



DONALSONVILLE
HOSPITAL

Nurturing Health. Connecting Community.

Annual Educational Update

May 2024

Donalsonville Hospital & Seminole Manor Care Community

The **Ethics Committee** meets as needed for the resolution assistance regarding ethical issues.

Values endorsed by our facilities are:

- ▶ Quality
- ▶ Teamwork
- ▶ Courtesy
- ▶ Improvement
- ▶ Integrity

Sexual Harassment

Sexual harassment can happen to anybody. It is **NOT** to be tolerated.

If you are being sexually harassed, report it to your supervisor or to Human Resources.

Complaints will be investigated with particular care and will be treated confidentially.

Donalsonville Hospital & Seminole Manor Care Community

Complies with all applicable laws regarding discrimination on the basis of race, religion, sex, age, national origin, handicap, or veteran status.

Mission Statement

The mission of Donalsonville Hospital, Inc. is to provide, at the direction of our Medical Staff, a uniform level of such high-quality curative and palliative health care and diagnostic services as are within our Scope of Services to all who seek our aid and to refer those whose needs cannot be met within our Scope of Services to other qualified and competent providers of care, while striving continuously to improve the quality of care and service, and preparing always to evolve as an organization as the nature of health care in the nation and our geographic locality changes.

Employee Grievance

An employee with a work-related grievance or complaint has the right to freely seek relief through the organizational chain of command without fear of restraint, reprisal, interference, coercion, or discrimination.

The matter should first be brought to the attention of the employee's immediate supervisor/Department Head.

If the complaint involves the supervisor/Department Head or if a satisfactory solution is not reached, it may be referred to Human Resources. Human Resources can then assist in referring it to the Administrator and the Board of Directors, if necessary.

***Information concerning an employee complaint or grievance will be held in confidence.**

Corporate Policies

Substance Abuse Policy

- ▶ It is a violation of Hospital policy for any employee to use, possess, sell, trade, offer for sale, or offer to buy illegal drugs or otherwise engage in the illegal use of drugs.
- ▶ It is a violation for any DHI employee to report to work under the influence of illegal drugs or alcohol.
- ▶ It is a violation for any DHI employee to use prescription drugs illegally; however, nothing in this policy precludes the appropriate use of medicine legally prescribed to that employee and taken according to the prescription.
- ▶ Violations of this policy are subject to disciplinary action up to and including termination of employment



Corporate Policies

Standards of Conduct

Specifically, Donalsonville Hospital expects its employees to:

- ▶ Adhere to standards of conduct for professional practice
- ▶ Conduct themselves, both inside and outside the workplace, in a moral and legal manner
- ▶ Treat all persons fairly and kindly without discrimination as to race, origin, social status, or economic level
- ▶ Obey all laws, regulations, and policies governing the provision of care to our patients, residents, and customers
- ▶ Report mistakes and errors. Never cover up an incident by altering records, falsifying information, or failing to report the event to the appropriate person
- ▶ Report incidents of illegal, unethical, or fraudulent behavior observed in the workplace

Tobacco Free Policy

POLICY

Donalsonville Hospital is committed to providing the healthiest environment possible for its patients, visitors, and employees.

Therefore, in an effort to provide quality healthcare and promote wellness to those we serve, employees are prohibited from all forms of tobacco use (including smoking materials, chewing tobacco, electronic cigarettes, clove cigarettes, medical marijuana, and snuff) on Donalsonville Hospital's campus and other owned affiliates during their assigned working shift.

ENFORCEMENT

The use of nicotine by employees during hospital work time on any property owned or operated by Donalsonville Hospital will result in disciplinary action.

Residents in Seminole Manor have to agree to give up smoking as a condition of admission. Any resident found smoking in the Care Community could be subject to discharge if the resident continues to violate smoking regulations.

Compassion Fatigue

▶ Definition

- ▶ The mental & emotional distress that impacts healthcare professionals which creates a disconnect from the provision of empathic and compassionate care

▶ Symptoms

- ▶ Chronic physical exhaustion
- ▶ Depersonalization of the patients
- ▶ Varied impacts to personal life
- ▶ Chronic emotional exhaustion
- ▶ Irritability and frustration
- ▶ Absence of empathy

▶ Ways to Combat

- ▶ Change your scenery
- ▶ Spend time doing something you enjoy
- ▶ Establish and honor boundaries related to work
- ▶ Talk with a trusted confidant
- ▶ Eat well
- ▶ Practice solid sleep patterns & exercise
- ▶ Talk with your supervisor or team lead

EMTALA

Emergency Medical Treatment and Labor Act

EMTALA

Provisions of EMTALA

The Emergency Medical Treatment and Labor Act (EMTALA) was enabled by Congress in 1986 as part of the Consolidated Omnibus Budget Reconciliation Act (COBRA) of 1985 (42 U.S.C. §1395dd). EMTALA is the Section 1867(a) of the Social Security Act, within the section of the U.S. Code which governs Medicare.

As an “anti-dumping” law, EMTALA was designed to prevent hospitals from discharging or transferring uninsured or Medicaid patients to public hospitals without providing, at a minimum, a medical screening (appropriate and consistent with the hospital’s customary capacity) and stabilizing the patient’s emergency constitution.

Under the Anti-Discrimination Law (Title VI of the Civil Rights Act of 1964 [42 U.S.C. §2000d]), EMTALA is enacted to prevent discrimination for race, color, creed, or national origin (45 CFR).

