Self-Study Orientation Guide

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Information Handbook

Putting Patients First
Treating Everyone With Dignity and Respect
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**Our Mission**

- To enhance the health and well being of the communities we serve.

**Our Core Values**

- Putting Patients First
- Treating Everyone with Dignity and Respect

**Professional Performance Standards**

**Compassionate Care and Communication** – Exceed expectations and anticipate the needs of patients while enhancing the quality of care and the quality of the work environment.

**Teamwork** – Unselfishly work with others toward common goals and visions.

**Respect** – Consistently treat patients, families and co-workers with patience, consideration and dignity.

**Honesty and Integrity** – Commit to truthful and open conduct in all aspects of work and workplace relationships.
Chapter 1 - PROGRAMS & INITIATIVES

Improving Organizational Performance

Performance Improvement at Carson Tahoe Health and its Affiliates (CTH) is about **Putting Patients First**. We strive for excellence in all we do, patient safety, quality care and comfort for our patients and their families. The organization is committed to continually improving the performance of our health care delivery and financial systems. In the dynamic world of health care, change is the only constant and achieving quality care is a never ending cycle of continuous improvement and the ongoing effort by all of those involved to identify opportunities for improvement.

The Plan for Improving Organizational Performance lays the groundwork and provides the framework for identifying opportunities for improvement; prioritizing improvement activities; implementing and maintaining a comprehensive ongoing and integrated system for well designed process and process improvement; and communicating those activities. The Plan outlines responsibilities for Performance Improvement activities.

Opportunities for improvement can be identified in many ways, for example:
- Patient surveys
- Physician or employee surveys
- Quality Review Tracking Forms
- Brainstorming, when you think “there must be a better or easier way.”

CTH utilizes various methods to evaluate systems and process. The **Failure Mode Effects Analysis (FMEA)** is a proactive approach to identify steps in a process and potential failures. Then action plans for improvement can be developed.

The **Root Cause Analysis (RCA)** is a retroactive approach to unexpected events and outcomes to determine underlying causes of the event and to develop an action plan to prevent reoccurrences.

Data collection is the basis for Performance Improvement activities and provides a means to make informed objective decisions. Interpretation transforms data into meaningful information so that outcomes can be monitored over time. Changes are managed; performance is improved; outcomes are achieved and sustained; and the process is documented.

Cultural Diversity

As a patient care provider it is necessary to consider every patient’s culture when giving care. Patients deserve to be treated as individuals and have their values and beliefs considered when receiving care. Awareness of cultural factors can improve patient and family education. You may be asked to review and complete an education module on Cultural Competencies through the Education department.

Patient Abuse and Neglect

It is the goal of CTH to protect patients in our care by preventing, prohibiting and/or identifying cases of suspected or actual abuse or neglect. In compliance with Nevada law, all potential or actual cases of verbal, sexual, physical or mental abuse are reported for investigation. Reporting is mandatory for patients <18 or >60 years of age. Should patient behavior or statements lead you to believe that abuse may exist you must report this information at once to your instructor or preceptor.

Patient Rights and Responsibilities

Patients are informed upon admission of the Patient’s Bill of Rights and Responsibilities. Below is an outline of the Patient’s Bill of Rights. A complete copy of this document is available from Admissions or our Patient Advocate Ombudsman, Kitty Chamberlain (775) 445-8008 (ext 8008).

As a patient, you have rights regardless of age, race, color, ancestry, language, creed, religion, gender, sexual orientation, marital status, citizenship, veteran status, physical or mental disability, cultural, economic, educational background or the source of payment.
I. As a patient you have the right to:

a. Receive considerate and respectful care...
b. Actively participate in your healthcare...
c. Receive information regarding continuing health care after leaving the hospital…
d. Receive information regarding rules and policies that apply to your conduct while a patient…
e. Refuse treatment or leaving the hospital against the advice of physicians, to the extent permitted by law…
f. Refuse to participate in research projects, clinical trials or experimentation…
g. Freedom from restraints and seclusion of any form used as a means of coercion, discipline, convenience or retaliation by staff…
h. Assessment and appropriate management of pain…
i. You have the right to resolution of issues or complaints
j. File a grievance/complaint about care, service or discrimination…
k. File a complaint with the Bureau of Licensure & Certification…

