

## HACKETTSTOWN COMMUNITY HOSPITAL

### RULES AND REGULATIONS FOR TEMPORARY EMPLOYEES AND STUDENTS

#### WELCOME

Hackettstown Community Hospital is a member of Adventist HealthCare, a nonprofit system of hospitals and other healthcare providers and facilities based in Rockville, Maryland, covering three states – New Jersey, Maryland, Virginia – and the District of Columbia. Adventist HealthCare is part of a worldwide network of institutions which include over four hundred medical facilities in some 69 countries. These range from the acclaimed Loma Linda Medical Center in California and 1,200 bed Florida Hospital in Orlando to boat clinics on the Amazon and mission hospitals in Africa and Asia. Scores of hospitals are located within the United States.

Adventist HealthCare employs more than 7,000 people and cares for over 200,000 patients each year. Each year, Adventist HealthCare facilities perform nearly 700 open heart surgeries and over 6,000 heart catheterizations and angioplasties, tend to more than 147,000 emergency visitors, deliver almost 8,000 babies, and provide 100,000 skilled home care visits.

You can be proud to be a member of Hackettstown Community Hospital and our Adventist HealthCare family!

#### MISSION STATEMENT

To reflect God's love and caring in the healing of the body, mind and spirit.

#### VISION STATEMENT

Leading the way to a healthier community

#### VALUES: RISES

Respect, Integrity, Service, Excellence & Stewardship

## CRITICAL SUCCESS FACTORS

We must be the best place to work for employees, physicians, volunteers and partners.

We must provide the most extraordinary health care experience for those we serve.

We must be financially successful in order to invest in our people, facilities and services.

We must be a growing organization in order to preserve and expand our role as a vital community resource.

We must be the safest place to receive care and deliver superior clinical outcomes.

We must be valued as a faith-based organization.

## APPEARANCE

Hackettstown Community Hospital recognizes that appearance and demeanor play an important role in others having confidence in us.

Identification Badges – Photo I.D. badges must be worn at all times while on duty. I.D. badges must be positioned above the waist with name and photo clearly visible.

Grooming Standards – Attention should be given to personal hygiene, including daily oral care. Heavy use of makeup, cologne and perfume should be avoided.

Fingernails – Nails should be clean, neatly manicured, and an appropriate business length for employees in all departments of the hospital. Consistent with National Patient Safety and Infection Control Standards, the hospital prohibits artificial fingernails or extenders to be worn by staff who provide direct patient care, directly supervise patient care, or have contact with patient care supplies, medications, equipment or food. “Artificial fingernails” are defined as any material applied to the nail for the purpose of strengthening or lengthening nails, including but not limited to: silk wrap; overlays; tips; extenders; gels or tapes.

Hair – Hair should be neat, clean and styled for a professional setting.

### Dress Standards

Clothing - Clothing should fit properly, be modest, coordinated, clean, pressed, in good repair and appropriate for the work environment. Uniforms should

be consistent with the department or school policy. The following items of clothing are never appropriate for work within the hospital setting:

- Tank, halter and tube tops
- Casual footwear or flip flops
- Spandex, sweat suits and other exercise-type clothing
- Recreational shorts, skorts and slacks
- Jeans (regardless of color)
- T-shirts with slogans, logos or advertising
- Extreme styles of clothing

Footwear - Athletic shoes are not appropriate in most areas of the hospital. Sandals, open-toed and other styles of footwear may be prohibited in some areas due to safety precautions.

Business Attire - Shirts, ties, and tailored slacks for men; tailored slacks and skirts with jackets, blouses and sweaters as well as dresses are considered appropriate business attire for women in an office setting within the hospital. Business suits and dresses should be worn when representing the hospital at business functions.

Jewelry - Conservative jewelry, including earrings (not to exceed one inch), is acceptable in most areas of the hospital. Excessive tattoos and body piercing jewelry should not be visible.

## ETHICS

The hospital's code of ethics requires truthfulness, honesty, and personal integrity in all human activities.

## CULTURAL DIVERSITY

Culture is defined as "values, beliefs, attitudes and customs shared by a group and passed from one generation to the next. Culture is largely unconscious and has powerful influences on health and illness.

Cultural diversity refers to the variations and differences among and between cultural groups. Understanding your own beliefs helps you to understand other peoples cultural beliefs.

Patients' respond to care that agrees with their own beliefs.