Donalsonville Hospital Policy

If you have a medical emergency or are in labor, you have a right to receive, within the capabilities of this hospital’s staff and facilities:

- ▶ An appropriate medical screening examination
- ▶ Necessary stabilizing treatment (including treatment for an unborn child)
and, if necessary,
- ▶ An appropriate transfer to another facility

Even if you cannot pay or do not have medical insurance

EMTALA

Flowchart



Emergency room patients must receive a medical screening exam without delay to determine if they have an emergency condition

Patient has an emergency medical condition.

Patient does not have an emergency medical condition.

Hospital stabilizes patient.

Hospital cannot stabilize patient and provides an appropriate transfer.



Hospital has fulfilled basic EMTALA requirements.



EMTALA

Hospitals and Care Communities have many functions to perform, including:

- ▶ The enhancement of health status
- ▶ Health promotion
- ▶ Prevention and treatment of injury and disease
- ▶ Immediate and ongoing care and rehabilitation
- ▶ The education of healthcare professionals, patients, residents, and the community

All of these activities must be conducted with an overriding concern for the values and dignity of the patients and residents served.

ENFORCEMENT OF VIOLATIONS

The Georgia Department of Human Resources is authorized to:

- ▶ Order the facility to discontinue admitting residents until all violations have been corrected
- ▶ Assess a civil penalty to the facility

HIPAA

Health Insurance Portability and Accountability Act of 1996

HIPAA Standards

Privacy standards, developed by the Department of Health and Human Services, that address the use and disclosure of health information, patient consent, and authorization for the use of information, patients rights to review their health information, request edits, and demand an accounting of disclosures of health information.

Security standards for health information including administrative, technical, and physical safeguards, to ensure the security and confidentiality of health information and to prevent security breaches and unauthorized use or disclosure of health information.

HIPAA Privacy Rule

The HIPAA Privacy **Rule** established national standards to protect individuals' medical records and other personal health information and applies to health plans, health care, clearinghouses, and those health care providers that conduct certain health care transactions electronically. The **Rule** requires appropriate safeguards to protect the limits and conditions on the uses and disclosures that may be made of such information without patient authorization. The **Rule** also gives patients' rights over their health information, including rights to examine and obtain a copy of their health records and to request corrections.

Protected Health Information

- ▶ Protected Health Information (PHI) under HIPAA includes any individual identifiable health information. Identifiable refers not only to data that is explicitly linked to a particular individual (that's identified information), but it also includes health information with data items which reasonably could be expected to allow individual identification.
- ▶ HIPAA regulations define Health Information as “ANY written or recorded in any form of medium” that “is created or received by the health care provider, health plan, public health authority, employer, life insurer, school or university, or health care clearinghouse”, and “related to the past, present or future physical or mental health condition of an individual; the provision of health care to an individual; or the past, present, or future payment for the provision of health care to an individual.”
- ▶ All employees have an ethical and legal obligation to maintain privacy and confidentiality.

Protected Health Information

HIPAA lists 18 identifiers that are considered personally identifiable information

- ▶ Name
- ▶ Address
- ▶ Any dates (including birthdate, admission date, discharge date, date of death, etc.)
- ▶ Telephone numbers
- ▶ Fax numbers
- ▶ Email address
- ▶ Social Security Number
- ▶ Medical Record Number
- ▶ Health Plan Beneficiary Number (Insurance Policy ID)
- ▶ Account Number
- ▶ Certificate or License Number
- ▶ Vehicle identifiers (including serial numbers and license plate number)
- ▶ Device identifiers & serial numbers
- ▶ Web URL
- ▶ Internet Protocol (IP) Address
- ▶ Finger or voice print
- ▶ Photographic image
- ▶ Any other characteristic that could uniquely identify the individual (such as tattoos, disabilities, etc.)

Privacy & Security

- ▶ Never share PHI without patient consent
- ▶ All patients are required to sign a Notice of Privacy Practices
- ▶ Sharing of patient information on social media could jeopardize your status of employment with Donalsonville Hospital

**HIPAA Privacy Officer
Tiffany Doyle
229-524-5217 ext 413**

Call the Privacy Officer with questions about privacy of oral, paper, or electronic patient information and to report breaches.

**HIPAA Security Officer
Lucy Brock
229-524-5217 ext 317**

Call the Security Officer with questions about security of electronic patient information and protections of our computer systems.

Patient's Rights

Patient's Rights

All patients must be informed of their rights

TREATMENT

Patients have the right to:

- ▶ Care that is considerate and respectful of their personal values and beliefs
- ▶ Be treated without discrimination
- ▶ Refuse treatment, except as otherwise provided by law

ACCESS TO INFORMATION

Patients have the right to:

- ▶ Be given information concerning diagnosis, planned course of treatment, alternatives, risks, and prognosis
- ▶ Review their medical files
- ▶ A prompt and reasonable response to questions and requests
- ▶ Know what support services are available, including whether an interpreter is available
- ▶ Know what rules and regulations apply to their conduct
- ▶ Receive a copy of a reasonable, clear itemized bill

INFORMED CONSENT

Patients have the right to:

- ▶ Know their treatment options
- ▶ Know the risks and benefits of each option and possible outcomes
- ▶ Know possible side effects of medication and other treatments
- ▶ Know who is providing medical services and who is responsible for their care

CONFIDENTIALITY

Patients have the right to expect that all communications and records pertaining to his or her care will be treated as confidential by the hospital, as mandated under the Health Information Portability and Accountability Act (HIPAA) of 1999.

