Conway Medical Center Traditional Volunteer Annual Training Presentation

CMC

CONWAY MEDICAL CENTER

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We are committed to

COMPASSIONATE CARE and

SERVICE EXCELLENCE

Here we will review:

Mission, Vision & Values

Service / Expectations / AIDET

Culture / Diversity

HIPAA / Corporate Compliance

Infection Prevention / Safety ~ Red Rules ~ Codes

Language Services / And more…..

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MISSION STATEMENT

Conway Medical Center will improve the overall health of our communities by being a leader in health care.

VISION STATEMENT

CMC will be the regional healthcare system of choice, by delivering high value service across a seamless continuum of care.

These VALUES have guided Conway Medical Center's mission since 1928, as an expression and intent of our original founders

Excellence

Deliver the best outcomes and highest quality service through dedicated effort of every team member.

Compassion

Treat all individuals with sensitivity, empathy, dignity, and respect.

Healing

Inspire hope and nurture the well-being of the whole person, respecting physical, emotional and spiritual needs.

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Values

Teamwork

Value the contributions of all, blending the skills of individuals in unsurpassed collaboration and shared accountability.

Stewardship

Sustain and reinvest in our mission by wisely managing our human, natural and material resources.

Innovation

Inspire and energize the organizations, enhancing the lives of those we serve, through the creative ideas and unique talents of each individual.

Integrity

Take personal accountability for the highest standards of behavior, worthy of the trust our community places in us.

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Patient & Family Expectations Kindness ~ Empathy Responsiveness

Acting quickly and effectively to meet customer needs.

Example: Seeing that a patient needs assistance and YOU ARE there to offer non clinical aide quickly

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You are this hospital

We have a stake in your attitude. We are judged by your performance. We are the care you give, the attention you pay, the courtesies you extend.

A moment of truth happens when a customer comes into contact with any aspect of the company, however remote, and forms an impression. Make that impression EXCELLENT!

Evaluating Our Performance

Every job is a self-portrait of the person who did it. "Autograph your volunteering with excellence."

CMC Volunteers

We have a Commitment to Excellence

Press Ganey

Patient Satisfaction Survey Process

- Press Gainey conducts surveys with randomly selected patients after discharge to aide in evaluating our performance
- Monthly and Quarterly Reports are posted and shared on in patient care area for staff

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IT ALL STARTS WITH A SMILE even under the mask

Whether you are in person or on the phone. There is nothing like a smile to create a good first impression.

A warm and confident smile will put both you and the other person at ease.

Phone calls. Smile when you answer the call.. It does make a difference in how you are received

The 10/5 RULE

- 10 **FEET** = EYE CONTACT & SMILE
- 5 **FEET** = SPEAK / ACKKNOWLEDGE

Good Morning!!

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STUDER GROUP AIDET®

- **A** • ACKNOWLEDGE
- **I** • INTRODUCE
- **D** • DURATION
- **E** • EXPLANATION
- **T** • THANK YOU

Remember, AIDET ® is not a speech! Think of AIDET ® as a communication framework.

EXAMPLE

A	I	D	E	T
• Good morning. How may I help you? • *(SMILE AND MAKE EYE CONTACT)*	• My name is Maria and I will be helping you for today. Let me make sure your information correct.	• I know you are waiting patiently. I apologize that there is about a wait today from your scheduled time. If there is further delay, we will keep you informed.	• Please have a seat. The nurse will be calling you back as soon as they can. They are such a great team! Do you have any questions right now?	• Thank you in advance for your patience and again, my name is Maria, if you have any questions while you are in the waiting room, don't hesitate to let me now how I can assist you. Thank You.

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KEY WORDS

Key words NOT to say

- Can't, But, No, Policy
- You know how Corporate is
- It's not my job (problem)
- We're short-staffed
- No one told me you were here
- We can't get good help
- That's not my patient

Things to say instead

- "What we can do is…"
- "I can find the person who would best help you with that…"
- "I do apologize for the delay, let's get you settled."
- "What can I do for you right now?"

Cultural Diversity

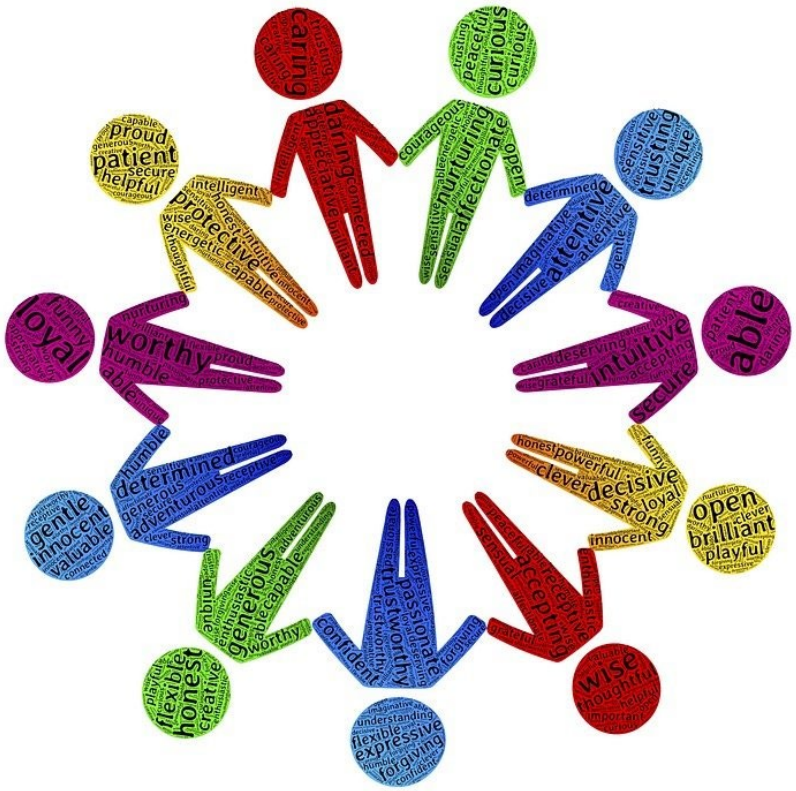
- Cultural factors influence beliefs about illness and response to health care
- Learn about the patient populations we serve
- Access appropriate resources
- Be sensitive