A patients cultural belief may affect their expectations in the care they receive. They include differences in beliefs about pain, health, illness, death and family.

A person may overrate or underrate pain depending on how their culture expresses pain. They may express pain verbally or through nonverbal ways.

Birth practices vary by culture. Naming of the baby and who is present at the birth are two examples.

Food choice is influenced by cultural beliefs. Some may only eat vegetarian choices. Others may avoid pork products.

In some cultures illness may be thought to be a punishment for wrong doing, while other cultures may believe that it was caused by bitterness or anger.

A family's role varies among cultures. Family involvement in patients care varies by culture.

Being aware of cultural differences will help you provide the best care for your patient.

## CONFIDENTIALITY

Confidentiality is a right that is federally protected for each patient in order to protect their right to privacy. Simple rules:

1. Do not discuss patients in public areas (elevators, cafeteria, hallways, etc.)
2. Do not discuss patients with persons outside the hospital.
3. Do not allow family members or visitors access to the medical record without written permission from the patient.

NOTE: Any violation of the confidentiality of medical information may result in actions including termination of employment.

## HIPAA

HIPAA is a federal regulation titled, Health Insurance Portability and Accountability Act. The regulation is designed to 1) reduce health care fraud and abuse 2) enforce standards for health information and 3) guarantee security and privacy of health information.

The HIPAA Privacy regulations went into effect on April 14, 2003 to accomplish:

1. Informing consumers about how their health information is being used
2. To limit the release of private health information (PHI).
3. To give patients access to their own health records and request amendments/corrections.

4. Limit the amount of health information used and disclosed to a "minimum necessary".

Health information as defined by the HIPAA regulations, includes information that is recorded or maintained in all forms (written, verbal and electronic). Disclosing of PHI requires patient authorization, unless it is for Treatment, Payment and Health Operations or to the public health or legal authorities charged with preventing or controlling disease, injury or disability.

The HIPAA Privacy officer for Hackettstown Community Hospital is Forrest Kinzli. If a patient has questions or would like to file a complaint, they can call Adventist Health Corporate, or the US Secretary of Health and Human Services.

The Office of Civil Rights (OCR) enforces the HIPAA regulations, with civil and criminal penalties for flagrant violations. Fines from \$100 to \$250 and imprisonment from 1 year to 10 years can be assessed to individuals or organizations for intentional disclosure of PHI, disclosing PHI under false pretense or knowingly misusing or selling PHI.

#### CAFETERIA

You may purchase meals, featuring meatless entrees, in the hospital cafeteria or you may bring your own lunch.

#### INSERVICE EDUCATION

Students are welcome to any inservice being held in the hospital with the planning and permission of the Education Department Manager and your Instructor.

#### INCIDENT REPORTS

Any incident of an unsafe nature that you witnessed must be recorded on a special Incident Report. The RN or Manager/Coordinator of the area will aid you and co-sign.

#### PARKING

See attached map. You may park in any of the purple areas.

#### ELEVATORS

Elevators should not be used during hospital emergencies, such as fire drills or disaster exercises, so that they may be available during this period. Elevator courtesy is something which should be practiced. Each should observe the following rules:

1. Patients and visitors should always be permitted to enter and leave an elevator first.
2. Do not detain the elevator by holding the door

## FIRE SAFETY

The Code word for Fire is "Dr. Firestone". You are alerted to a fire and its location by an alarm system and the message, "Dr. Firestone" followed by the location of the fire. It is essential that you observe the following procedures and regulations:

1. Learn and be familiar with the fire rules and regulations for the hospital in general and, particularly, for your department.
2. Learn where the nearest fire alarm box and fire-fighting equipment are located in your particular work area.
3. IN CASE OF FIRE, REMEMBER...

R Rescue - Rescue people in immediate danger while calling out "Dr. Firestone".

A Alarm - Pull nearest wall alarm.

C Contain - Close doors and windows.

E Evacuate - Evacuate, or extinguish small fires.

NOTE: If the fire has not spread from the point at which it started, it should be suppressed by the discoverer!

REMEMBER THE PATIENT'S SAFETY ALWAYS COMES FIRST

Reporting a fire and assisting with fire fighting is a job obligation and the responsibility of everyone.

PASS

To use a fire extinguisher, remember this acronym:

- P Pull the pin
- A Aim at the base of the fire
- S Squeeze the handle
- S Sweep

You will be expected to follow the instructions outlined for your department during fire drills conducted at regular intervals.