ADVANCE MEDICAL DIRECTIVES

Patients have the right to have an Advance Directive (such as a living will, healthcare proxy, or durable power of attorney for healthcare) concerning treatment or designation of a surrogate decision-maker. The patient's chart must show whether or not the patient has an advance directive.

INVOLVEMENT IN CARE DECISIONS

Patients have the right to be involved in their care decisions and the right to express grievances regarding any violation of their rights, as stated in Georgia Law.

PRIVACY

Patients have the right to every consideration of their privacy concerning their own medical care program; examinations, tests, etc. should be given in ways that respect the patient's dignity.

ACCESS TO PROTECTIVE SERVICES

Patient have the right to protective services. If abuse of a patient is suspected, we are legally obligated to report that suspicion to the appropriate authorities.

Seminole Manor Care Community

Residents' Rights

The rights given to patients in the hospital also apply to Care Community residents. However, they also have additional rights not already discussed. The Resident's Bill of Rights was designed to preserve the dignity and personal integrity of Care Community residents. They have the right to live within the least restrictive environment possible to retain their individuality and personal freedom. These specific rights include:

- Access and visitation rights
- Equal access to quality care
- Freedom of Choice
- Freedom from restraints
- Accommodation of needs
- Participation in resident & family groups
- Grievance accessibility & filing
- Examination of survey results
- Special rights for incompetent residents
- Special rights regarding psychopharmacologic drugs
- Participation in social, religious, & community activities
- Protection of resident funds
- Special rights regarding admission policies
- Oral and written explanation of their rights

The facility must provide services and activities to aid the resident in reaching or keeping their highest practicable physical and emotional well-being and in an environment that will promote maintenance and enhancement of quality of life.

Behavioral Health

Behavioral Health Units

Admission Criteria

1. Suicide attempts or thoughts
2. Self-mutilation behavior within 72 hours of admission
3. Homicidal ideation, threat to others within 72 hours of admission
4. Assaultive behavior threatening other within 72 hours prior to admission
5. Command hallucinations directive harm to self or others where there is a risk of patient taking action
6. Psychiatric symptoms (e.g. hallucinations, delusions, panic reaction, anxiety, agitation, depression)
7. For patients with a dementing disorder for evaluation or treatment of a psychiatric co-morbidity (e.g. risk of suicide, violence, severe depression)
8. A mental disorder that causes an inability to maintain adequate nutrition or self-care, and family/community support cannot provide reliable, essential care, so the patient cannot function at a less intensive level of care during the evaluation and treatment.
9. Failure of outpatient psychiatric treatment so that the individual requires 24 hours professional observation and care

Behavioral Health Units

Common Adolescent Behavioral Health Issues:

- ▶ Depression
- ▶ Anxiety
- ▶ Obsessive compulsive disorder
- ▶ Post traumatic stress
- ▶ Self-injurious behavior
- ▶ Oppositional defiance
- ▶ Mood disorders
- ▶ Psychosis
- ▶ Suicidal thoughts/tendencies
- ▶ Behavioral problems

Mental Health Depression Signs & Symptom:

- ▶ Persistently sad, despairing mood lasting for more than two weeks, and affects you at work, school, or in your relationships
- ▶ Changes in appetite & weight
- ▶ Sleep problems
- ▶ Loss of interest in work, hobbies, people, or sex
- ▶ Withdrawal from family members & friends
- ▶ Feeling useless, hopeless, excessively guilty, or with low self-esteem
- ▶ Feeling agitated, pessimistic, & tired
- ▶ Trouble concentrating, remembering, and making decisions
- ▶ Crying easily, or feeling like crying but not being able to
- ▶ Thoughts of suicide (which should always be taken seriously)

Workplace Safety

and Employee Requirements

Infection Control

Standard Precautions

Standard precautions are work practices that help prevent the spread of infection.

- ▶ All blood and blood products
- ▶ All body fluids, secretions, and excretions (except sweat) regardless of whether or not they contain visible blood
- ▶ Non-intact skin
- ▶ Mucous membranes

Note: HAND WASHING is the single most effective way to prevent the spread of infection.

Transmission-Based Precautions

These are special precautions, which should be used for persons in your care who are infected or suspected of being infected with a disease that requires **ADDITIONAL** precautions beyond the Standard Precautions.

There are three categories of Transmission-Based Precautions:

- Airborne Precautions
- Droplet Precautions
- Contact Precautions

The category that is used depends upon the recognized pathogen that is being isolated.

Two important points to remember:

1. Transmission-Based Precautions are always used **IN ADDITION** to Standard Precautions.
2. The infection is being isolated, not the person with the infection.

Annual Employee Requirements

- ▶ Physicals are due **every year** during the month of your birthday, along with a TB risk assessment form.
- ▶ These are mandatory and must be completed within a certain time-frame.
- ▶ You will need to report to the Infection Preventionist for the Annual Physical form.
- ▶ After the physician completes the examination, return the completed Annual Physical form to the Infection Preventionist.
- ▶ The requirements are not considered fulfilled until he/she has your completed form on file.
- ▶ Donalsonville Hospital provides the flu vaccine and Hepatitis B vaccine free to all employees.