FACTORS:

- Country of Origin
- Preferred Language
- Communication Style
- Views on Health
- Family & Community Relationships
- Religion
- Dietary Preferences

Cultural Diversity

- Start with self awareness
- Avoid stereotyping
- Don’t assume anything
- Be careful not to tell ethnic, religious or sexual jokes
- Appreciate everyone with special qualities



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Chapel

- Our Chapel is located on the first floor near the main entrance lobby and is open 24 hours a day. Staff, Patients and Visitors of all faiths are welcome to visit, for prayer and quiet reflection.
- Staff Chaplain
  - **ASCOM: 7686**
  - **Office:** 843-234-6714
  - **Voicemail Only:** 843-347-8155
  - **Pager:** 1-888-972-3296

Volunteer Uniform

- Personal clothing and uniforms must be clean and neat.
- Volunteers are provided an official uniform top to wear which must be clean, neat and worn when on duty

<u>Uniform consists of:</u>

- Jacket/vest or official CMC volunteer shirt. White or black sleeved shirt or official polo is the preference to be worn under jacket/vest.

Volunteer Uniform

- Dark dress slacks; preferably Navy, Black, Khaki (beige)or White slacks - NO leggings, NO denim (jeans), NO HOODIES
- Dress Capri's – (NOT SHORTS) for ladies – May – Oct
- Closed toed shoes ~ NO SANDALS

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Dress Code Specifics

- While on duty you are not allowed to have any facial body piercing – no nose rings, no ear gauges or tongue rings.
- Hair: Clean & Well groomed – Extreme hair trends distracting to the customer are prohibited.
- Hosiery is not required and skirts are not to be shorter than three inches above the knee.
- Tattoos must be appropriate for a professional environment or otherwise must be covered.
- Visible facial and front of neck tattoos which create a distraction must be covered while on duty.
- References: H-4.3-C-POL Dress & Appearance Standards and CMC VOL 15 PRO Dress & Uniforms

Your Name Tag – ID BADGE
The Lewis Blackman Act

- Volunteering?
  - Wear it!
- Make it visible
- Wear it above your waist
- No attachments such as pins or stickers
- No alterations are to be made to your ID badge

The CMC ID Badge is the property of Conway Medical Center. A fee will be assessed if not returned upon departure

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HIPAA - Training for Privacy & Information Security

- *CONWAY MEDICAL CENTER* has a strong tradition of protecting the privacy of patient information. Confidentiality has always been part of the hospital culture. However, there is a law that sets a national standard to protect medical records and other personal health information. It is called the **Health Insurance Portability and Accountability Act** or HIPAA.

What is HIPAA?

HIPAA sets national standards for the protection of patient information.

HIPAA applies to ALL health care providers: hospitals, physicians, insurance companies, labs, home care companies and surgery centers. HIPAA covers ALL forms of protected health information… oral, written and electronic.

Why are volunteers involved with HIPAA training?

It is everyone's responsibility to take the confidentiality of patient information seriously.

Anytime volunteers come in contact with patient information (or any personal health information) written, spoken or electronically transmitted, they become involved with some facet of the HIPAA regulations!

It is for this reason that the law requires awareness training for **all** healthcare personnel, including volunteers.

What is Protected Health Information (PHI)?

Information used to identify a patient:

- Addresses
- Dates
- Telephone or fax numbers
- Social Security Numbers
- Medical Records Numbers
- Patient Account Numbers
- Insurance Plan Numbers
- Vehicle Information
- License Numbers
- Medical Equipment Numbers
- Photographs
- Fingerprints
- Email addresses
- Internet addresses

IIHI

This information is referred to as individually identifiable health information **(IIHI)**.

Removing a patient name from a chart is no longer sufficient to de-identify the patient.

HIPAA refers to this information as protected health information or PHI.

Any health information that identifies someone or can be used to identify someone MUST BE PROTECTED.

Giving Patients Control Over their Information

Only share patient information with other faculty and staff who need the information to do their job.

Avoid accessing a patient's record unless you need to do so for your job or you have written permission from the patient.

You are not allowed to access the record of your co-worker, spouse, or family member unless there is a signed authorization form in the patient's record.

What is TPO?

HIPAA allows us to share patient information for:

Treatment ~ Providing care to patients

Payment ~ Getting paid for caring for patients

Operations ~ Normal business activities such as quality improvement, training, auditing, customer service and resolution of grievances.

If use of the information does not fall under one of these categories you must have the patient's signed authorization, before sharing that information with anyone!

What are the consequences of not complying with the law?

It has always been against hospital policy to improperly share, use or dispose of patient information in the wrong way. Under HIPAA laws there are fines and penalties for this.

