibility to look for that sticker and to make sure that the date for re-inspection hasn't passed. Call the Help Desk

at extension 36226 if you find any past-due inspection dates. Personal equipment, such as radios, only needs to be inspected upon being introduced into the facility.

Patient-Owned Equipment

All patient-owned electrical appliances must be checked by Maintenance prior to use. Call the Help Desk at extension 36226 to have an item inspected. If the item is approved for use, it will receive a dated, white sticker.

Negative Air Flow Rooms

All negative pressure isolation rooms are tested for proper airflow on a quarterly basis.

When a negative pressure room is needed, Nursing is to call the Help Desk at extension 36226 to have the negative pressure room tested. This should occur prior to admitting a patient to the room. Once the room has passed inspection, Maintenance will tell the charge nurse to document room compliance. Nursing is required to notify the Help Desk at extension 36226 on a daily basis to ensure the room is then checked daily until the patient is released.

Back Injury Prevention and Lifting Techniques

Preventing injuries is a major part of our commitment to provide a safe working environment. Back injuries can result when using the wrong lifting techniques. To help avoid injury to your back when lifting and moving objects, three tips on proper lifting are listed:

Tip # 1: Plan Your Lift and Move

Each time you have to move an object or a patient, your first step must be to plan your move. Planning your move means making sure you have a clear path to your destination before attempting to lift and move the load. Make sure that the area through which you are moving the load is clear of objects. If there are objects, be sure to clear a path before lifting and moving the load. Also, check that there are no dangerous conditions

anywhere along the path, such as a wet floor or steps.

Tip # 2: Test the Load

Before moving the load, you must make sure you can comfortably handle the weight. Test the load by gently trying to lift to see if it's too heavy or cumbersome to be moved, either call for assistance in moving it or use a lifting device, such as a patient-lifting device, cart or dolly, to assist you.

Tip #3: Bend the Knees, Keep Upper Body Straight

You should lift an object by bending your knees and keeping your upper body comfortably straight. Lift the object using your legs, not your back.

Needlestick Safety

Universal precautions should be observed to prevent contact with blood or other body fluids. All body fluids shall be considered potentially infectious materials.

Safety devices and changes in work practices are used to lower exposure to blood or other potentially infectious material. Examples of safety devices include safety lancets, shielded needle devices, and retractable angiocatheters. Examples of changes in work practices include not recapping needles and the use of surgical blade removers. If these devices and changes in work practice do not eliminate exposure, the use of personal protective equipment is required (i.e. masks, gloves, goggles, gown, head and foot coverings).

In the event of an exposure, the following steps should be taken:

1. For punctures, cuts, or abrasions: wash the affected area with soap and water, make the wound bleed OR for splashes to mucous membranes (eye, nose, mouth): flush the affected area with tap water.
2. Call your supervisor immediately.
3. Go to Employee Health Services during business hours or to the Emergency Room on the off-shifts to be seen.
4. Fill out an Employee Occupational Injury/Illness Report and a Communication Form for Significant Exposure (these forms should be taken to Employee Health Services within 24 hours of the exposure)

- Call the Employee Health Nurse or Supervisor immediately if the exposure involved a known hepatitis or HIV positive patient
- Follow up blood work, Hepatitis vaccines, and Tetanus vaccines are available to employees free of charge
- The patient's results will be available in Health Services within 48 hours

Tuberculosis Control

Employees are required to submit to a TB test each calendar year. If the cycle has been broken, and it is more than one-year between tests, an employee must have a two-step TB test.

Employees who have been exposed to TB will have a TB test administered following the exposure and in ten weeks following the initial test. Any employee having signs of the disease will be treated properly.

Blood Borne Pathogens

Dealing with the possible contact of blood borne pathogens is a usual part of the day for many employees. By using the Standard Precautions we believe that everyone has potentially infectious blood and body fluids. It is important that every employee take a moment to protect themselves by first putting on appropriate Personal Protective Equipment (PPE). This may include gloves, gown, mask, goggles, head and foot coverings.

Transmission occurs when there is an exchange of body fluids, such as blood, semen and vaginal secretions, which may

contain an organism. In the healthcare setting, transmission usually occurs through needle sticks, sharp injuries, or splashes to the eyes, nose, mouth, or open areas of skin.