Biohazardous Waste

Personal Protective Equipment (PPE) should always be used when handling Regulated Medical Waste. This includes GLOVES, GOGGLES, and an ISOLATION GOWN to cover your clothes.

Segregate & minimize non-contaminated items. Paper towels, gloves, and packaging materials should be disposed as regular trash.

RED BAGS must alert the person to what is enclosed, i.e. “Danger”, “Infectious”, “Waste”.

Any red bag that has fluids in it should also contain an absorbent and/or solidifier before it is removed from the can, twisted, and tied.

All red bags, when inserted into a trash can, should be pulled over all four sides, overlapping the can. This is to keep it from being overfilled.

Pull up all four sides of the red bag, twist the top of the bag, and zip tie.

Do NOT overfill the red bag. Any bags found overfilled will be reported to the department head and/or supervisor.

ONLY sharps should be put into a sharps container.

Never overfill the sharps container past the fill line.



Biohazardous Waste

Items to put into a red bag

- Blood-saturated items
- Bags and IV tubing containing blood products only
- Suction canisters
- Hemovacs
- Chest drainage units



Collection of Infectious Waste

Infectious medical wastes must be collected at the point of production/generation in the appropriate color coded bags. Ours are RED.

Biohazard bags must be labeled with the international biohazard symbol and appropriate wording: “biohazard”, “biomedical waste”, “infectious medical waste”, or “regulated medical waste”



Disaster Preparedness

Planning for bioterrorism and other emergencies



- ▶ Learning about what types of disasters may occur can help you prepare for the worst.
- ▶ **Intentional Disasters:** these include terrorist attacks, acts of war and other threats to the nations security. They may involve weapons of mass destruction such as chemical, biological, radioactive, or nuclear agents. They may also involve conventional explosives.
- ▶ **Biological weapons** are the release of bacteria, viruses, or biological toxins into the atmosphere. This weapon could cause widespread illness or casualties. The diseases caused by biological weapons include anthrax, smallpox, Ebola, and botulism.
- ▶ **Chemical Weapons** include toxic gases, liquids, or solids that have been released causing mass casualties and contaminating an area. Some examples include sarin, cyanide, mustard gas, and phosgene.
- ▶ **Nuclear Weapons:** a hostile nation could activate missiles that would result in a nuclear explosion. It is also possible that terrorists could obtain or manufacture nuclear weapons.
- ▶ **Radiation:** Terrorists could obtain radioactive material and release it into the environment—most likely by combining it with a conventional bomb.
- ▶ **Explosives:** Many experts believe conventional bombs will remain the most likely weapons of terrorist attacks. Explosives can be detonated from a distance or by a suicide bomber.

Disaster Preparedness

Planning for bioterrorism and other emergencies

- ▶ **Natural Disaster:** These disasters are the most common emergencies health-care workers may have to respond to. Health-care workers need to:
 - ▶ **Be alert for natural disaster.** National and local weather services and other notification services can often alert communities to a possible natural disaster before it happens. But, some natural disasters may occur without notice. Examples include: floods, hurricanes, tornadoes, wildfires etc.
 - ▶ **Think ahead of time about what might happen:** Natural disasters may result in physical injuries or casualties, power outages and communication system failures, transportation system failures, damage to buildings, water shortages and contamination, and outbreaks of disease.
- ▶ **Know what to do during a natural disaster:** Some health-care staff will need to care for incoming patient, but others may also need to:
 - ▶ Arrange for the delivery of emergency water, food, and other supplies
 - ▶ Make sure staff are available to report to work
 - ▶ Ensure any power or communication backup systems are working
 - ▶ Secure the building, as necessary
 - ▶ Evacuate the facility, if advised to do so.
- ▶ Donalsonville Hospital has a written action plan for dealing with a bioterrorism event or other emergency.
- ▶ In a disaster, all employees have responsibilities.

Disaster Preparedness

Planning for bioterrorism and other emergencies

The emergency response plan tells what to do in case of:

- ▶ fire, explosions
- ▶ natural disasters (floods, tornadoes, hurricanes, snowstorms, earthquakes, etc.)
- ▶ release of hazardous substances into the air, ground or water
- ▶ transportation incidents, such as a train or bus crash
- ▶ power losses, food/fuel shortages

Disasters may be external (outside the facility) or internal (inside the facility).

READ & REVIEW PLANS CAREFULLY

Each department has access on one computer to the Intranet Portal where these plans and procedures are available for you to review.

TAKE PART IN ALL TRAININGS & DRILLS

There is no substitute for being prepared for any emergency.

The purpose of an emergency management plan is to:

- ▶ To respond quickly and effectively
- ▶ To provide aid to victims
- ▶ To minimize loss of life
- ▶ To care for existing patient load

ALWAYS BE PREPARED

In a disaster, you may need to report to work on very short notice. Be sure you learn alarm signals, evacuation routes, and emergency procedures. Keep your ID badge with you - don't leave it at work.

KNOW YOUR ROLE IN THE PLAN

This includes where you report, who you report to, what your duties are, and the locations of emergency equipment and supplies.

Prepare for Emergencies

Know the Code

Code Green

Man-power needed. Response is REQUIRED by all clinical personnel.