We treat privacy seriously, which is why every volunteer and team member is required to sign a confidentiality form.

Patient Rights

Under HIPAA, patients have a right to know how their health information may be used or disclosed and that they have certain privacy rights. These rights, some new and some revised, are communicated to our patients through a document called **Notice of Privacy Practices (NPP).**

Rights allow patients to:
Obtain a list of who we have shared their health information with for the past six years. Request to amend their medical record. Request other communications such as asking to be notified of lab results only at work and not at home

Proper Disposal of Patient Information

We have to handle and dispose of patient information carefully, such as using a shredder instead of throwing patient information away. The procedure for the proper disposal of health information will be part of service-specific training!

RULE OF THUMB….NEVER dispose of patient information in any open area trash bin. When in doubt, ASK.

Reporting Violations

It is EVERYONE's responsibility to report violations, or wrong doings. Whether someone received patient information improperly, or shared patient information in the wrong way, everyone has a responsibility to report violations. When in doubt…ASK!!

Your department supervisor / liaison or your Volunteer Director is a good place to start for answers to your questions …or for reporting issues.

Remember to…..

ALWAYS STOP, and ask yourself, should I be sharing this patient information?

If it doesn't pertain to TPO, don't discuss it!!!

Do not share patient information about fellow volunteers, neighbors and acquaintances. It is protected information, not for sharing!!!

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CMC Privacy Officer:

BART HAAS
bhaas@cmc-sc.com

Director Revenue Cycle & Data Integration

Privacy Officer

843-347-8204
internal extension 8204

CMC Corporate Compliance Program & YOU

Corporate Compliance is established to ensure the organization operates in accordance with laws, regulations and certain established corporate policy.

It is designed to:

- PREVENT unethical or illegal business conduct.
- DETECT when unethical or illegal business conduct has occurred.
- CORRECT any such conduct.

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Compliance Program Elements

- **Code of Conduct** – it is the foundation document of our corporate compliance program.
- **Corporate Compliance Office(r)** – Develops implements, operates and oversees the program – assisted by the Corporate Compliance Committee.
- **Polices and Procedures** – Describes operational compliance requirements & instructions.
- **Education & Training** – Ensures all staff have the information needed.
- **Ease of Communication** – ability of staff to report concerns.
- **Enforcement** – ensure disciplinary standards are imposed for non-compliance.
- **Auditing and Monitoring** – Involves ongoing review of potential areas of risk.

Your Role - Reporting

- Reporting Concerns
- The CMC Corporate Compliance Program offers you access to an anonymous Hotline that is available for you to call any time 24/7. If you are aware of any possible violations of our corporate compliance policies or even if you just suspect a violation or have a related concern please call: (888) 398-2633
- You may also call this number to ask questions or to clarify corporate compliance policies. Your questions will be received by an off-site third party who will forward your concerns to the CMC Compliance Officer who will never be notified of your identity if you choose to be anonymous. Please know that your anonymity is protected at all times. A member of CMC Senior Leadership team will respond to all Hotline messages promptly and inform the caller through the portal of any corrective action.

Thanks,

Brian Argo
Compliance Officer
Executive Vice President and Chief Operating Officer
843-347-8038 or extension 8038

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Safety Management & Error Prevention

- Universal Precautions
  - Washing Your Hands
- TB assessment / testing requirements
- Isolation Signage
- No Pass Zone
- Wheelchair Safety

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Hand Washing

- You Never Know What A Patient Might Have
- Utilize **Personal Protection Equipment = (PPE) ie: gloves/gown/face shields/masks**
- Most People Catch A Cold Or Flu By Direct Contact With Others
- Washing Your Hands Ensures A Low Probability of YOU Being Infected
- Single Most Important Thing A Person Can Do To Reduce The Chance of Being Infected By Another Persons Illness.....**Wash your hands**
- Sanitizing wipes have a minimum of 60% Alcohol

Recommended Practices for Volunteers

- Do not enter isolation rooms / areas
- Do not transport blood or body fluid specimens, nor clean up such spills
- **Practice Universal Precautions** and place yellow over-the-spill mats on any liquid in the hallways, patient rooms, etc. and immediately notify housekeeping Ascom phone: 7641, 7642
- Comply with your onboarding health assessment and immunization requirements during onboarding orientation and annually.
- Comply with annual training and Occupational Health standards.

CMC's Exposure Control Plan

- Explains how CMC complies with Bloodborne Pathogen Standard requirements.
- Describes risk categories, Standard Precautions, when/where exposure may occur, reporting and training procedures.
- Policies can be found on CMC Intranet – Policy Manager. (Refer to INF-001-0100-POL.)

Exposure Determination

- All job positions are reviewed for probability of work task exposure to blood, body fluids, or tissues.
- There are two risk categories.
- *Category 1*
  - High chance of exposure to blood/body fluids and contracting infectious disease.
- *Category 2*
  - NO RISK – routine work requires no contact with blood/body fluids.

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RESPIRATORY PROTECTION PROGRAM

CMC's program was developed to comply with all federal and state respiratory protection regulations.

The Program includes a Tuberculosis Control Plan to protect staff from exposure to Tuberculosis.
(Refer to Policy Manager INF-9.1-PRO)

It is important that all staff know and comply with this program.