Our Exposure Control Plan helps to educate staff to decrease the risk of transmission and is to be used when caring for all patients. The Standard Precautions are a combination of Universal Precautions and Body Substance Isolation that focuses on the isolation of all moist body substances including blood, feces, urine, sputum, saliva, wound drainage, and other body fluids.

Infection Control and Prevention

Infection control means reducing the spread of infections to patients, families, and co-workers. The prevention of infection is everyone's responsibility.

Hand hygiene is the cornerstone of good infection control practice. All employees are required to follow the Hand Hygiene Policy as per the Infection Control Manual. Wear gloves to reduce heavy contamination of your hands and be sure to change gloves between patients and/or dirty to clean activities. Hands must be washed or cleaned with a waterless alcohol-based product when gloves are removed or changed. All soap and water hand washings must be followed with a waterless alcohol-based product such as Purell.

Another important component of infection control and prevention is the practice of transmission-based isolation precautions. These precautions are in addition to Standard Precautions and are for patients who are

known or suspected to be infected or colonized with certain infectious agents. All healthcare workers are required to adhere to isolation practices as per the Infection Control Manual. When a patient is placed in isolation, infection control must be notified.

Medical or infectious waste is anything disposable that is contaminated with blood or body fluids.

Only throw away medical or infectious waste in red trash bags or those with a biohazard symbol. DO NOT place red bags in a regular trash bag or send it down the trash/laundry chutes! Place all red bags in the large red trash barrel located in the dirty utility room on each unit.



MRI Safety and You

There are general safety tips that can keep you and your patient safe when entering the MRI scanning room area.

- Remember the MRI is always **ON**
- The magnet is very strong
- The closer you get the **STRONGER** the pull
- Beware of all items that can become projectiles - such as oxygen canisters, keys, floor scrubbers, hand tools, IP phones, Caremobile units, etc.

- Medical implants such as pacemakers, aneurysm clips, tens units can also pose hazardous. Injuries related to dislodged implants can occur
- Use only equipment that has been tested and approved for use within the MRI scan room

When in doubt - please contact a MRI technologist **BEFORE** entering the scan room.

2008 National Patient Safety Goals

Improve the Accuracy of Patient Identification

- Use at least two identifiers when providing care, treatment or services. Neither may be the patient room number.

Improve the Effectiveness of Communication Among Caregivers

- When taking verbal or telephone orders or critical test results verify the complete order or test result by having the person receiving the information record and “read-back” the complete order or test result.
- Standardize a list of abbreviations, acronyms, symbols, and dose designations that are NOT to be used throughout the organization.
- Measure, assess, and take action to improve the timeliness of reporting, and the timeliness of receipt by the responsible licensed caregiver, of critical test results and values.
- Implement a standardized approach to “hand-off” communications, including an opportunity to ask and respond to questions. (SBAR: S-situation, B-background, A-assessment, R-recommendations)

Improve the Safety of Using Medications

- Identify and annually review a list of look-alike / sound-alike drugs used by the organization, and take action to prevent errors involving the interchange of these drugs.
- Label all medications, medication containers (i.e. syringes, medicine cups, basins) or other solutions ON and OFF the sterile field.
- Reduce the likelihood of patient harm associated with the use of anticoagulation therapy.

Reduce the Risk of Health Care-Associated Infections

- Comply with current CDC hand-hygiene guidelines.
- Manage as sentinel events all identified cases of unanticipated death or major permanent loss of function associated with a health care-associated infection.

Accurately and Completely Reconcile Medications Across the Continuum of Care

- Compare the patient’s current medications with those ordered for the patient while under the care of the organization.
- A complete list of the patient’s medications is communicated to the next provider of service when a patient is referred or transferred to another setting, service, practitioner or level of care within or outside the organization. The complete list of the medications also provided to the patient on discharge from the facility.

Reduce the Risk of Patient Harm Resulting from Falls

- Implement a fall reduction program and evaluate the effectiveness of the program. (Morse Fall Risk Assessment)

Encourage Patient’s Active Involvement in their Own Care as a Patient Safety Strategy

- Define and communicate the means for patients and their families to report concerns about safety and encourage them to do so. (Speak Up Program)

The Organization Identifies Safety Risks Inherent in its Patient Population (Suicide Risk Assessment)

- The organization identifies and assesses the needs of patients at risk for suicide.