Code Yellow

Decontamination needed

Code Red

An actual fire or potential fire, explosive, electrical problem, or anything burning

Code Gray

Behavioral Health Unit Emergency Alert (Trained BHU professionals only)

Code Blue

Resuscitation for cardiac-arrest

Code Bolt

Patient or resident elopement

Code D - General Disaster (3 or more major trauma admissions to the ED at one time)

Code W - Severe Weather (tornado warning, hurricanes, severe thunderstorm, etc.)

Code B-52 - Bomb Threat

Code EVE - Extreme Violent Event (“Run-Hide-Fight” for an active shooter)

Code ADAM - Infant/Child Abduction

How is an Emergency code called?

- The code should be called in a two-part statement, to include:
 - Specific code description
 - Location of the emergency

Example: “Code RED, Code RED, Code RED, Dietary (location)”

After the code red is called, 911 as well as the local fire department should be called.

Recognizing Signs

An “Active Shooter” may be a current or former employee.

Alert your Supervisor or Human Resources Department if you believe an employee exhibits potentially violent behavior.

Indicators of potentially violent behavior:

- ▶ Increased use of alcohol and/or illegal drugs
- ▶ Unexplained increase in absences and/or vague physical complaints
- ▶ Depression/withdrawal
- ▶ Increased severe mood swings
- ▶ Increasingly talks of problems at home
- ▶ Increase in unsolicited comments about violence, firearms, and other dangerous weapons and violent crimes
- ▶ Threats to harm others

How to Respond in an Active Shooter Event

When the “Active Shooter” is in your vicinity:

Quickly determine the most reasonable way to protect your own life. Patients and visitors are likely to follow the lead of employees and staff during an “Active Shooter” situation.

1. **Run**
 - ▶ Have an escape route and plan in mind
2. **Hide**
 - ▶ Hide in an area out of the active shooter’s view
 - ▶ Block/lock entry to your hiding place
3. **Fight**
 - ▶ As a last resort and only when your life is in imminent danger
 - ▶ Attempt to incapacitate the shooter
 - ▶ Act with physical aggression and throw items at the shooter

Information you should provide law enforcement or 911 operator:

- ▶ Location of the victims and the shooter
- ▶ Number of shooters
- ▶ Physical description of shooter(s)
- ▶ Number and type of weapons held by the shooter(s)
- ▶ Number of potential victims at the location

When Law Enforcement arrives on the scene:

How you should react when law enforcement arrives:

- ▶ Remain calm, and follow officer’s instructions
- ▶ Immediately raise hands and spread fingers
- ▶ Keep hands visible at all times
- ▶ Avoid making quick movements toward officers, such as attempting to hold on to them for safety
- ▶ Avoid pointing, screaming, and/or yelling
- ▶ Do not stop to ask officers for help or directions when evacuating, just proceed in the direction from which officers are entering the premises
- ▶ ALWAYS remain on the phone with the operator until the code has been cleared.

Safety Data Sheet (SDS)

To provide standardized, detailed information on each hazardous chemical in our facility

The SDS is a standardized, 16-section, detailed bulletin prepared by the manufacturer or importer of a chemical that describes the chemical. Donalsonville Hospital has an SDS for every chemical and hazardous product in this facility. Every chemical is considered to be a hazardous material. The SDS provides additional information that is not easily placed on the product label.

- ▶ It is the responsibility of each employee to ask questions when they are unsure about a chemical or other hazardous material. The SDS is designed to answer questions about chemicals or other hazardous materials.
- ▶ Each employee should also know how to access the SDS manual. A copy will be maintained in each department with (3) master copies provided to the Director of Nurses, the ER department, and the office of the Safety Director.
- ▶ Remember that all chemicals and hazardous materials must have an SDS sheet if they are used in any of our facilities. This means everything from cleaning agents used in housekeeping to chemical reagents used in the lab.

Requirements for Chemical Labels

Safety Data Sheets (SDS)

1. PRODUCT IDENTIFIER

Product Name
Heavy Duty Delimer

2. SIGNAL WORD

Danger
Warning

3. SUPPLIER IDENTIFICATION

Dade Paper Company
9601 NW 112th Avenue
Miami, Florida 33178

4. HAZARD STATEMENTS

Toxic if inhaled
Causes severe skin burns and eye damage

5. PRECAUTIONARY STATEMENTS

Use only outdoors or in a well-ventilated area.
Do not breathe dust/fumes/gas/mist/vapors.
Wash face, hands, and any exposed skin thoroughly after handling.

6. PICTOGRAMS



7. SUPPLEMENTAL INFORMATION

IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing. Immediately call a poison center or doctor/physician.

IF ON SKIN (or hair): Remove/take off immediately all contaminated clothing. Rinse skin with water/shower. Wash contaminated clothing before reuse.

IF SWALLOWED: Rinse mouth. DO NOT induce vomiting.

Note: In the Global Harmonization Systems, the TWO signal words used to alert of a potential hazard & its severity are **DANGER** and **WARNING**.

Workers' Compensation Process for Employees

When an injury occurs while on the time clock as an employee:

- ▶ The very first thing to do is to notify your immediate supervisor/Department Head.
- ▶ The supervisor/Department Head should fill out all required paperwork with assistance of employee & any witnesses.
- ▶ The employee should take a copy of the Variance Report with them and go to the Emergency Room to seek medical care if deemed necessary.
- ▶ Whether the employee chooses medical treatment or not they must perform a mandatory drug screen for the Worker's Compensation Insurance.
- ▶ The employee should keep a copy of all related paperwork of the incident.
- ▶ A copy of all related Worker's Compensation paperwork needs to go to Human Resources on the day of the occurrence, within 24 hours.
- ▶ And lastly, a copy of the internal Variance Report needs to go to the Patient Liaison.