N95 Mask Training for Respiratory Protection is completed upon hire.
Volunteers do not enter isolation rooms and do not require N95 masking

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PROTECTIVE PRECAUTIONS
VOLUNTEERS **MAY NOT** ENTER ISOLATION AREAS

Perform hand hygiene

No persons with infections can enter

No dried or live plants or flowers

No non-peelable fresh fruit or vegetables

Wear Mask, gown and gloves

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COVID-19
CONTACT AND DROPLET PRECAUTIONS

- Suspect patients placed in a private room on isolation using the sign on this slide
- ALL staff must wear N-95, eye protection, gown and gloves when entering the room
- Clean all equipment after contact with patient
- Dietary may not enter
- Volunteers may not enter

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Monkeypox
Contact and Droplet Precautions

- Suspect patients placed in a private room on isolation using the sign on this slide
- ALL staff must wear N-95, eye protection, gown and gloves when entering the room
- Follow same visitation guidelines as COVID
- Clean all equipment after contact with patient
- ALL trash and linen is to be disposed in **RED BIOHAZARD trash**
- Use routine cleaning procedures
- Dietary may not enter
- Volunteers may not enter

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Droplet Precautions

- Perform hand hygiene
- Wear mask
- Dietary may not enter
- Volunteers may not enter

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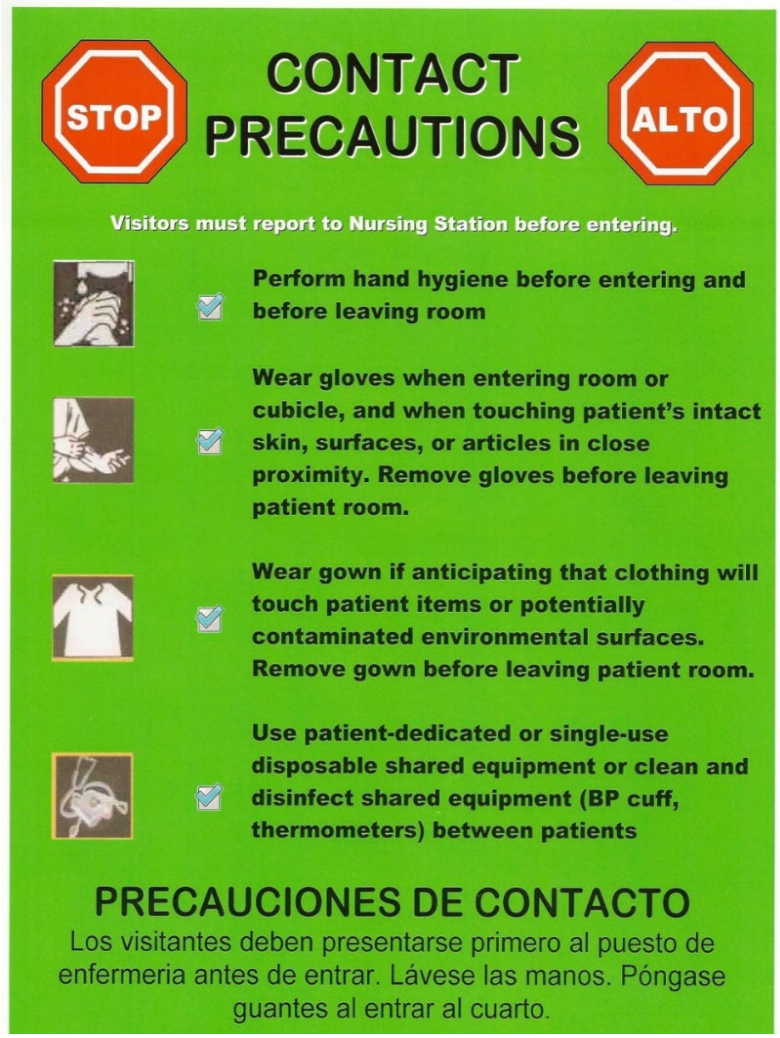
Contact Precautions

- Perform hand hygiene
- Wear Gloves
- Wear a gown
- Use patient dedicated single use equipment
- Dietary may not enter
- Volunteers may not enter



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Special Enteric Contact Precautions

- Wash your hands with soap and water
- Wear Gloves
- Wear a gown
- Use patient dedicated single use equipment and clean reusable equipment with **bleach wipes.**
- Dietary may not enter
- Volunteers may not enter

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Red Rules

- **RED RULES** outlines behavior based expectations & HUMAN error prevention techniques as tools
- Communicate effectively
  - Be personally responsible for effective communication
  - Identify self, department and purpose
- Take time out for Details
  - Carefully attend to important details
  - Use S.T.A.R. - A self checking technique to reduce errors: **Stop, Think, Act, Review**

RAISE THE RED FLAG

Red Rules

Seek clarification & assistance

Verify Patient Identity Using Two Identifiers

- Arm band - Request patient to speak their name and Date of Birth
- Compare arm band and name to patient documentation

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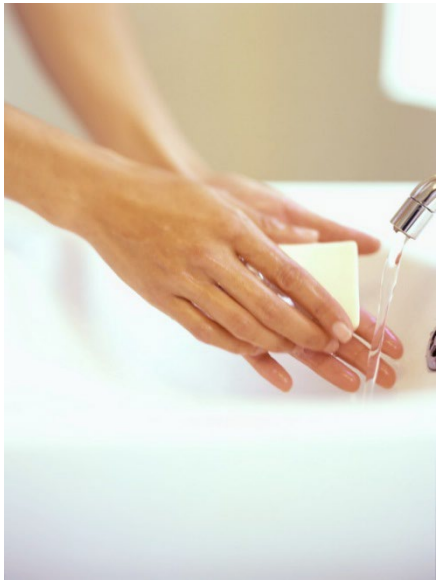
Red Rules

HAND WASHING IS PART OF RED RULES



- **ALWAYS** Wash Your Hands or Use Hand Sanitizer BEFORE and AFTER EVERY Patient Contact

SAFETY IS EVERYONE'S RESPONSIBILITY

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How to Report an Emergency

Immediately call the Emergency Operator at **“5555”.** Your call will be answered immediately.