Improve Recognition and Response to Changes in a Patient’s Condition

- Health care staff members may directly request additional assistance from a specially trained individual(s) when the patient’s condition appears to be worsening. (Rapid Response Team)

Universal Protocol for Eliminating Wrong Site, Wrong Procedure, Wrong Person Surgery

- Implement a hospital-wide pre-operative verification process, including marking of the operative site, and “time out” immediately before the start of surgery or procedure.

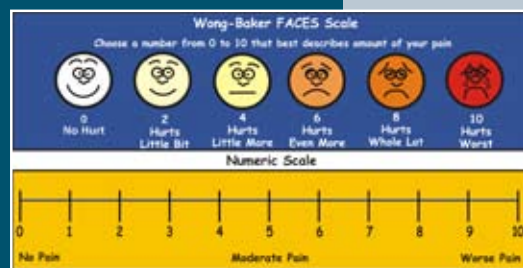
Pain

Aultman Health Foundation is committed to the management of the patient’s pain. Pain is physical – disease, injury and infection cause much of the tissue and nerve damage responsible for pain. Pain is also emotional – factors such as stress, anxiety, trauma and depression can play a role in a person’s suffering. The management of pain involves all caregivers as well as the patient and their family. Proper management helps promote a satisfying treatment experience, speed a patient’s recovery and control health care costs.

Each patient views pain differently and their actions may not reflect the behavior expected for a certain level of pain. Two patients with the same injury (or surgery) can experience very different levels of pain. Some pain has no clear cause. But, it’s no less real for the person who is suffering. Pain should be rated by the patient, not the clinician.

Pain (continued)

Pain is measured using a rating scale. The most commonly used scales are pictured below. Caregivers are responsible for showing patients how to use the pain scale. The patient should be asked to rate their pain during the first exam, then a minimum of once each shift, an hour after any intervention (medication or other), and after potentially pain producing procedures. It is also important to ask the patient at what level the pain would be bearable. If the patient's pain rating continues to be above a tolerable level after more than two consecutive interventions, the physician should be called.



Restraints

Mechanical Restraint is the application of physical force to a patient, with or without the patient's permission, to restrict his/her freedom of movement or normal access to his/her body. These types of restraints include bed rails, geriatric-chairs, soft restraints and leather restraints.

A **chemical restraint** is a medication used to restrict the patient's freedom of movement that is not a standard treatment for the patient's medical or psychiatric condition.

Behavioral restraints are used to protect the patient against injury to self or others because of an emotional or behavioral problem.

Restraint Orders

A physician must see the person in behavioral restraints within one hour of restraint being used or 24 hours for mechanical restraints. The attending physician performs an in-person assessment of the restrained patient and re orders or discontinues restraint once every calendar day.

Restraint Alternatives

Alternatives include, but are not limited to the following:

Clinicians should recognize that words such as "ache" or "sore" may be substituted for the word "pain". Children and infants experience pain too, but, special tools such as face charts and the newborn pain scale, may be needed to help children communicate their pain. Patients who are unable to think or speak well may communicate their pain by

nonverbal cues such as grimaces, moaning, or restlessness. Pain may be managed

by simply repositioning a patient. If you are unable to help in a way that relieves pain, always notify a caregiver who can help. REMEMBER: Managing pain is everyone's responsibility!

Diversional activity - TV; videos; music therapy; audio tapes & player; relaxation tapes and techniques; small jobs that the patient enjoys and agrees to attempt (i.e. folding wash cloths).

Verbal interaction - speak in a clear, calm voice; frequently orient/re-orient to person, place, and setting; offer support and encouragement; promote interpersonal communication; reinforce safety.

Non-verbal interaction - approach in a calm, slow non-threatening manner; smile; listen attentively allowing time for comments, concerns or questions (answer any and all questions in a timely manner).

Supervision - move close to nurse's station; frequent room checks; encourage family to stay/sit with patient; bed alert, if applicable.

Exercise/ambulation - passive/active ROM; up in chair; ambulate in room or hallway, with assist if necessary. Allow to wander in supervised area.