II. As a patient you have the responsibility to:

a. Ask questions, make informed decisions and fully understand, the documents you may be asked to sign…
b. You do not have to receive treatment and service that are considered medically unnecessary or inappropriate…
c. Provide accurate and complete information including medical history…
d. Show respect and consideration for other patients…
e. Respect the property of others and of the hospital.
f. Follow the treatment plan, tell your doctor if you believe you cannot follow the treatment plan…
g. Recognize the effect of lifestyle on your personal health…
h. Find out about and accept the consequences of refusing treatment…
i. Follow rules and regulations…
j. Meet financial commitments…

All patients’ rights and responsibilities apply to the person who may have legal responsibility to make decisions regarding medical care on your behalf.

Advance Directives

An Advance Directive is a document that identifies the patient’s wishes for health care in the event that the patient becomes unable to make those decisions. The Advance Directive must be in the medical record. All patients are asked on admission if an Advance Directive is on file and are given the opportunity to complete one if they wish. If you have questions about Advance Directives, contact the patient’s caregiver or the Ombudsman ext. 8008

Compliance Program

CTH has adopted a Compliance Program to demonstrate our commitment to ethical and legal business practices; compliance with laws, regulations and accreditation standards; and ensuring service of the highest level of integrity and concern.

All reported issues will be investigated promptly and appropriate corrective action taken. CTH prohibits retribution, retaliation, or harassment for making a good faith effort to report such issues.

Should you have questions regarding compliance, please contact your instructor or preceptor.

Code of Conduct

The Code of Conduct is an important component of the CTH Compliance Program. It provides guidance in carrying out our duties within appropriate ethical and legal standards. These obligations apply to our relationships with patients, providers, payers, regulators, vendors, contractors, business partners and one another.
The policies set forth in the Code of Conduct are mandatory and are included in the Hospital Policies and Procedures found on the intranet. Copies of the Code are also available in the Compliance and Auditing department.

Confidentiality/HIPAA

HIPAA – Health Insurance Portability and Accountability Act of 1996

As an employee, clinical student or contract service of CTH, any private information that you see, hear or say, is considered confidential and must be kept confidential and can only be used or disclosed for specific purposes related to: a) an individual's treatment; b) payment of services; c) the operations of the health care organization. During clinical rotations you may use or access that amount of patient information that is minimally necessary to complete a task, responsibility or function for only those patients to whom you are assigned. You are responsible to use and access only information on patients for whom you are providing supervised care.

This includes postings on the various Social Media sites.

Any questions or concerns, please contact your instructor or preceptor.

HCAHPS (Hospital Consumer Assessment of Health Plans Survey)

Hospital participation in the HCAHPS survey is required to maintain Medicare reimbursement, and the amount of Medicare reimbursement received by a hospital is linked with HCAHPS scores under a pay-for-performance plan.

As a student participant you too play a part in the HCAHP Survey score our hospital receives. If on a clinical rotation, your very presence in our hospital makes you a part of the impression patient's get of our facility. You should always be respectful of the environment in which you are being allowed to participate. Always be polite, keep your voice level to a soft, professional level and make certain your appearance is appropriate and always remain within your student Scope of Practice Guidelines. Remember, you are always being observed, either by staff or more importantly by patients and their family and visitors.

HCAHPS survey questions focus on the following areas:

- Nursing - including courtesy, respect, listening, explanation, call light responsiveness
- Physicians - including courtesy, respect, listening, explanation
- Environment - including cleanliness and noise
- Pain control and medication information
- Discharge information
- Overall rating and likelihood of recommending

Chapter 2 – KEY POLICIES & HIGHLIGHTS

Parking

General parking Students are asked to utilize Parking Lot 4 unless otherwise advised by your instructor or preceptor.

Identification

All students are required to wear a CTH identification badge while on hospital property which must be accompanied by your school’s identification. CTH badges are issued by the Education Department upon completion of all the mandatory documents and proof of required immunizations.