Do not call “0”. You will be in queue with all other calls, and it may be several minutes before your call will be answered.

Refer to the back of your badge for important phone numbers.

For Assistance with any customer service issues For Assistance with any customer service issues

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ALERTS - PLAIN LANGUAGE

Conway Medical Center implemented Plain Language so that everyone (employees/volunteers/patients/visitors and vendors) would know what to do in the event of an emergency.

There are three types of ALERTS:

- **Facility Alert**: an emergency issue that affects the building.
- **Security Alert**: an event affecting the safety of employees, patients or visitors.
- **Medical Alert**: an event when someone is experiencing a medical emergency.

Upon activation of these emergencies, an announcement will be made throughout the entire facility with the type of alert, the event, and instructions for everyone on the main hospital campus.

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CODES

- Three color codes used so that families and visitors will not be alarmed and allow for controlled responses. These codes are as follow:

CODE BLUE = Medical Emergency

CODE ORANGE = Bomb Threat

CODE WHITE + description of person =

Missing Psychiatric Patient

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FIRE

- Know the location of the fire alarm and extinguisher in your department.
- Never use an elevator during a fire.

- Fires or other emergencies may require evacuation of patients.
- Know your specific area evacuation route and Rally Point.

- If your facility is not equipped with a monitored fire detection system, you must call 911 in the event of a fire.
- If your facility is equipped with a monitored fire detection system, the system will automatically call the fire department.

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Rally Point

Rally Point:

- A specific place outside the facility where employees and patients meet after evacuation to determine if everyone is accounted for.
- Every department has a Rally Point. Check with your manager to know your Rally Point.
- **The volunteer rally point at the main hospital building is out the front lobby doors, to the parking lot on the left, closest to Singleton Ridge Road.**
- All volunteers in offsite locations should be instructed by a Manager at the site in which they volunteer; however, it is the responsibility of Volunteers to leave immediately via the closest safe exit.

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SECURITY ASSISTANCE

Remember if you "See Something, Say Something". Call Security at 7555 and report anything suspicious.

This could include unattended packages, bags, someone loitering around an entrance or in the corridors.

Call the Emergency Operator at "5555" when you have a potentially violent situation or feel you or your coworkers are threatened and need assistance immediately. Ask them to page Security Assistance to the location.

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INFANT/CHILD ABDUCTION

Announcement:
"Security Alert + Missing Infant/Child + Staff to cover assigned exits. Stop anyone with an infant/child. Call "5555" if located."

Infant means the patient does not walk and will be carried or concealed in a bag or box.

Child means the patient can walk but may be carried.

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INFANT/CHILD ABDUCTION

- Upon hearing the announcement, employees will search their departments and adjacent public areas for the infant/child.
- At least one employee will man the department's assigned exit (typically assigned and planned in advance).
- If your department is assigned a radio (and it is readily available), take it to your assigned exit and turn it to security department channel 2.
- Do not let <u>any</u> infant/child leave without being properly identified/cleared.
- Call the Emergency Operator at "5555" if someone meeting the description is found.

Mass Casualty

Announcement:
"Facility Alert + Mass Casualty Incident (Internal or External)"

- Mass Casualty is used to denote that we are receiving a increase number of victims into our Emergency Department. Which means that our staffing and supply needs may exceed our available **resources.**
- This is announced as **Mass Casualty - Internal**, if the disaster has occurred inside the facility and will be arriving to the Emergency Department quickly.
- If it is announced as **Mass Casualty - External**, the disaster has occurred outside the facility and the victims are being brought to the Emergency Department via EMS which allows us time to prepare.

Contamination

Announcement:
"Facility Alert + Decontamination needed + location (if known). Please avoid this area."

- Our greatest risk during a hazardous chemical spill is the contamination of our facility or campus.

- CMC has a Decon Team that is trained to respond and provide the decontamination that is required
- Hopefully a contaminated victim would enter through the Emergency Room.
- They could become contaminated by a chemical inside our facility
- Some obvious signs of contamination would be:

  >Discolored clothing.

  > Foul Odor.

  > Liquid or Gel on skin or clothing.

  > Complaining of burning or pain.

If you encounter a contaminated victim…..

- Get the victim outside where there is better ventilation; remain upwind if possible
- Stay a minimum of 10 feet from the victim, escort the victim to the fixed decon room outside the ambulance entrance.
- Notify the Emergency Operator at “5555” and have her page a Contamination and the location.

What are Hot Zones?

- Hot Zones will be marked with tape to denote areas of chemical contamination or hostage situations.
- Do not enter these areas unless properly trained or told to do so.
- During a lockdown the gate guard would inform the incoming employee of the location of a hot zone and where you should park.

