

<b>WYOMING MEDICAL CENTER</b> <b>1233 EAST 2<sup>ND</sup> STREET</b> <b>CASPER, WYOMING 82601</b> <b>Phone: 307- 577-2406</b> <b>Fax: 307-577-4324</b> <a href="http://www.wyomingmedicalcenter.com">www.wyomingmedicalcenter.com</a>		(Revised 10/11/11) <b>NON-EMPLOYEE PROFESSIONALS</b> <b>APPLICATION FOR ENTRY TO WYOMING</b> <b>MEDICAL CENTER</b> Non-Employee # (HR Use) _____	
<b>Last Name</b> _____ <b>First</b> _____ <b>Middle</b> _____		<b>Social Security #</b> _____ <b>DOB</b> ____/____/____	
<b>Address</b> _____		<b>Local Phone #</b> _____ <b>E-Mail</b> _____	
<b>City, State, Zip</b> _____		<b>Company/School Affiliation</b> _____	
<b>Wyoming Medical Center Department</b> _____		<b>Company/School Phone #</b> _____	
<b>Position Applying for:</b> Volunteer ____ Student ____ Traveler ____ Vendor ____ Contractor ____ Health care professional ____ Other: _____			
<b>REQUEST TO ACCESS WMC</b>			
<b>Reason for the request and scope of activities while at Wyoming Medical Center facilities:</b> _____			
<b>Start Date:</b> _____		<b>End Date:</b> _____	
Are you currently or have you ever been employed by WMC? <b>Yes</b> ____ <b>No</b> ____ <b>Date and reason of separation:</b> _____			
Have you ever plead guilty to or been convicted of a misdemeanor or felony (except minor traffic violation)? <b>Yes</b> ____ <b>No</b> ____ (* A yes answer does not automatically disqualify you from Non-Employee Status at WMC. The nature of the offense, date and area you are applying for will be taken into consideration.) New Personnel must undergo a thorough background investigation upon applying at Wyoming Medical Center. The information furnished below will be used strictly for the purpose of identification, facilitating the background investigation and validating its findings. The personal history information contained herein will be retained in the WMC Human Resources Department. <b>Failure to disclose any misdemeanor or felony will result in complete termination of all privileges to conduct business at Wyoming Medical Center.</b>			
I hereby request status as a Non-Employee of Wyoming Medical Center (WMC). All of the information submitted by me in this application is true to the best of my knowledge and belief. <b>I fully understand that any significant misrepresentation or omission constitutes cause for denial or revocation of my status as a non-employee.</b> I acknowledge and understand that as a non-employee, I am subject to WMC's policies and procedures as relevant to the scope of activities outlined above and approved within this document. I acknowledge that I can only perform activities that are listed within this document or are demonstrated in the competencies documentation that I have provided and that are retained with WMC. I will act professionally and within guidelines of WMC Service Excellence Standards. I also understand that WMC reserves the right to ask me to leave the facility at any time due to my behavior or organizational need.			
<b>Non-Employee Signature</b> _____		<b>Date</b> _____	
Human Resources Approval _____		Date _____	
Department Permission Sought & Notification Sent _____		_____	
Physician Approval (if applicable) _____		Date _____	

## **IMMUNIZATIONS**

### **Determination for requirement of immunizations (Please circle yes or no):**

1. Will you be in the same room as patients?  
YES NO
2. Will you be providing direct patient care for at least 1 hour per day?  
YES NO
3. Are you in contact with patients on a weekly basis?  
YES NO

- If you circled yes to any question above, please provide the following immunizations:
- PPD (TB Test) within last 12 months  
A PPD test can be obtained at Natrona Public Health or your primary care physician.
- MMR (2 doses or positive immunity) (or born prior to 1957)
- HEP B (or declination of HEP B form)
- Varicella (Chicken Pox)- History, Varicella Antibody, or 2 Doses Varivax

## **HIPAA PRIVACY STANDARDS**

This handbook is designed to give you a basic overview of the HIPAA Privacy Standards, and to help you understand how and why to comply. If you should have any questions during the course of reading this material, please call the Employee Services at 577-2406, Matt Frederiksen at 577-7852, or Nick Belveal at 577-2464.

### **WHAT IS HIPAA?**

HIPAA stands for the **Health Insurance Portability and Accountability Act of 1996**.

This Federal law was created for three basic reasons:

1. To ensure that insurance was portable from one employer to the next.
2. To increase the efforts against fraudulent activity in the health care industry.
3. To standardize the transmission of electronic data within the healthcare industry.

