

annual safety education

2010 TEST

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

Other education subjects 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 and complete the test as indicated in your email or provided by your manager. All paper tests will then be returned to Education and Development Department for tracking. If you have any questions while reading the newsletter or taking the post-test, please contact your supervisor or the Safety staff at ext. 35875 or 34293.



AULTMAN



REVIEW OF EMERGENCY PAGES:

Aultman Hospital adopted the Ohio Emergency Codes 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.

SECURITY SERVICES

Security officers help provide a safe and secure environment for all employees, patients, and visitors. Aultman Security Services offers escorts to/from vehicles, tire changes, securing of valuables, response to emergency situations and crisis prevention training. Offices are located in the registration area of the emergency department and the ground level of the Main Hospital next to the stockroom. Employees are responsible for reporting any suspicious activities or persons to Security immediately at ext. 36268.

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)

Call Security Services at ext. 36777 if an infant or child is missing or known to be kidnapped. Upon hearing Code Adam paged overhead, employees must secure all halls, stairwells, elevators, 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 him/her to leave the property. Call Security Services immediately at ext. 36777. See the Code Adam policy in the Emergency Management flip guide.

CODE BLACK ■■■■■■■■■■

Bomb/Bomb Threat

Keep the caller on the line, hold the green sheet in the air to signal someone to call Security Services at ext. 36777. Begin asking the caller the questions from the back of the Green Bomb Threat sign on your unit. Remember to write down the caller's responses!

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 the sound of the caller's voice, accents, background noise, etc.

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

CODE YELLOW ■■■■■■■■■■

Disaster (Paged Overhead)

An internal/external disaster has occurred. Each department or unit has a specific plan. Refer to the Emergency Management flip guide. 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 Emergency Management flip guide for specific job duties.

CODE ORANGE ■■■■■■■■■■

Hazardous Material Spill/Release

Confine the hazardous material, and refer to the ORANGE Hazmat manual for further instructions. Notify the Spill Consulting Team at ext. 36238

CODE BLUE ■■■■■■■■■■

Adult/Pediatric Medical Emergency – Cardiopulmonary or Respiratory Arrest (Paged Overhead)

Call 35222 to activate.

CODE PINK ■■■■■■■■■■

Infant Medical Distress (Paged Overhead)

Newborn in distress in Labor and Delivery, NICU or OB. Dial 35222

CODE VIOLET ■■■■■■■■■■

Violent/Combative Patient

Call Security at ext. 36777.

CODE SILVER ■■■■■■■■■■

Person with Weapon/Hostage Situation (Paged Overhead)

Call 36777 for Security. 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 Security Services.

CODE BROWN ■■■■■■■■■■

Missing Adult Patient (Paged Overhead Mr. or Mrs.)

Call Security Services at 36777 and contact all units on floor where patient was last seen. Staff should monitor 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 ■■■■■■■■■■

Person Appearing to Require Medical Aid

Call Security Services at 36777 if a visitor or employee needs medical assistance.

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 – increasing 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 and can save lives. Make sure you know where the fire extinguishers are kept and how to operate them.

In health care 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 **RACE** and **PASS**

- 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



Be prepared before a fire occurs...

1. 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.
2. Review exit routes.
3. Keep the hallways of your work area free from obstructions.
4. Never block smoke/fire doors or fire exits.
5. Be familiar with smoke and fire walls.
6. Keep calm.

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)

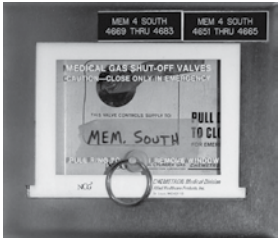


You can work safely with chemicals by utilizing your ORANGE hazmat manual.

EMERGENCY PREPAREDNESS PLAN FOR UTILITIES

MEDICAL GASES

In the event of a fire, the house supervisor 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.



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 and also emergency use instructions. A listing of **green-labeled phones** can be found in the Emergency Operations Plan. 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.

ELECTRIC

In the event of a power failure, the **red** and **orange** 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, toasters, etc. are not to be plugged into these outlets at any time.

TUBERCULOSIS CONTROL

Staff members 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, staff must have a two-step TB test.