Armed Subject

Announcement:

"Security Alert + A threatening situation exists in XYZ

All persons should immediately move away from this location

- Upon recognition of a gunman or armed subject of any kind

Avoid | Deny | Defend

- **Call Emergency Operator at 5555 report incident and location. Operator will make necessary announcements**
- **CALL 911 <u>When you are in a safe area</u> if he/she saw an actual weapon**
    - **Inform the 911 Operator that this is an active shooter situation**

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Three Minutes…..

- Once notified, Law Enforcement will respond to an Active Shooter as quickly as possible
- Your immediate actions should be focused on maximizing your personal safety until Law Enforcement is able to stop the threat
- Instructions will come via paging system and/or from Law Enforcement

Armed Subject

- **Avoid/RUN** starts with your state of mind
  - Pay attention to your surrounding
  - Have an exit plan
  - Move away from the source of the threat as quickly as possible
  - The more distance and barriers between you and the threat, the better

Armed Subject

- **Deny/FIGHT because you have the right to protect yourself**
  - **If you cannot Avoid or Deny be prepared to defend yourself**
  - **Be aggressive and committed to your actions**
  - **Do not fight fairly**

THIS IS ABOUT SURVIVAL.

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Armed Subject

- **Defend/HIDE when getting away is difficult or maybe even impossible**
  - **Keep distance between you and the source**
  - **Create barriers to prevent or slow down a threat from getting to you**
  - **Turn the lights off**
  - **Remain out of sight and quiet by hiding behind large objects and silencing your phone**

Controlled Access (Lockdown)

Announcement:
"Facility Alert + Controlled Access + location (if known).
Please avoid this area."

Controlled Access, previously referred to as a lockdown, may vary based on the need. In certain situations (Contamination, External Disasters, Violence, etc.) a controlled access of the building and roadways may be required to protect the safety of the employees, patients, visitors and volunteers. In other situations it may be necessary to control access to the hospital or the Emergency Department.

Controlled Access cont..

- If there is a controlled access to a certain department (ED or MCHS) you could enter this area with your employee code, but DO NOT allow others to enter. They MUST use their own code or not be allowed access.
- During a controlled access employees must enter thru Cypress Circle between the Administrative Building and North Tower.
- Make sure you always carry your ID badge home with you. Never leave it behind.

Nicotine Free Campus

- Since it is the CMC mission to improve the overall health of the community, we recognize that nicotine use or even the appearance of nicotine use at our facilities is contrary to that mission.
- Tobacco smoke is a dangerous pollutant that harms non-smokers and smokers alike.
- Additionally, smokeless tobacco and electronic delivery devices may convey an inaccurate message with their appearance and create confusion and concern for health risks to others.

HUMAN RESOURCES Policy
HR-4.3-E-POL
NICOTINE FREE ORGANIZATION

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ALL CLEAR……

At the conclusion of any emergency situation; the Emergency Operator will make an announcement to include the type of incident + all clear. This will be announced three times.

For example: **"Facility Alert + Fire Detector + All Clear; Facility Alert + Fire Detector + All Clear; Facility Alert + Fire Detector + All Clear."**

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What to Do if You Are Injured while volunteering

- Report the injury to your supervisor/manager as soon as possible.
- Report to the Employee Health Nurse or Nursing Supervisor as soon as possible.
- Complete a Supervisor's Report of an Employee Occurrence found on the Intranet (eSREO).

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Supervisors Report of Employee Occurrence (SREO)

- Immediately Report Any Incident or Accident
- Investigations Help Prevent Recurrence
- Hospital Has Insurance On Volunteers
- Conway Medical Center urges any volunteer who is injured while volunteering at CMC to immediately report the injury to the director of volunteers x5486 or a supervisor immediately.

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A **Supervisors Report of Employee Occurrence (SREO) must be completed by you and your supervisor.**

- To help prevent future accidents, work with your supervisor to complete an accident investigation.
- The SREO will be turned into the employee health nurse.
- The supervisor will forward the report of a patient or visitor injury to the Hospital's Risk Manager.

SHARE Reporting

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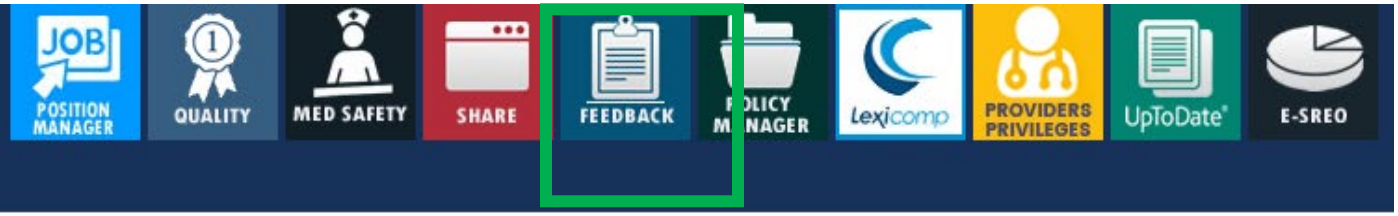
INTRANET



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- **S**taff **H**elp **A**ll by **R**eporting **E**vents
- **SHARE** is our Safety Event reporting system and is located on CMC Intranet.
- Any situation that is inconsistent with **normal hospital operations** should be reported in SHARE. **This must be entered by an employee as volunteers do not have access to SHARE.**
- SHARE is **confidential** and **peer protected.** It is used for the purpose of performance improvement and to enhance patient/staff safety.
- Examples of things to report: Patient/Visitor Falls, Medication Variances, Events, Missed Orders, Order Entry Errors, Medical Device Events

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Obtaining A Safety Data Sheet

NICE PAK

PDI Professional Disposables International
The Healthcare Division of Nice-Pak Products, Inc.