Comfort measures - frequent position changes; pain management; pillows and other positioning aides; eliminate unnecessary tubes/lines; toileting schedule; offer snacks and warm beverages; if possible, provide companionship (i.e. volunteer).

Modify environment - reduce sensory stimulation; provide a structured environment; appropriate lighting; keep free of clutter; encourage family to bring in limited personal possessions such as family photos or items familiar to the patient.

Promote reality - TV; newspaper, open window curtains; leave door to room open; familiarize patient to surroundings.

If options fail and restraints must be used, prevent physical distress by:

- Providing for physical comfort such as fluids and toileting
- Checking circulation
- Providing range of motion
- Positioning to provide for plenty of ventilation

Sentinel Event, Near Miss & Hazardous Condition

Sentinel Event: Unexpected occurrence involving death or serious physical or psychological injury, or the risk thereof.

Near Miss: Any process variation which did not affect the outcome, but for which a reoccurrence carries a significant chance of serious adverse outcome.

Hazardous Condition: Any set of circumstances (exclusive of the disease or condition for which the patient is being treated) which significantly increases the likelihood of a serious outcome.

Root cause analysis: Focuses primarily on systems and processes and identifies potential improvements in systems or processes that would tend to decrease the likelihood of events in the future.

Sentinel events and near misses should be reported immediately to your supervisor and to the Patient Safety Officer, Laurie Clark RN at ext. 33923. All quality and safety concerns should be reported by entering a variance. Variance reporting is non-punitive. For more information, please review the sentinel event and variance reporting policies on the intranet.

Forensic Education

The Aultman Health Foundation requires that all inpatient prisoners be guarded continuously by the custodial agency responsible for the prisoner. Upon admission, the unit must notify Security Services to make sure that all policies and procedures are followed. Forensic patient rights are maintained with the exception of any legal

restrictions as determined and enforced by forensic staff, such as limiting visitation or phone use. Decisions affecting the care of the forensic patient will not be based on the criteria set by forensic staff. Upon discharge the patient will be returned to the custody of forensic staff.

Corporate Compliance

Corporate Compliance means that everyone associated with Aultman Health Foundation will try to understand and comply with all legal and other requirements related to his or her job. The health care industry is very complex and subject to many rules and regulations, particularly Medicare and Medicaid. The federal government has increased its enforcement efforts of these rules and regulations. As part of Aultman Health Foundation's efforts to follow the rules that govern us, a Corporate Compliance Program was introduced in 1997.

We believe that Corporate Compliance is good business. It helps fulfill our basic care-giving mission to our patients and community. It is also evidence to our employees and community of our strong commitment to honest and responsible conduct.

All employees, regardless of position, are expected to report compliance problems or concerns. Employees should report problems or concerns to their manager, the Aultman Health Foundation Compliance Officer, or the Aultman Compliance Line at 1-866-907-6901. The Aultman Compliance Line can be used to report anonymously and is available 24 hours a day. Employees reporting compliance concerns in good faith will not be punished.

At Aultman Health Foundation we want to do things right. It is everyone's responsibility to make sure we do.

Accrediting Bodies

For any patient care or safety issue an employee identifies that they feel is not being addressed by management, please notify the Compliance Office at extension 37448. If an employee feels that the issues are still not being addressed, employees can anonymously call the Joint Commission at 1-800-994-6610 or e-mail them at complaint@jointcommission.org. Employees can also anonymously contact the Ohio Department of Health at 1-800-347-0553.

Patient Rights

"Your Rights as a Patient" are included in the "Guide to Patient and Visitor Services" available to all patients upon admission. The Patient's Right Policy states that "No person shall be denied access to treatment or accommodations that are available and medically indicated, on the basis of such considerations as race, color, creed, national origin, diagnosis, or the nature of the source of the payment for his/her care."

Right to Meaningful Knowledge

Aultman Health Foundation believes that patients should have information about their care, including outcomes of tests, medical treatments, and intervention whether results are positive, negative, expected, or unexpected.

TEST

2008

Tobacco Free Policy

As we continue to lead our community to improved health, Aultman Health Foundation and all of its other buildings are tobacco free. Employees, patients, visitors, physicians, students and contractors are not permitted to use tobacco products in the building or anywhere on the premises, including parking lots, sidewalks, streets, and vehicles.