Good Body Mechanics Help Prevent Injury

- ▶ Set your feet solidly. One foot can be slightly ahead of the other for increased effectiveness.
- ▶ Feet should be far enough apart to give good balance and stability (approximately shoulder-width apart).
- ▶ Get as close to the load as possible. Bend legs about 90 degrees at the knees. Crouch, do not squat.
- ▶ Keep your back as straight as possible. Bend at the hips, not the middle of the back.
- ▶ Lift with your leg and thigh muscles, not with your back.
- ▶ Maintain a firm grip of the object during lifting and carrying
- ▶ Remember the basic principles of body mechanics:
 - ▶ Find a stable base of support
 - ▶ Tighten your abdominal muscles to provide back support
 - ▶ Keep your back straight (in correct alignment)
 - ▶ Hold the load close to your body
 - ▶ Bend at the knees and use your legs to power the move
- ▶ Consider the size, weight, and shape of the object to be carried. Do not lift more than can be handled comfortably. Try to push or slide the object with your foot or hand first to determine its weight. If necessary, get help. If the object that you are trying to lift is too heavy, you should ask for help from another employee.
- ▶ Never carry a load that you cannot see over or around. Make sure the path of travel is clear and carry the load close to your body.
- ▶ Never turn at the waist to change direction or to put an object down. When twisting, it is the awkward move, not the weight of the object, which can cause a back injury.
- ▶ Reaching, stretching, sitting with correct posture, and lifting light objects from the floor using good body alignment are all good working guidelines.

HIPAA & Social Media

Medical Gases at Donalsonville Hospital

▶ You are required to participate in this training under:

- The NFPA (National Fire Protection Agency) 99, 2012 addition Healthcare Facilities Code

“All personnel involved who handle medical gases and cylinders that contain medical gases shall be trained on the risk associated with their handling and use”.

- ▶ Any gaseous substance that meets medical purity standards and has application in a medical environment, e.g. oxygen, nitrous oxide and air.

▶ Medical gases present at Donalsonville Hospital:
Oxygen (O₂)

- ▶ Medical Air
- ▶ Helium
- ▶ Nitrous Oxide (N₂O)
- ▶ Carbon Dioxide (CO₂)

▶ Hazards associated with medical gases:

- ▶ Fire and explosion from release near ignition sources.
- ▶ Spontaneous combustion from oxidizing gases.
- ▶ Incorrect storage.
- ▶ Temperature extremes.
- ▶ Leaks/Faulty equipment/connections.

HIPAA & Social Media:

What you need to know about social media conduct in health care

What is HIPAA?

HIPAA is an acronym that stands for the Health Insurance Portability and Accountability Act, a US law designed to provide privacy standards to protect medical records and other health information provided to health plans, doctors, hospitals, and other health care providers.

What is Social Media?

Social Media are forms of electronic communication through which people can create online communities to share information, ideas, personal messages, etc. Examples: Facebook, X, Snapchat, Instagram, YouTube, TikTok, etc.

What is a HIPAA violation on Social Media?

Disclosures made on social media concerning a patient's PHI without that patient's authorization is considered a HIPAA violation.

HIPAA & Social Media

- ▶ HIPAA lists 18 personal identifiers - including photos, neighborhoods, birth dates, and vehicle identifiers. All of these must stay private. In small communities especially, people can quickly determine who is in the hospital and for what reason with just a few details. Innocent comments about a patient can lead to identification.
- ▶ Even if a patient posts every last detail about his or her medical issues and treatments, no medical professional or staff should repost, retweet, or share this information on their personal pages.
- ▶ Do not make negative remarks about employer or co-workers
- ▶ There is an ethical and legal obligation to maintain privacy and confidentiality.
- ▶ Don't use social media to communicate with patients about their medical conditions or treatments. HIPAA has very stringent guidelines in place and communicating with patients in this way can violate those guidelines
- ▶ Do not refer to patient in disparaging manner, even if not identified.
- ▶ Do not take photos or videos.
- ▶ Maintain professional boundaries in use of social media.
- ▶ Commenting on a patient's page about illness or treatment goes farther than the patient; it goes to all of his or her friends as well.
- ▶ Do not identify patient by name on a post or publish info that may lead to identification. Names do not have to be included to be a violation.
- ▶ It is prohibited to transmit by way of any unsecured electronic media any patient related image or information.
- ▶ Do not post content or otherwise speak on behalf of employer unless authorized.
- ▶ Consult employer policies. Be aware and comply with employer policies regarding employer owned computers.

Social media is a hub for HIPAA violations so limit photography and sharing on social media networks to avoid the disclosure of protected health information.

HIPAA & Social Media

Here are a few more tips to avoid disclosing PHI when using Social Media

NEVER POST ABOUT PATIENTS

It is difficult to keep patients anonymous. Even the smallest identifier could land you in a lot of trouble.

DON'T TRUST MESSAGING SERVICES

Privacy of messages relies on the recipient keeping information to themselves or remembering to log off of public or office computers. It is best to avoid private messaging altogether.