Material Safety Data Sheet

MSDS No. 0019A

Super Sani-Cloth® Germicidal Disposable Wipe

1.0 Product and Company Identification

Product Name: SUPER SANI-CLOTH® GERMICIDAL DISPOSABLE WIPE

Manufacturer or Supplier:
Nice-Pak Products, Inc.
Professional Disposables International, Inc.
Two Nice-Pak Park
Orangeburg, NY 10962-1376
Toronto, Ontario M9L 1V8 Canada (800) 263-7067

Emergency and General Information:
1-845-365-1700 (USA) (M-F 8am-5pm Eastern time)
or call your local Poison Control Center

2.0 Composition/Information on Ingredients

Component	CAS Number	Percent (%)
Isopropyl Alcohol	67-63-0	55.0 (w/w)
Quaternary Ammonium Compound	68391-01-5 68956-79-6	0.5 (w/w)

3.0 Hazards Identification

Emergency Overview: Combustible. Causes moderate eye irritation. Avoid contact with eyes or clothing. Wash thoroughly with soap and water after handling.

NFPA 704 Hazard Ratings:
Flammability: 2
Health: 1
Instability (Reactivity): 0
Special: None

Potential Health Effects: Caution: Causes moderate eye irritation. Avoid contact with eyes or clothing.
Eye Contact: Causes moderate eye irritation. Avoid contact with eyes or clothing.
Skin Contact: None expected for treated cloth. Wash thoroughly with soap and water after handling.
Inhalation: Use with adequate ventilation. Vapor concentrations above recommended exposure levels are irritating to the eyes and the respiratory tract; may cause headaches and dizziness, and other central nervous system effects.
Ingestion: Unlikely route of exposure.

4.0 First Aid Measures

Eye Contact: Hold eye open and rinse slowly and gently with water for 15-20 minutes. Remove contact lenses, if present, after the first 5 minutes, then continue rinsing eye. Call a poison control center or doctor for treatment advice. Have the product container or label with you when calling a poison control center or doctor, or going for treatment.
Skin Contact: If skin irritation occurs, discontinue use and wash with copious amounts of soap and water.
Inhalation: Unlikely route of exposure. Remove the affected person to fresh air. Administer artificial respiration if breathing has stopped. Call for prompt medical attention.
Ingestion: Unlikely route of exposure. If swallowed, DO NOT induce vomiting. Get prompt medical attention. Have the product container or label with you when calling a poison control center or doctor, or going for treatment.

Safety Data sheets are required documents for every hazardous chemical in the facility

These sheets contain information about the chemical, PPE that is required and first aid if you should be overcome by the fumes of the chemical.

CMC uses FAX ON DEMAND to obtain Safety Data Sheets service issues For Assistance with any customer service issues

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Hazardous Product Data-Fax On Demand

- Fax on Demand is available 24/7.
- Simply call **1-800-451-8346.**
- Information they will need is:
  - Product name and number
  - Manufacturer's name
  - UPC Code
  - Fax number where the info can be faxed to you.

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Oxygen

Must be transported via a **secure method**: rack on a stretcher or a roll around hand carrier; Volunteer must have two hands on a wheelchair and not trying to pull along an O2 container. Lap size O2 transport is permissible for a volunteer

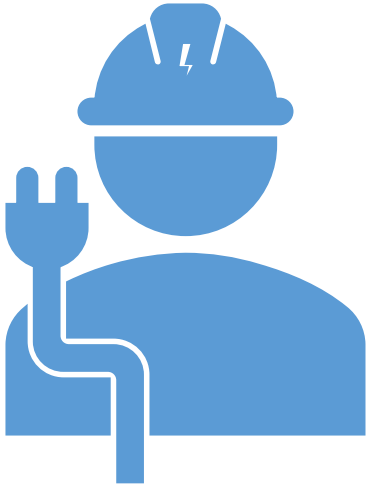
Even though the hospital is a nicotine free facility, **NO SMOKING** signs must be displayed on the tank;

No more than 12 cylinders can be stored in any location;

If you see a related problem, report it so it can be fixed.

UTILITIES

- POWER: Conway Medical Center has two backup generators. If the electrical power is interrupted, there will be a three second outage; and the generators will restore **ALL** electricity within the hospital and selected power in other areas like the administrative building.
- Any utility failure should be reported to the Maintenance Department as soon as possible for repairs to be made by calling extension 4747.
- If any electrical equipment is not operating properly, take it out of use immediately – tag it so no one else will use it and report it as soon as possible. REMEMBER to include your name and an exact location of the equipment.
- Employees who care for patients with oxygen need to know where the Oxygen Shut Off Valves are located and be prepared to shut off oxygen during a fire situation. Do you know how to shut it off? Ask about this in your department!