Staff who have been exposed to TB will have a TB test administered following the exposure and in 10 weeks following the initial test. Any staff having signs of the disease will be treated.

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 involving staff, patients or visitors, you must report it to your supervisor and to Security Services at extension 36268.

FALLS ASSESSMENT

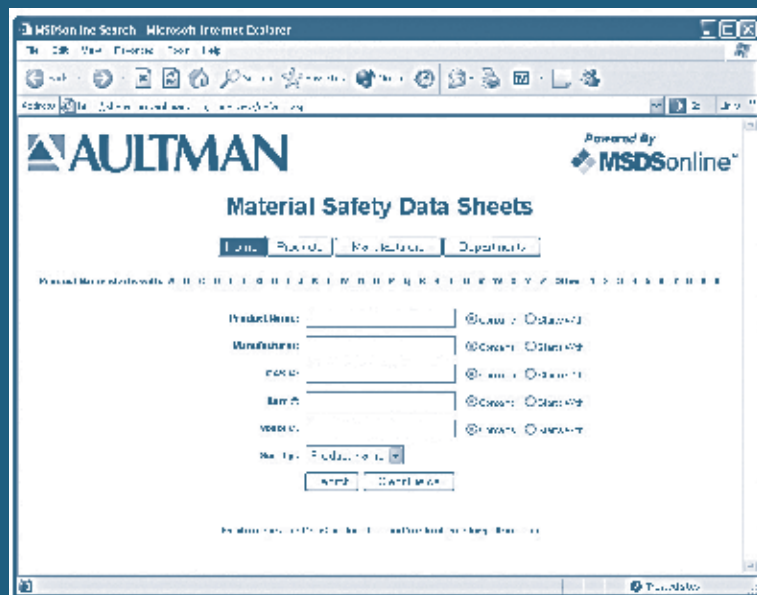
It is every employee's responsibility to promote patient safety by identifying patients at risk for falling. As patients are identified as high risk for falls a **yellow magnet** is placed on the doorframe of the room and a **yellow wristband** is placed on the patient. These identifiers are implemented as a communication tool, so every employee is able to identify the patient at risk and intervene to prevent a potential fall. If you observe a potential fall situation, notify a staff member immediately.

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 health care 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 Emergency Management flip guide cannot be located, contact Security Services for assistance. During business hours, questions can be addressed to Lani Drozda, chairman of the Hazmat Subcommittee, at ext. 36167 or Christian Feller, Safety Director, at ext. 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 Ext. 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 Security Lead Shift Officer at ext. 36777 who will then call the Safety Director.

CONCEALED WEAPONS

Ohio’s concealed carry law allows an individual 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 put your safety at risk.

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 health care facilities each year due to hazardous chemicals.

Toxicologists test materials and report the level of material we can work in without having negative 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.

Through the Skin

Absorption through the skin usually requires significant contact time and can be minimized by 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.

ELECTRICAL SAFETY

All hospital-owned medical equipment that is on a preventive maintenance schedule should have a white sticker listing the inspection date and the follow-up inspection date. It is your responsibility to look for that sticker and to make sure that the date for reinspection hasn’t passed. All non-medical equipment that is on a preventive maintenance schedule should have an asset tag on it showing its equipment number, model and serial number.

Personal equipment, such as radios only need to be inspected and stickered upon being introduced into the facility. Maintenance no longer requires annual reinspection of these devices. The owner of the equipment will be responsible for completing a daily inspection to ensure electrical safety.

Call the Help Desk at ext. 36226 if you find any past-due inspection dates or have any equipment issues.

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. All patient-owned electric blankets, heating pads, etc. are strictly prohibited.

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.

Aultman’s Incident Command Center is located in the Heart Center Classroom on the third floor of the Bedford Building.

When a **CODE YELLOW** (disaster) 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 Emergency Management flip guide for other specific duties.**

BACK INJURY PREVENTION & LIFTING TECHNIQUES

Injury prevention is a major part of our commitment to providing 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 to the right.



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 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.

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.



NEEDLESTICK SAFETY

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

Sharps devices and changes in work practices are used to lower exposure to blood or other potentially infectious material. Examples of sharps 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 (PPE) 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. 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.