DON'T MIX WORK & PERSONAL LIFE

Healthcare professionals should keep their personal and private lives separate. Interacting with a patient online could result in accidental exchange of PHI in public. It is Donalsonville Hospital's policy to refrain from the use of social media while on duty.

WHEN IN DOUBT, DON'T POST

Mistakes can be made in the heat of the moment. Take your time to read your post and consider the potential consequences before posting.

Violations of phone and social media restrictions may result in disciplinary action - particularly if it results in a privacy violation or is deemed to have interfered with your job performance.

The background features abstract, overlapping geometric shapes in various shades of green, ranging from light lime to dark forest green. These shapes are primarily located on the left and right sides of the page, framing a central white area. The shapes are composed of triangles and polygons, creating a modern, layered effect.

Therapy

Physical, Occupational, and Speech

Rehabilitation Therapy

Occupational Therapy, Physical Therapy, & Speech Therapy

Work Setting

- Schools
- Inpatient Hospital
- Outpatient Facilities
- Long term Facilities
- Home Health

Areas of Practice

- Pediatric
- Geriatric
- General Care

Advantages

- The opportunity to help patients return to a fulfilling life.
- Working in a variety of areas
- Flexible work schedule

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Utilization Review and Quality Improvement

Utilization Review

Donalsonville Hospital, Inc. is pleased to announce that they are in full compliance with guidelines from CMS regarding a patient's post-discharge vendor selection. Patients are encouraged to choose the company that they would like to provide their post-discharge services. Federal regulations require that all healthcare facilities give patients a list of those vendors, which can include:

- ▶ Home Health
- ▶ Hospice
- ▶ Durable medical equipment
- ▶ Home oxygen therapy
- ▶ Long-term care
- ▶ Personal care home
- ▶ Inpatient rehabilitation

What is TARR?

TARR stands for a Team Approach to Reduce Readmissions.

Donalsonville Hospital established this committee in 2016. It is comprised of a physician advocate, case management member, patient liaison, administration representative, and a primary care nurse.

Representatives from our local community, including pharmacists and Home Health/Hospice nurses are also a part of this committee.

The goal of the TARR Committee is to ensure that our patients are provided with any needed education, information, or referral assistance at the time of discharge in order to reduce the need for an untimely readmission to our facility.

The MOON (Medicare Outpatient/ Observation Notice) is presented to all Medicare beneficiaries that are admitted to an observation bed at Donalsonville Hospital. This notice is a requirement of CMS and provides the patient with pertinent information regarding services that may or may not be covered by Medicare during their observation stay. This form also applies to patients that are covered by a Medicare replacement policy. Registration staff members are responsible for sharing this notice with the patients. Utilization review, billing, insurance, and coding staff members are readily available to answer any questions from our patients.

Quality Improvement

“No matter how well we do it now, it can always be done better”

The hospital’s Quality Improvement (QI) Plan uses the methodology known as:

FOCUS-PDCA

STEP 1

F - Find the problem

O - Organize a team

C - Compile your data

U - Understand the problem

S - Plan a solution

STEP 2

P - Plan the process to improve

D - Do what you have planned

C - Check to see if it is working

A - Act on the result

Quality Improvement is a work philosophy that encourages every member of our organization to find new and better ways of doing things. It promotes closer cooperation between departments and it helps to provide better care to our patients.

Opportunity for Improvement forms:

Every employee is important to this process. All employees have input into the quality improvement program by way of “Opportunity for Improvement” forms. These forms are available to all employees to offer their practical suggestions for making various improvements in any department, not just their own.

The best ideas come from the people who do the work!

Corporate Compliance Plan & Hotlines

- ▶ If you have a concern about fraudulent billing or mishandling of Corporate funds, you can report this to the Corporate Compliance Hotline at the hospital extension **409** or the Care Community extension **488** and remain anonymous (not have to give your name).
- ▶ If you feel that the issue you reported has not been resolved, you may report it to your Department Supervisor, the Hospital Administrator, or the Corporate Compliance Officer, Melonie Godby, at extension **236**.
- ▶ Employees are expected to perform their job duties in an ethical and professional manner.
- ▶ DHI will not request or require that any employee perform actions which could be construed as illegal, unethical, or fraudulent.
- ▶ DHI will not tolerate such actions from its employees and will take disciplinary action according to the guidelines of the Disciplinary Procedure Policy.
- ▶ Employees who report such concerns will be protected from disclosure or identity to the extent possible. Retaliation for reporting potential problems will not be tolerated.
- ▶ Each claim or complaint will be investigated according to the Donalsonville Hospital policy.

Regulatory Agencies

and Surveying Bodies

Organizations

- ▶ DNV - DNV Healthcare, Inc.
 - ▶ Offers accreditation to our hospital
 - ▶ Established principles and requirements for accreditation
 - ▶ Completes on-site surveys annually for facility compliance
- ▶ CMS - Centers for Medicare & Medicaid Services
 - ▶ Affects almost every aspect of healthcare delivery
 - ▶ Oversight of Medicare & Medicaid Insurance Services (including quality measures and standards)
- ▶ HHS - Dept of Health and Human Services
 - ▶ Federal department is the chief overseer of healthcare-related legislative and regulatory matters
 - ▶ Oversees Medicare, as well as other programs through its divisions, to ensure services are beneficial and safe
- ▶ CDC - Centers for Disease Control
 - ▶ Conducts and supports health promotion, prevention and preparedness with the goal of improving overall public health
 - ▶ Designated as the leader for goals to increase the number of healthcare settings that provide safe, effective, and satisfying patient care