## HOSPITAL CODES

See chart below

CODE WORD	WHAT IT MEANS	NUMBER TO DIAL
Dr. Firestone	Fire or Fire Drill	Pull closest fire alarm. If alarm does not sound, dial 6000.
Dr. Dee Code Yellow	1) Emergency Management Plan is being instituted. 2) Decontamination tent is being set up 3) Hospital is being locked down	Dial 6000
Dr. Dee	Emergency Management Plan is being instituted.	Dial 6000
Dr. Heartwell	Cardiac/Respiratory Arrest	Dial 6000
Dr. Spock	Infant/child abduction	Dial 6000
Dr. Strong	Obtain help for unruly patient or visitor	Dial 6000
Dr. Help	Help needed outside hospital on hospital grounds	Dial 6000

**DO NOT DIAL "0" FOR ANY OF THESE CODES**

**HAZARDOUS COMMUNICATION** When orienting to your department, be sure to talk with your Manager regarding any hazardous materials you may be working with. For each hazardous material there will be a Material Safety Data Sheet (MSDS). These sheets can be found in the Environmental and Patient Safety Manual (Bright Orange). These sheets tell you how to use the product safely, precautions to take, first aid information and how to clean up a spill.

All hazardous materials must be labeled:

- A. Name of the product
- B. Any hazard warnings
- C. Name and address of manufacturer

## NEW EQUIPMENT

All Equipment used on patients must be checked by the Biomedical Department. There will be a sticker on the product to indicate this has been done. Before you use a new piece of equipment, be sure you have been trained on its correct use and a current inspection sticker is in

place. Failure to do this could cause harm to a patient or yourself.

If a piece of equipment malfunctions causing harm to a patient, immediately take it out of service. Label it and send it to the Risk Manager. Also complete an incident report.

#### HOSPITAL ABUSE POLICIES

Policies on how to identify and report Child Abuse, Domestic Abuse and Elder Abuse can be found in the Administrative Manual (pink Dover) under the Nursing Tab NU03. Be familiar with this policy.

#### LATEX ALLERGIES

The policy on how we care for the latex allergic patient is found in the Administrative Manual (pink cover) under the Nursing Tab NU09. Be sure to review this policy. Your department may also have a unit specific policy. Patients with latex allergies are identified with a red band.

If you have any problems with latex, it is your responsibility to speak with Employee Health.

#### INFECTION CONTROL

Frequent, effective hand hygiene is the most important way to reduce the risk of transmission of infecting organisms from one person to another. Hand washing should be performed promptly and thoroughly between patient contacts and after contact with blood, body fluids, secretions, excretions and contaminated items. If hands are not visibly contaminated a waterless hand sanitizer may be used.

Barrier precautions (gloves, goggles, masks, gowns, etc.) also play an important part in reducing the transmission of microorganisms from the patient to the employee and from the employee to the patient.

Standard Precautions as defined by the Centers for Disease Control, (Atlanta, Ga.) are followed by all employees with all patients. Expanded precautions, Airborne, Droplet, Contact, and MDRO, are instituted when indicated and signs placed on the door to the patient room. They are to be followed by everyone who comes in contact with the patient.

Additional information can be obtained in the "Infection Control/Isolation Manual" located in all patient care areas.



## NATIONAL PATIENT SAFETY GOALS

The National Patient Safety Goals must be followed when providing patient care. These are required by JCAHO. See attached.

## RESOURCE MANUALS

Several manuals are available on the units for your review. The major ones are:

1. Administrative manual
2. Department of Nursing Standards Manual (Nursing policies and procedures)
3. Environmental and Patient Safety Manual which includes:
  - a. General Safety
  - b. Fire Plan
  - c. Disaster Plan
  - d. Blood Borne Pathogens Exposure Control Plan
  - e. Tuberculosis Control Plan
  - f. Hazardous Substance
4. Infection Control Isolation Manual

## ELECTRONIC SYSTEMS

See attached policy

## SMOKING, DRINKING & LOITERING

Smoking is not permitted in the hospital building. The use of all intoxicants while on the premises is prohibited. You will not be allowed on duty if there are obvious signs of the use of drugs or intoxicants.