Telephone & Cell Phone Usage

Employees are expected to be polite and courteous when answering telephone calls. When answering a call, that person must identify themselves and the department. Hospital telephones may be used only for transactions of hospital business. In case of an emergency, personal calls may be made or received. Public telephones are available throughout the hospital for employee’s personal calls.
Cell phones are to be silenced at all times while in the medical center and may be used for outgoing calls only during break times.

**Smoking**

Smoking is not allowed on any CTH campus.

**Harassment**

CTH is committed to providing an environment that is free of discrimination and unlawful harassment. Actions, words, jokes or comments based on an individual’s sex, race, ethnicity, age, religion or any other legally protected characteristic will not be tolerated. Sexual or other unlawful harassment or discrimination (both overt and subtle) is a form of misconduct that is demeaning to another person, undermining the integrity of CTH and is strictly prohibited. If you experience any form of harassment, or behavior that may be construed as harassment, it is your responsibility to report this to your preceptor immediately.

**Personal Hygiene/Dress Code**

Good grooming is essential to the professional image and atmosphere of any hospital. Due to close contact with patients and the public, your personal appearance has a direct relationship to the total character of CTH. Special emphasis on personal hygiene is a vital requirement as well as safe and appropriate dress. (For detailed hospital Dress Code, Refer to CTH Policy MA 2.1020 10-0-1009)

The hospital has a strict dress code policy which includes jewelry, piercings, tank tops, crop tops, blue jeans, shoes, etc. Jewelry needs to be restricted to small, stud type earrings, nothing dangling that can get caught or snagged. No loose bracelets like charm bracelets. No visible piercing jewelry are allowed. No tank tops, crop tops or blue jeans. Shoes should be closed toe (no sandals) and specific departments, like OB and Pediatrics, require shoes to be white. Some departments issue scrubs. Some may require you to wear your own scrubs or may accept office casual type wear. Your instructor or preceptor will inform you of dress requirements for clinical rotations.

**Violence In the Workplace**

CTH is firmly committed to providing an environment free from acts of violence or threats of violence. In keeping with this commitment, we have established a strict policy that prohibits any person from threatening or committing any act of violence in the hospital workplace; while on duty, while participating in a student affiliation, while on company related business, or while operating a company vehicle owned or leased by the hospital. This policy applies to all anyone associated with CTH and includes, but is not limited to verbal abuse, threats to do harm, stalking, causing physical injury to another person, intentionally damaging employer property or the property of another person or possession of a weapon. If you observe any form of violence, or behavior that may be construed as violent, it is your responsibility to report this to your instructor or preceptor immediately.

**Weapons**

Weapons will not be allowed in any CTH facility or office (excepting federal, state, county or city law enforcement personnel). Any type of gun, knife, chemical agent (mace, pepper spray), or other item that is a threat or potential threat to another person must be removed from the facility. If you observe any weapons, or suspected weapons, it is your responsibility to report this to your instructor or preceptor immediately.

**Inmates/Persons in Custody**

Inmates (persons in the custody of city, county, state or federal law enforcement personnel) are at times accepted at CTH for medical treatment. All such inmates will remain under constant, (sometimes armed) guard. No one is to enter an inmate’s room, under any circumstances including medical emergencies, without the attending officer/guard. (Students on clinical rotation are never to enter into an inmate’s room, or attempt to care for inmates, without first consulting with their instructor or preceptor.)
Drug and Alcohol Free Workplace

CTH prohibits the unlawful manufacture, distribution, possession, use or being under the influence of any controlled substance or alcohol in the work place. Students suspected of being under the influence of a controlled substance will be removed from the patient care area immediately. All policy and legal consequences will apply.

Illness/Injuries

If you should incur an injury or become ill during your student clinical rotation it must be reported to your instructor or preceptor immediately. In the event of an onset of illness or injury of a student or instructor during the clinical experience at CTH, emergency care will be provided to the student or instructor at their own expense. CTH shall not be held responsible for any illness/injuries sustained by student or instructor during the clinical experience.