Organizations

- ▶ **OIG - Office of Inspector General**
 - ▶ Protects the integrity of HHS programs
 - ▶ Publishes compliance guidance for facilities
 - ▶ Responsible for investigating issues or evidence of fraud or mismanagement of Medicare, Medicaid, or other HHS areas
- ▶ **OCR - Office of Civil Rights**
 - ▶ Enforces laws against discrimination based on race, color, national origin, disability, age, sex, and religion by certain health care and human services
 - ▶ Ensures equal access to certain health and human services and protects privacy and security of health information
- ▶ **OSHA - Occupational Safety and Health Act**
 - ▶ Establishes standards for safe work environments and identification of risks and hazards
 - ▶ Allows employees to raise safety/health concerns or report a work-related injury without retaliation

Dress Code

Donalsonville Hospital employees

Dress Code

►Donalsonville Hospital has established an image of professionalism and wishes its employees to reinforce this image and ensure a safe and healthy work environment. All employees of Donalsonville Hospital have a direct impact on the image of our facility; therefore it is imperative that employees adhere to the designated dress code for their respective department.

Identification Badges: All employees must wear their identification badge at all times while on duty within the hospital premises. The badge must be clearly visible with the employee's name, position and photo.

General Attire: All clothing must be clean, neat, and appropriate for professional work. Clothing should conform to the standards of the facility. Clothing should never be tight-fitting or revealing in any way. Appropriate undergarments must be worn and NOT be visible through the outer clothing.

Jewelry/Body Piercing: Jewelry and other accessories should be professional and appropriate for a healthcare environment. Jewelry should be minimal to support infection control standards as well as prevent any interference with the employee's work; for example multiple rings encourage the growth of bacterial organisms. The only acceptable body piercing are earrings with a maximum of two holes per ear extending no more than 1 inch from the ear lobe. Any visible body piercings should be flat/flush studs or apply a clear or skin toned piercing retainer. Please make every effort to cover any exposed tattoos while working.

Shoes: Direct Patient Care Employees and Dietary Employees need to wear closed-toe shoes at all times while on duty. The shoes need to maintain a clean appearance at all times. No open toe shoes or shoes with holes (i.e. Crocs, rubber shoes with large perforations on their tops and sides.) are permitted in the following area: Operating room, Emergency Department, Medical/Surgical, Laboratory, or other patient care areas due to increased exposures to bodily fluids, per OSHA guidelines.

Hair: Hair styles should conform to the standards accepted in a professional environment. Hair that is shoulder length should be secured or pulled back so as not to interfere with patient care or become a safety hazard. Hair color should fall within the normal range of hair colors. Hair needs to be neat, clean and appropriate for professional work.

Cologne/Perfume: Employees should always use good hygiene while on duty. They should apply perfume or cologne lightly to ensure co-workers and patients who have fragrance sensitivity are not affected.

Fingernails: Employees involved in patient care should limit their fingernail length to one quarter inch beyond the tip of the finger to support infection control standards. Employees providing direct patient care must be free of decorations or adornment on the nails. Polish is discouraged, but if used should be appropriate in color. Acrylic and/or artificial nails are unacceptable for personnel providing direct patient care or handling blood or laboratory specimens.

Uniforms: It is the employee's responsibility to provide and maintain uniforms. They should be clean and wrinkle-free.

Dress Code continued

INAPPROPRIATE DRESS:

The following are considered inappropriate dress for employees while on duty at Donalsonville Hospital. This list is not all-inclusive but is meant to be a guideline for employees and management.

1. **All Denim** clothing (includes skirts, dresses, or jeans of any color)
2. Any clothing that is tight-fitting or revealing in any way. This includes tight-fitting slacks, trousers or pants; dresses or tops with low-cut front or back; miniskirts or extremely short skirts; clothing that is visible without undergarments (example, a shirt or blouse on a female who is not wearing a bra or see-through pants on a male or female); and spandex pants.
3. Shorts of any kind
4. Sun dresses
5. T-shirts, unless approved on company-designated casual days or worn under a scrub top.
6. Any sandals, including open toe, flip-flops or shoes with stiletto heels, etc.



Occupational Exposure Control

Follow these general Standard Precautions guidelines:

- ▶ User Personal Protection Equipment (PPE) and wash hands as required. Always wear gloves if contact with blood or other body substances is possible.
- ▶ The term “bloody body fluids” will include the following: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, amniotic fluid, peritoneal fluid, saliva, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is impossible or difficult to differentiate between body fluids.
- ▶ If an exposure should occur follow these steps:
 1. Notify your supervisor or charge nurse of the incident.
 2. Go to the Emergency Department as soon as possible for follow-up treatment.
 3. The exposure site should be cleaned (except for the eyes) with soap and water for 5 minutes.
 4. Once in the ED, the Occupational Exposure Management policy/procedure will be followed by hospital staff.
- ▶ Remove gloves properly and make sure that the glove’s outer surface never touches your skin.
- ▶ Clean up spills promptly and properly
 1. Apply gloves
 2. Spray the area with a disinfectant cleaner
 3. Wipe up the spill with paper towels (not washcloths)
 4. Dispose of the paper towels in a **red** bag