## TELEPHONE COURTESY

The telephone is very often the first contact the public has with the hospital. Their impressions and opinions of the hospital are formed to a large degree by this initial contact. Each is requested to follow these recommended techniques of telephone courtesy:

1. Answer telephone promptly. Give the department name followed by your name. Example: "Nursing Office, Miss Smith" and title if appropriate.
2. Speak pleasantly and courteously.
3. Give careful and accurate answers.

## TIPS AND GRATUITIES

You may not solicit or accept tips or gifts from patients, their families, or friends for any service rendered in the course of your duties. This will prevent discrimination against patients regardless of economic status. Our policy requires that each patient receive the best service we can provide in pleasant and comfortable surroundings.

## EMPLOYEE HEALTH

Employee Health is responsible for medical clearance of newly hired employees, prior to their beginning employment; and of current employees prior to their return to work following an absence that requires medical clearance. This is to ensure that the employee is free from communicable disease and able to perform the essential job functions as outlined in the job description.

The medical clearance for newly hired employees includes a physical examination and history which needs to be completed within 12 months prior to starting work at HCH, laboratory work (CBC, Measles (Rubeola) if born after 1956 and rubella (German Measles) screen, urine drug screen and Mantoux skin test for tuberculosis (TB) a two-step Mantoux is required for all new employees, unless he/she can provide written documentation that he/she tests positive for TB or has had a TB skin test within the previous year. Annual TB testing is mandatory for all employees who do not test positive for TB. If you test positive, a chest x ray is required unless you have had one within 6 months. Yearly a mantoux questionnaire is required in place of a PPD. The questionnaire fulfills the employee's yearly mandatory requirement.

Vaccines available through Employee Health include Hepatitis B, influenza, measles, rubella, and/or tetanus. Hepatitis B vaccines are available to those employees whose job tasks expose them to blood and body fluids. Hepatitis B, measles, rubella, influenza and tetanus are given at no cost to the employee. A signed Hepatitis B declination form is required if the individual responsibility involves risk of possible exposure to blood or potentially infectious materials.

## WORKERS' COMPENSATION

Employee Health is also responsible for the Workers Compensation program at Hackettstown Community Hospital by verifying and investigating work related injuries and illnesses, coordinating care and follow-up. Maintaining the OSHA log, and authorizing payment of medical bills for employees. Verifying EIB and lost time must be discussed with Human Resources

Whenever you have a work-related injury or exposure, it is important you report it to your manager or supervisor. You will be instructed to fill out an Employee/Volunteer Injury/Illness Report form which you will take to either Employee Health or the Emergency Room for treatment and urine drug testing. If you are seen in the Emergency Department for treatment of a work-related incident, you

must notify Employee Health at extension 6911. If treatment is needed, a Doctor will be chosen by the Employee Health Nurse through our Workers Compensation Provider network. That Doctor will become the only authorized treating MD. If an employee chooses to be treated by a Dr. outside the network, they will be responsible for payment.

An employee sustaining a work-related injury or illness, which leaves the employee incapable of returning to work will be granted a workers' compensation leave. To be eligible for this leave, the employee must provide appropriate medical certification and follow all other workers' compensation procedures as directed by Employee Health. After all procedures are followed, a leave can be granted up to a maximum of three months.

If an employee's injury/illness requires an extension of leave beyond three months, the employee may be eligible for additional time under the Family Medical Leave Act (FMLA). This is to be discussed with HR. Before returning to work, an employee must report to the Employee Health office with medical clearance from the treating physician, which indicates his/her ability to return to work and any restrictions that may apply. Temporary modified (light) duty is available. The Employee is required to read & sign a Temporary Modified Duty agreement.

The Hospital will make every effort to accommodate an employee's return to work; however, if job restrictions apply which cannot be reasonable accommodated, the employee will remain out of work until he/she can return with or without reasonable accommodations, provided the employee is not out for longer than the maximum leave time.

Employee Health maintains the confidentiality of all employee medical records. Your medical records are kept in a separate file from your personnel records and are locked when Employee Health is closed. Copies of any part of your medical record cannot be released without your written consent. The exception to this is if OSHA requests to see your medical file in relation to an OSHA incident. You may obtain copies of your medical records by contacting Employee Health and filling out the appropriate paper work.

The activities of Employee Health are conducted in compliance with guidelines set forth by Hospital and Department policies, as well as by Federal and State Requirements, and in accordance with accepted medical practice.

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