Sage Cafe

The Sage Cafe is located on the first floor, northeast section of the building.

Chapter 3 – ENVIRONMENT OF CARE

Emergencies

CTH has an emergency preparedness program covering most major situations. The following code system is used internally to notify those within the hospital of situations and is here for your awareness.

Code Black - Evacuation
This code is called when a problem has made it necessary to remove patients from the building or from a part of the building. Instructions will be given by Hospital Staff.

Code Blue - Medical Emergency
Instructions will be given by Hospital Staff if you need to clear the area.

Code Gray - Security Assistance
Called when Hospital Staff need assistance from Security Personnel.

Code Pink – Infant/Child Abduction
Instructions will be given by Hospital Staff.

Code Orange - Internal Hazardous Material Release.
Instructions will be given by Hospital Staff.

Code Yellow - Disaster Alert
This code is used to notify hospital staff that a situation outside the hospital has occurred which will effect hospital operations.

Code White - Bomb Threat
Instructions will be given by Hospital Staff.

Code Noelle – Maternal Hemorrhage
Instructions will be given by Hospital Staff.

Code Red - Fire
Called when there is a fire or drill. STOP WORK. Wait in the nearest hallway for further instructions. The building has fire suppression and doors will automatically close when the fire alarm system is activated. Do not walk through these doors unless specifically instructed to do so by hospital staff. Hallways must be cleared (and should always be kept clear) of equipment and materials. Wait in the area you are working in for instructions from staff.

Fire Alarm

Smoke detectors and pull stations are located throughout the facility. In the event a fire starts in an area you are working in do not hesitate to pull the alarm. In the event that a fire is put out before the alarm system is activated it is mandatory
that engineering and security be informed. The fire department will be contacted. Only the fire department may declare a fire out, no matter how small.

The Basics of a Code Red Fire Alert are - **R. A. C. E.**

**R**emove  Remove anyone in immediate danger.

**A**larm   Pull alarm, DIAL 5555 at the Regional Medical Center, and clearly say “**CODE RED**” and the location (REPEAT TWICE)

**C**ontain  Close doors to confine fires. Attempt to extinguish a small fire with proper equipment.

**E**xtinguish/Evacuate  Extinguish when safe to do so. When you hear “**CODE BLACK**” over the speaker, prepare patients for evacuation.

To use a Fire Extinguisher, remember - **P. A. S. S.**

**P**ull  Pull the pin on the extinguisher.

**A**im  Aim the extinguisher nozzle towards the fire.

**S**queeze  Squeeze the trigger of the extinguisher

**S**weep  Sweep the extinguisher from side to side at the base of the flames. Be sure to overlap sweeps.

**Electrical Safety**

Electrical safety is everyone’s responsibility. Before using cords you should check for frayed insulation and bent or missing pins in the plugs. Wall outlets should also be checked.

Electrical safety is basically common sense. If it doesn’t look right, get it checked out.

Notify your instructor or preceptor if you observe equipment that needs to be repaired.

**Electrical Safety “DO’s” Checklist**

DO make sure to check all electrical equipment before use.

DO report any damage electrical equipment to the hospital engineering department.

DO ensure when entering a patient’s room and before touching the patient that the floor is dry, your hands are dry and the patient and his/her bed are free of wetness and moisture.

DO avoid static electricity shocks to patients by grounding yourself to the metal bed frame or metal sink before touching the patient.

DO make sure you are never touching a patient and a piece of electrical equipment at the same time.

**Hazardous Materials**

Your rights To Hazard Communication Information are as a result of the issuance by OSHA of:  
The HAZARD COMMUNICATIONS STANDARD / 29 FR Part 1910 1200

The purpose of this standard is to ensure that the hazards of all chemicals produced or imported by chemical manufacturers or importers are evaluated, and that information concerning their hazards are transmitted to affected employers and employees within the manufacturing sector. This transmittal of information is to be accomplished by means of comprehensive hazard communication programs, which are to include container labeling and other forms of warning, material safety data sheets and employee training.