Safe Medical Device Act and reporting Procedures

- A Hospital staff member or Medical Staff member who becomes aware of a medical device event shall immediately remove the device from the patient (if possible) and secure it
  - secure the device by shutting off power to the device, unplugging, and if battery powered, the power switch should be moved to the "off" position
- No changes should be made to the device (i.e., all settings should remain the same and no accessories should be removed)
- The device shall be locked in an unoccupied space
- The Staff Member shall complete an Equipment Repair Form, GNA-43-FRM, (accessible via the CMC Intranet) and attach it to the device
- Complete a SHARE report
- Notify VP of Quality or designee
  - The VP of Quality or his/her designee will take any other appropriate action after examination of the device

For additional information, please refer to policy:
Medical Device Event Reporting ADM-2.19.4-PRO

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Clinical Technology Department

- Role of Clinical Technology Department: maintain, service and manage all patient related medical devices, both therapeutic and diagnostic, to achieve the safest most reliable device stature.
- What do the inspection stickers mean?
  - Clinical Equipment ID (CEID)- uniquely assigned number/code assigned to identify a specific piece of equipment

  - Trimedx Preventative Maintenance (PM) Sticker- reflects the month and year equipment is due to have routine maintenance

  - Trimedx Inventory Validation Sticker – verifies equipment has been inventoried during the year indicated on the sticker

- Service request on medical equipment or to report a malfunctioning piece of Medical Equipment Serviced by Clinical Technology please set up a Service-Now Login using the link provided under Trimedx on the CMC Homepage or call (833)267-5302
- CMC extensions are as follows:

Ben-8159	Chet-6761	John-6786
Josh-8580	Thomas-6762	Tom-1408

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SPILLS

- Treat any spill as dangerous unless you positively know what was spilled
- Stop and take action
- Spills stations are located throughout the entire facility
- Anyone can place absorbent YELLOW pad on Spills
- Large Spills - Place pop-up safety cone at spill and notify Housekeeping
- Report any spills requiring housekeeping assistance

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Reporting Compliments or Complaints

- Conway Medical Center urges any volunteer who receives a compliment or a complaint to share the information with the Department Manager, Customer Service Coordinator or the Director of Volunteer Services.
- If there is an issue a member of Management may address immediately.
- This information may be entered into our FEEDBACK database for follow up by a staff member.

Proper Lifting

- Ask Hospital Staff to help you.
- Do not lift patients.
- Know your limits and don’t exceed them; get assistance

Wheelchair Safety

Please review: CMC VOL 22 PRO Wheelchair Procedures for Volunteers

- **Volunteers are very responsive to aide in patient wheelchair transport.**

RESTRICTIONS:

- Volunteers do not transport a **patient exceeding approximately 250 lbs**. Paid staff need to take these transports.
  - Volunteers will tactfully ask clinical staff to complete the transport to not embarrass the patient, visitor or oneself.
- Volunteers do not transport **patients with an IV**
- Volunteers do not transport patients with a **pull along Oxygen container**. O2 must be in proper carrier. Cylinders should not be placed in patients lap or leaning on a footrest of a wheelchair
- Volunteers do not assist patients in/out of vehicles
- Volunteers do not take patients to the parking lot

NO PASS ZONE

It is everyone's responsibility to assist our patients

If you are on the nursing floors and a call light in the hall is on……DO NOT WALK BY……

YOUR ACTION SHOULD BE:

- Knock on Patients door
- Enter Room
- Use hand sanitizer
- Say Hello, my name is_____, I am a volunteer here at Conway Medical. Is there something I can help you with?

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Scripted responses:

- I would be happy to help you
- Let me find your nurse to assist you
- I just spoke to your nurse, they will be here in about (number of minutes) to help you.
- Thank you for allowing me to help you.
- Before I go, is there anything else I can do for you?
- Smile, Say Goodbye, Use Hand Sanitizer, exit

DO's

- Help patient with call light, telephone, bedside table, chair…
- Help get personal items such as a blanket, pillow, towel, washcloth, slippers, toiletries…
- Place pens, pencils, books magazines in reach
- Help them make or answer phone calls
- Help turn TV on/off or change channel
- Help turn lights on/off

DON’T

- Don’t Answer questions about tests, treatments or medications
- Don’t raise or lower bed or assist a patient in/out of bed
- Don’t enter isolation room
- Don’t turn off alarms, IV pumps or machines
- Don’t’ give the patient food or drinks without talking to the nurse first

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Language Services

- Conway Medical Center provides professional medical Interpreters to limited-English-proficient and hearing-impaired patients. Interpreters facilitate communication between providers and patients, family and visitors.

On-site Spanish Interpreter

Jessica Armenta

- Monday thru Friday 8:00am to 4:30pm
- Office # 5467
- Ascom #7537

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Over-the-Phone Interpreting Service

- Medical interpreter available in over 150 languages, 24/7
- Located on all nursing units
- Connect to an interpreter in 15 seconds or less, on average
- Efficient interpretation encounters improve efficiency and productivity

Video Remote Interpreting (VRI)

On demand access 24/7

Access to Policy Manager

From the Conway Medical Center Intranet

All volunteer policies are located on Policy Manager and a hard copy in the Volunteer Service Center and Directors office.

If you need assistance obtaining a policy in the system, contact your supervisor.

Policy Manager has the following Policies and Procedures:

- Administrative Policies
- Exposure Control Plan
- Environment of Care Policies
- Emergency Management Policies
- Infection Control Policies
- Exposure Control Policies

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Thank you for participating in this review of annual regulatory requirements. It is for your safety, the safety of your co-workers, and our community. If you have any safety concernsand return the form no later than November 30, 2022. in the postage paid e, please report them to your Director.

Please complete the annual review contained with your letter. Answer all questions, sign nvelope provided.

Return to the Director of Volunteers.

You can always access volunteer information or refer a friend: https://www.conwaymedicalcenter.com/volunteers-only/

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