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 ext. 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 and instruct the nurses to use their keys to turn on pressure monitoring alarms (where applicable) outside the room. 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. When the patient is released, nursing should use their keys to turn off the pressure monitoring alarms outside the room.

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 Practices as per the Infection Control Policies and Procedures. 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 should 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 health care workers are required to adhere to isolation practices as per the Infection Control Policies and Procedures. 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.



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 treat everyone as they have potentially infectious blood and body fluids. It is important that employees take a moment to protect themselves by first putting on appropriate PPE. This may include gloves, gown, mask, eye cover or 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 health care 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.

STOP STOP STOP STOP STOP STOP

ANYONE WHO DEALS DIRECTLY WITH PATIENTS MUST READ PAGES 8-12

IF YOU ARE NOT A DIRECT PATIENT CARE PROVIDER, PLEASE TURN TO PAGE 10 FOR OTHER REQUIRED EDUCATION TOPICS

RIGHT TO MEANINGFUL KNOWLEDGE

Aultman Health Foundation believes patients have the right to receive information about their care – including test outcomes, medical treatments and intervention whether results are positive, negative, expected, or unexpected. Refer to Patient's Rights and Responsibility Policy.

ACCREDITING BODIES

For any patient care or safety issue an employee feels is not being addressed by management, please notify the Compliance Office at ext. 37448. If an employee feels that the issues are still not being addressed, employees can call the Joint Commission anonymously at 1-800-994-6610 or e-mail them at complaint@jointcommission.org. Employees can also contact the Ohio Department of Health, anonymously 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 Rights Policy states: "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." Refer to Patient's Rights and Responsibility Policy.

2010 National Patient Safety Goals

Improve accuracy of patient identification

- Use at least **two patient identifiers** for all care/treatment/services.
 - Inpatient – Patient name and MR#.
 - Outpatient – Patient name and DOB.
 - Never use a room number or physical location to identify a patient.
- Label **all** specimens in the presence of the patient.
- Eliminate transfusion errors related to patient misidentification.

Improve effectiveness of communication

- Report critical results of tests and diagnostic procedures on a timely basis (60 minutes from time test completed in the lab).

Improve the safety of using medications

- Label all medications, containers and other solutions on and off the sterile field in perioperative and other procedural settings.
- Reduce the likelihood of patient harm associated with the use of anticoagulant therapy.

Reduce the risk of health care-acquired infections

- Follow CDC hand hygiene guidelines.
- Prevent hospital-acquired infections related to:

Multidrug-resistant Organisms (MDRO)

- Follow standard precautions and isolation protocol.
- Be AWARE of two-letter codes for patient with MDROs or C-diff.

Surgical Site Infection (SSI) – Follow SCIP Guidelines

- Educate patients and families.
- Preop antibiotics given per guidelines.

Central Line-Associated Bloodstream Infection (CLABSI)

- Use proper hand hygiene techniques.
- Disinfect catheter hubs.
- Evaluate site frequently for infection.
- Review daily (with DR) the necessity of line.
- Remove central line if non-essential.
- Use Chlorhexidine-based antiseptic for insertion and dressing changes.
- FOLLOW insertion checklist and document its use!
- EDUCATE patients and their families as needed when appropriate about health care-associated infections with information included in the "Your Safety First Brochure."

Medication Reconciliation

- Reconcile medications at admission, transfer and discharge.
- Ensure patient receives an accurate list of medications at discharge.

Organization identifies safety risks inherent to a patient population

- Suicide risk assessment

Universal Protocol:

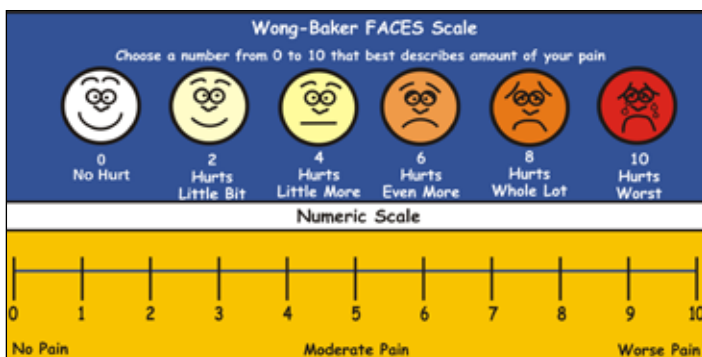
- Eliminate wrong site, wrong surgery, wrong procedure/surgery.
- Conduct a pre-procedure verification process.
- Mark the procedure site.
- "Time out" before surgical or invasive procedures.