Report spills, exposure or other concerns or questions regarding hazardous materials to your preceptor immediately.
**Personal Protection Equipment (PPE)**

PPE will be supplied by CTH. Your instructor or preceptor will show you where PPE are located for your area. The chart below serves as a guideline for infection control and PPE use.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Hand Wash</th>
<th>Gloves</th>
<th>Gown</th>
<th>Mask</th>
<th>Eyewear</th>
</tr>
</thead>
<tbody>
<tr>
<td>Talking to patient</td>
<td></td>
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<td></td>
<td></td>
<td></td>
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<tr>
<td>Serving meals or removing trays</td>
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<tr>
<td>Feeding patients</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Handling non-soiled patient</td>
<td>X</td>
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<tr>
<td>Handling patient belongings soiled with body</td>
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<td>X</td>
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<tr>
<td>substances</td>
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<td>Sanitation or repairs after body fluid spills or</td>
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<tr>
<td>splashes</td>
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<td>Adjusting IV rates, handling non-invasive</td>
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<tr>
<td>Transporting patients</td>
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</tr>
<tr>
<td>Examining pt w/o touching mucous membranes or</td>
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<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>collecting specimen</td>
<td></td>
<td></td>
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<tr>
<td>Minor surgical procedures (e.g. suturing in ER)</td>
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<td>X</td>
<td></td>
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<tr>
<td>Examining pt to include contact with body</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>substances or mucous membranes</td>
<td></td>
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<tr>
<td>Drawing blood, starting IV/S</td>
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<tr>
<td>Obtaining any specimen</td>
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<td>Inserting body catheters (e.g., NG tubes or Foley)</td>
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<td>Handling soiled waste, linen, other materials.</td>
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<td>Incubation</td>
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<td>Endoscopy</td>
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<td>Major operative procedures in OR</td>
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<td>X</td>
<td>X</td>
<td>X ***</td>
</tr>
</tbody>
</table>

* Use gloves if hands are likely to become soiled with infective body fluid

** Use cover gown, mask, and Eyewear if bloody fluids are likely to splash

*** Exception for eye-to-lens viewing/Anesthesia services are exempt from wearing Eyewear due to being out of the surgical field, and protected by barrier draping.
Chapter 4 – INFECTION CONTROL & PATIENT CARE IN ISOLATION

Introduction

Proper hand washing can be a matter of health and maybe even life and death for you and your patients in this facility.

When in Doubt, WASH

What you’re about to read examines the reasons why hand washing is so important. It shows how you can protect yourself and your patients through this simple and effective infection control measure.

Preventing the spread of infection to Healthcare workers and among patients is critical in the hospital setting. The system of isolation used at CTH is Body Substance Isolation (BSI). The key elements of Body Substance Isolation include:

- Frequent and thorough hand washing. Hand washing at least 10 seconds with liquid soap and running water.
- Wearing gloves when you expect to have contact with blood, secretions, mucous membranes, non-intact skin or moist body substances.
- Changing gloves between patients.
- Using other appropriate barriers, (personal protective equipment) when the patient is in isolation or when splashing or soiling of clothes is possible.

Other safety measures to minimize your risk to exposed blood and body fluids are:

- Dispose of all sharps in designated containers.
- Do not bend or break contaminated needles or other sharps.
- Avoid recapping needles, but if necessary, use the one-handed scoop technique.
- Do not eat, drink, or apply cosmetics in patient care areas, this includes the nurses’ stations.
- Dispose of infectious waste in appropriate infectious waste containers, such as the red bags.
- Dispose of sharps containers when they are 3/4 full.
- Do not place food in medications refrigerators.

Infection is Everywhere

Infectious microorganisms that are invisible to the naked eye, but cause disease, included:

1. Bacteria
2. Viruses
3. Parasites
4. Yeast
5. Fungi

Infectious microorganisms may be present in:

1. Blood
2. Other body fluids and secretion saliva, sputum, nasal and vaginal discharge.
3. Excretum

If these materials come in contact with your skin, especially your hands, you are at risk of infection.