Please contact Human Resources for information on tobacco cessation assistance for interested employees.

Cellular Phones

The use of cellular phones is not allowed inside the hospital and in other buildings where patient care is performed. Cellular phones are permitted for usage by the public in all waiting areas, lobbies and cafeterias. Cellular phones may interfere with medical equipment when used in patient care areas.

Abuse/Neglect

It is the responsibility of all health care workers to recognize, treat, and protect any patient who may be the victim of abuse, neglect, or exploitation. The Ohio Law states that any healthcare professional, working within the scope of his/her professional capacity, which has reasonable cause to believe a patient, is being abused, neglected, or exploited, has to report it immediately to the proper authority. Abuse, neglect or exploitation has been identified by the Aultman Health Foundation to include, but not be limited to the following:

- Abuse, neglect or exploitation of a child.
- Abuse, neglect or exploitation of a mentally retarded or developmentally disabled person.

- Abuse, neglect or exploitation of a compromised adult 60 or older.
- Domestic violence.

Health care workers reporting abuse/neglect cases are protected from civil or criminal liability related to the investigation, report, or testimony conducted as a result of this notice. Failure to report known or suspected abuse is a crime.

If any cases of abuse are suspected, notify your supervisor and consult the appropriate abuse/neglect policies for proper reporting methods.

Stroke Safety

Stroke is the No. 3 cause of death, behind heart disease and cancer and the leading cause of serious, long-term disability in the United States.

Each year, about 700,000 people suffer a stroke. On average, someone in the United States suffers a stroke every 45 seconds; every 3 minutes someone dies of a stroke.

Risk factors for stroke that can be controlled or treated include high blood pressure, carotid disease, atrial fibrillation, high cholesterol, diabetes, smoking, obesity, excessive alcohol use, and physical inactivity. Other risk factors that cannot be changed include family history, gender (strokes are more common in men than women), increasing age, prior stroke or TIA (Transient Ischemic Attack) and African American race.

Stroke is a medical emergency. Know these warning signs of stroke and teach them to others. Every second counts:

- Sudden numbness or weakness of the face, arm or leg, especially on one side of the body
- Sudden confusion, trouble speaking or understanding
- Sudden trouble seeing in one or both eyes
- Sudden trouble walking, dizziness, loss of balance or coordination

- Sudden, severe headache with no known cause

Recognizing when stroke is occurring and reacting F.A.S.T. to get lifesaving treatment can save the lives of the men and women in your life.

Many stroke patients have no idea they are having a stroke because brain cells are dying which can effect judgment. Learning to recognize a stroke is important and easy, just think F.A.S.T.

Face - Ask the person to smile. Does one side of the face droop?

Arms - Ask the person to hold both arms up evenly. Does one arm drift downward?

Speech - Ask the person to repeat a simple sentence. Are their words slurred or mixed up?

Time - If the person shows any of these symptoms, seek emergency medical attention. Brain cells are dying.

If a patient is experiencing these acute signs and symptoms, activate the Rapid Response Team by calling x36888. Call a Medical Assist at x36777 if a visitor is having any of these signs or symptoms. If this occurs at an off-site facility, dial 911 immediately.

Privacy and Confidentiality

Aultman maintains the privacy and confidentiality of information given to us in accordance with legal and ethical standards.

- We will protect the privacy of our patients', co-workers' and customers' health information by complying with federal HIPAA privacy regulations, state law, and accreditation standards which safeguard protected health information.
- We will only use or release medical, clinical, or business information when such release is supported by a legitimate clinical or business purpose, and is in compliance with our policies and procedures, applicable laws, rules, and regulations.
- We will not discuss patient, employee, or customer information in any public area, including, but not limited to, elevators, stairwells, restrooms, lobbies, and dining areas.
- We will safeguard confidential information by maintaining documents in secure areas and not sharing computer access codes or passwords. Confidential information includes material such as medical records or other patient information, salary, benefits, payroll, personnel files and information on disciplinary actions.
- Each employee will sign an Employee Acknowledgement Form annually.
- Employees with privacy questions or concerns may contact the Privacy Office at extension 33380 or e-mail privacyoffice@aultman.com.