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 his or her family. Proper management promotes a satisfying treatment experience, speed a patient's recovery and control health care costs.

Patients view 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 is measured using a rating scale. The most commonly used scales are pictured. 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

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 restraints for violent/self-destructive behavior within one hour of restraints being used or 24 hours for mechanical restraints. The attending physician performs an in-person assessment of the restrained patient and reorders or discontinues restraint once every calendar day.

Restraint Alternatives

Alternatives include, but are not limited to the following:

Diversional activity – TV; videos; music therapy; audio tapes and 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



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 795,000 people suffer a stroke. On average, someone in the United States suffers a stroke every 45 seconds. And every three 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 Transient Ischemic Attack (TIA) and African-American race.

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

- 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

Many stroke patients have no idea they are having a stroke because brain cells are dying, which can affect judgment. Recognizing when a stroke is occurring and reacting **F.A.S.T.** to get lifesaving treatment can save lives.

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 ext. 35222. Call a Medical Assist at ext. 36777 if a visitor is having any of these signs or symptoms. Every second counts!

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.

FORENSIC EDUCATION

Aultman requires that all inpatient prisoners be guarded continuously by the custodial agency responsible for the prisoner. Upon admission, the unit must notify Aultman Security Services to make sure that all policies and procedures are followed. 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 custody of forensic staff.

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. Ohio Law states that any health care professional — working within the scope of his/her professional capacity, and who has reasonable cause to believe a patient is being abused, neglected or exploited — shall report the situation immediately to the proper authority. Abuse, neglect or exploitation has been identified by Aultman to include, but not be limited to, the following:

- Abuse, neglect or exploitation of a child.
- Abuse, neglect or exploitation of a mentally or developmentally disabled person.
- Abuse, neglect or exploitation of a compromised adult 60 or older.
- Domestic violence.

Health care workers having knowledge or reasonable cause who report abuse/neglect cases in good faith are protected from civil or criminal liability related to the investigation, report or testimony. Failure to report known or suspected abuse may result in civil liabilities.

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

INCIDENT REPORTING AND ROOT CAUSE ANALYSIS

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.

Sentinel events and near misses should be reported immediately to your supervisor and to the Patient Safety Officer Laurie Clark RN at ext. 33923.

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.

Incident (Variance) Reporting: All quality and patient safety concerns should be reported by entering a variance. Variance reporting is non punitive. However, performance issues and certain actions may warrant disciplinary action if an individual knew of or intended to violate a policy, procedure or duty in the course of performing a task.

For more information, please review the sentinel event and variance reporting policies on the intranet.

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 their jobs. 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 caregiving 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.

PRIVACY AND CONFIDENTIALITY

Aultman maintains the privacy and confidentiality of personal and medical information entrusted to us by patients and employees in accordance with legal and ethical standards. Employees are expected to:

- Protect the confidentiality and privacy of patient information, customer information, employees' information, and other proprietary information by complying with the federal laws, HIPAA Privacy and Security regulations, state laws and accreditation standards.
- Only access, use or disclose medical, clinical, employee and business information when such use or disclosure is supported by a legitimate clinical or business purpose and is in compliance with Aultman's policies and procedures, applicable laws, rules and regulations.
- Refrain from discussing patient, employee, customer or business information in any public area, such as elevators, stairwells, restrooms, lobbies and dining areas.
- Safeguard all confidential and proprietary information by maintaining documents in secure areas and not sharing access codes or passwords. These documents include sensitive material such as medical records and other patient information, salary, benefits, payroll, personnel files and information on disciplinary actions.

Employees with privacy questions or concerns may contact the Compliance Office at extension 33380 or e-mail compliance@aultman.com.



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