Infectious microorganisms may get on your hands when you care for an infected patient or touch a contaminated object or surface such as:

1. Floors
2. Bedpans
3. Urinal
4. Utility rooms
Disease Transmission

Studies have shown that healthcare workers’ hands are the most common transmitters of disease in healthcare facilities. Once your hands are contaminated, infection can enter your body if:

1. You touch the mucous membranes of your mouth, eyes or nose
2. You have any open cuts, nicks or abrasions on your skin, even dermatitis and acne

You can also transfer infection to patients. Microorganisms on your skin that may be harmless to you, can cause serious infection in some patients, especially:

1. The elderly
2. Newborns
3. Patients with weak or undeveloped immune systems
4. Patients with surgical incisions, catheters, breathing tubes, and other passageways into the body

Handwashing Basics

Hand washing is the single most important procedures for preventing the spread of infection. Hand washing also keeps you from transferring contamination to other areas of your body and to patients or the environment. If infectious material gets on your hands, the sooner you wash it off, the less chance you have of becoming infected.

To be effective, hand washing must include several components:

1. Lather hands with soap and water. Use non-abrasive soap, liquid, granules or foam, for most routine hand washing. Detergents are also acceptable. Both suspend easily removable soil and microorganisms or inhibit their growth and are sometimes required.

2. Vigorously rub together all surfaces of lathered hands for 10 - 15 seconds. Friction helps remove dirt and microorganisms. Wash around and under rings, under fingernails, and include wrists. Keep splashes to a minimum and try not to touch the sink itself.

3. Rinse hands thoroughly under a stream of water. Running water carries away dirt and debris. Point fingers down so water and contamination don’t drip towards the elbows.

4. Dry hands completely with a clean paper towel. Discard in a waste container.

Glove Removal

Your hands can be contaminated by glove leaks and during glove removal. To avoid contamination, follow these steps when removing gloves:

1. Peel one glove off from top to bottom and hold in your gloved hand.
2. With your exposed hand, peel second glove off and tuck the first glove inside the second.
3. Be careful not to let the outside of the gloves touch the skin.
4. Dispose of the entire bundle promptly.
5. Wash your hands.

FOR ADDITIONAL QUESTIONS REGARDING HANDWASHING OR INFECTION CONTROL ISSUES, PLEASE CONSULT YOUR INSTRUCTOR OR PRECEPTOR.
**Patient Care in Isolation**

CTH has established guidelines for patient care in Isolation areas. These guidelines can be found in the yellow Infection Control Manual and on Colored Coded* notices posted on the doors of patients in Isolation rooms. Students may, at the discretions of their instructor or preceptor and while following established guidelines, provide care for patients in the following types of posted Isolation conditions:

- Green Sign = MRO Precautions
- Orange Sign = Droplet Precautions
- Blue Sign = Neutropenic Precautions

Students may NOT enter rooms posted with
- Pink Notices = Airborne Precautions

Airborne precaution contact requires student to have gone through prior Respiratory Fit Testing. Fit Testing will only be provided under prearranged special circumstances. If this type of exposure is mandatory for students clinical experience contact the Education Department for instructions on how to obtain fit testing clearance.

Students are NOT to rotate through Triage areas in the Emergency departments or Urgent Care locations. Those patients are in the process of being assessed. Precautions and infectious/contagious conditions may not yet have been determined or diagnosed.

If there is any question as to the type of Isolation that may be in progress in a patient’s room we ask that you Do Not Enter any of the patient Isolation rooms.

**Chapter 5 – HEALTH REQUIREMENTS**

**Immunizations**

CTH requires that evidence* of the following health requirements have been met by each student and instructor, including but not limited to:

- TB- Annual negative PPB (TB) test completed within the last 12 months. (It is the student’s responsibility that this requirement remain current throughout rotation.)
- Rubella and Rubeola – Proof of immunity to Rubella and Rubeola by titer or evidence of 2 MMR vaccines, or start of series of vaccines prior to clinical assignment.
- Varicella (Chicken Pox) - verification by history. If unknown or negative disease history, the facility strongly recommends Varicella vaccination.
- Hepatitis B – the facility strongly recommends Hepatitis B vaccines for all students providing patient care. **CTH also highly recommends season flu vaccinations.**

*Evidence can be copies of participant’s immunization records or a copy of the sponsoring school’s policy and/or a letter or guarantee from the school nurse and teacher stating the school policy is equal to or exceed the CTH requirements listed herein and records are available upon request.

**Health Insurance**

Students will maintain their own health insurance and shall provide proof of current coverage for the term of their clinical rotation/internship. No student shall be accepted at Carson Tahoe Health without first providing upon request acceptable proof of health insurance coverage.

**Respiratory Fit Test**

CTH makes the determination if Respirator Fit testing is required, based on student assignment.
Bloodborne Pathogens

Facts you should be aware of regarding Bloodborne Pathogens that will help in maintaining a safe work environment.

Research shows that safety precautions such as handling all blood and body fluids as though infectious, disposing of sharps properly, and using sharps safety devices have decreased the number of exposures to bloodborne pathogens. You are at greatest risk if exposure to bloodborne pathogens when handling contaminated sharps. Nearly one-third of all sharps injuries happen during disposal. Here is a closer look at the bloodborne pathogens putting you at greatest risk on the job; Hepatitis B virus, Hepatitis C virus and HIV.

The hepatitis B virus (HBV) causes serious liver disease. About half of the people infected with hepatitis B have no symptoms. Most people infected with (HBV) recover and clear the infection. The hepatitis B virus poses a greater risk to healthcare workers than either the hepatitis C virus or HIV, since it is more easily transmitted. Fortunately, the hepatitis B vaccine can prevent the disease. Today’s vaccines are safe and very effective at protecting you from getting hepatitis B infection if the series is completed.

The hepatitis C virus (HCV) cause a serious liver disease and may cause symptoms similar to hepatitis B, however, there are important differences between hepatitis B and hepatitis C. While 85% of people infected with hepatitis C have chronic infections, only about 10% of those infected with HBV are chronically infected. There is no vaccine to prevent hepatitis C.

Hepatitis B, hepatitis C and HIV spread most easily through contact with blood. Most needle stick injuries occur when disposing of needles, including cleaning up after a procedure, giving medications drawing blood, recapping needles or handling trash and dirty linens. At work, you can be exposed to bloodborne pathogens if:

1. A contaminated sharp punctures your skin.
2. Blood splashes on your broken skin or mucous membranes of your eyes, nose or mouth.

The risks of infection are real and should be taken seriously. You can protect yourself by using safe work practices. Research, better surveillance, preventative treatment and advances in technology will continue to give us a sharper image of bloodborne pathogens. The more we know about preventing the risks, the better we can protect ourselves.

If you have any questions regarding bloodborne pathogens contact your instructor or preceptor.
The purpose of the National Patient Safety Goals is to improve patient safety. The goals focus on problems in health care safety and how to solve them.

<table>
<thead>
<tr>
<th>Identify patients correctly</th>
<th>Use at least two ways to identify patients. For example, use the patient’s name and date of birth. This is done to make sure that each patient gets the correct medicine and treatment. Make sure that the correct patient gets the correct blood when they get a blood transfusion.</th>
</tr>
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<tbody>
<tr>
<td>Improve staff communication NPSG.02.03.01</td>
<td>Get important test results to the right staff person on time</td>
</tr>
<tr>
<td>Use medicines safely</td>
<td>Before a procedure, label medicines that are not labeled. For example, medicines in syringes, cups and basins. Do this in the area where medicines and supplies are set up. Take extra care with patients who take medicines to thin their blood. Record and pass along correct information about a patient’s medicines. Find out what medicines the patient is taking. Compare those medicines to new medicines given to the patient. Make sure the patient knows which medicines to take when they are at home. Tell the patient it is important to bring their up-to-date list of medicines every time they visit a doctor.</td>
</tr>
<tr>
<td>Prevent infection</td>
<td>Use the hand cleaning guidelines from the Centers for Disease Control and Prevention or the World Health Organization. Set goals for improving hand cleaning. Use the goals to improve hand cleaning. Use proven guidelines to prevent infections that are difficult to treat. Use proven guidelines to prevent infection of the blood from central lines. Use proven guidelines to prevent infection after surgery. Use proven guidelines to prevent infections of the urinary tract that are caused by catheters.</td>
</tr>
<tr>
<td>Identify patient safety risks</td>
<td>Find out which patients are most likely to try to commit suicide.</td>
</tr>
<tr>
<td>Prevent mistakes in surgery</td>
<td>Make sure that the correct surgery is done on the correct patient and at the correct place on the patient’s body. Mark the correct place on the patient’s body where the surgery is to be done. Pause before the surgery to make sure that a mistake is not being made.</td>
</tr>
</tbody>
</table>
In order to ensure confidentiality and protect the interests of Carson Tahoe Health (CTH), its affiliates, subsidiaries or facilities and its patients, the following is the organization’s policies regarding confidential or proprietary information and indemnification. This applies to any individual participating in job shadows, clinical rotations or intern or externships at any CTH affiliate, facility or subsidiary location.

**Confidentiality Agreement**

No individual participating at Carson Tahoe Health facilities shall reveal or disclose the identity, eligibility or health condition of any patient or any information related thereto, except to authorized individuals and as specifically authorized in the scope of the individual’s duties to provide services to the patient; nor shall he/she in any other way make public or utilize confidential information unless specifically authorized in the scope of his/her duties.

Additionally, individuals may have access to personal information about other employees and/or physicians. As such, you shall not reveal or disclose this information to others. Examples include, but are not limited to, information regarding an employee’s schedule and contact information such as personal phone numbers.

**Indemnification Agreement**

To the extent allowed by law, individuals, or in the case of a minor child, the Parent or Legal Guardian, must agree to indemnify, defend and hold harmless CTH, its officers, employees, agents, and representatives against all claims, demands, damages, costs, expenses, **including court costs and reasonable attorney fees** arising out of or resulting from the negligence of the job shadow, clinical rotation or intern or externship Participant.

Any individual who violates these provisions during or after completing their experience at CTH shall be subject to discipline and/or denied any further or future associations with Carson Tahoe Health.

All covered individuals having access to any such information shall agree to these policies as a condition of his/her affiliation with Carson Tahoe Health and/or its affiliates, subsidiaries or facilities.

I hereby agree to forward all requests for the release of confidential information to my supervisor, or mentor. I also agree to report any and all violations by myself or any other person to the appropriate Carson Tahoe Health official.

I hereby understand and agree that in the course of my experience at Carson Tahoe Health and/or any of its affiliates, subsidiaries or facilities, I may acquire confidential information and trade secrets concerning its operations, future plans and methods of doing business. For purposes of this provision, “confidential information” and “trade secrets” include, but are not limited to rules, guidelines and practices, service area expansion plans, pricing and discounting practices, information relative to employer group protocols and discount rates, information relating to the experience ratings of customers, pricing agendas and criteria for employer groups, and medical cost ratio data relating to employer groups. I understand and agree that disclosure of such information would be extremely damaging to the organization if disclosed to a competitor or made available to any other person or entity. I also understand and agree that should such information be divulged to me in confidence, and understand and agree that I will keep such information secret and confidential and not use such information for any purpose whatsoever. I also acknowledge and agree that the organization would be irreparably harmed by any violation or threatened violation of this Confidentiality Agreement and therefore, the organization shall be entitled to an injunction prohibiting any individual, or in the case of a minor child, the Parent or Legal Guardian, from any violation or threatened violation of this confidentiality provision in addition to any other relief permitted by law.

I, __________________________ (print name), hereby acknowledge that I have read and understand the Student Affiliation Self-Study Orientation Guide & Information Handbook and all of the policies and procedures contained therein including Confidentiality and Indemnification Agreement. By signing this Agreement I am acknowledging my responsibility to comply with all of the programs, procedures and policies as described therein.

______________________________  __________________________
Signature                      Date
PARTICIPANT - PLEASE KEEP A SIGNED COPY OF PAGE 16 YOUR RECORDS