The creators of the law realized that if they standardized the transmission of electronic data, several privacy and security issues would become a factor in order to keep patient information confidential. This led to 3 different sets of rules with 3 different implementation deadlines.

### **WHAT DOES THAT MEAN TO WYOMING MEDICAL CENTER?**

1. New restrictions for the use and disclosure of protected health information (PHI).
2. Implementing a new billing system to submit electronic claims in a HIPAA mandated format.
3. Informing patients of their right to the protection of their health information and how we intend to accomplish that.

### **COMPLIANCE DEADLINES**

#### **Privacy Standards – April 14, 2003.**

The privacy standards deal with the protection of information that is either written or verbal.

#### **Transaction Standards (TCS) – October 16, 2003.**

The transaction standards address the standardization of electronic submission. (Are we billing the same way everyone else is?)

#### **Security Standards – February, 2005.**

The security standards deal with the protection of data that is stored on computers, servers, etc.

\*This is the area of concern for our hospital

### **WHAT IS A COVERED ENTITY?**

**Covered entity** means:

A health plan; A health care clearinghouse; A health care provider who transmits any health information in electronic form in connection with a transaction covered by the HIPAA regulations

## **WHAT IS PROTECTED HEALTH INFORMATION?**

Protected Health Information is information given to a covered entity about an individual's physical or mental condition. PHI includes the services provided by the covered entity or billing information related to the services provided. PHI also includes any information that can connect an individual to that information such as address, social security number, name, etc.

## **WHEN IS PHI USED?**

PHI is used when it is shared, examined, applied or analyzed.

## **WHEN IS IT OK TO USE OR DISCLOSE PATIENT INFORMATION?**

Covered entities can use or disclose information for the purposes of:

2. Treatment
2. Payment
3. Other healthcare operations

## **WHEN IS AN AUTHORIZATION REQUIRED?**

Generally, an authorization is required to use PHI outside of the three areas listed above. By filling out an authorization form, the patient gives us the authority to use their information in the manner prescribed by the patient. There are times when an authorization is not needed to use or disclose PHI.

The Health Information Management department is the gatekeeper of the releasing of patient information. All requests for the release of information should be coordinated through this department.

## **WHEN IS AN AUTHORIZATION NOT REQUIRED?**

PHI can be used or disclosed without an authorization for the following reasons:

2. Patient directory listing patients in the hospital.
3. Keep family members or other identified individuals informed.
4. Inform appropriate agencies during disaster relief efforts.
5. Public health activities related to the prevention or control of disease.
6. To report victims of abuse, neglect, or domestic violence.
7. Health oversight activities.
8. Coroners, medical examiners, or funeral home directors.
9. Tissue/organ donations.
10. To avert a crime from being committed.

If you have a question about disclosing information, please call the hospital's Privacy Officer or Privacy Official.

## **PRIVACY OFFICER**

Wyoming Medical Center is required to identify in writing who the Privacy Officer is. The Privacy Officer is the individual who is chiefly responsible for implementing the HIPAA standards and maintaining privacy throughout the organization. The current Privacy Officer is Matt Frederiksen.

## **MINIMUM NECESSARY**

Wyoming Medical Center must develop policies and procedures that address the minimum necessary use of PHI. This means information that is disclosed is the minimum amount needed to get the job done. Also, Wyoming Medical Center is required to limit access to PHI on a need to know basis only, which is currently determined by your manager.

## **NOTICE OF PRIVACY PRACTICES**

Wyoming Medical Center has developed a Notice of Privacy Practices (NPP), which contains the patient's privacy rights and our legal duty to protect those rights. The NPP is displayed in the admitting areas, and a copy is handed out to every patient that comes into the hospital at their initial visit. The NPP is also posted on our website.

## **WHAT HAPPENS TO THOSE WHO DON'T COMPLY?**

\$100 fine per day for each unmet standard. (Up to \$25,000 per person, per year, per standard.)

\$50,000 fine + one year in prison for improper disclosure of health information.

\$100,000 fine + five years in prison for obtaining health information under false pretenses.

\$250,000 fine + ten years in prison for using health information for personal gain.

**IMPLICATIONS FOR YOU AS A NON-EMPLOYEE?**

- 1. You are expected to share information only when needed and only as much as is necessary. (This means do not share patient information with co-workers in the elevators, in the cafeteria, or other anywhere else that is not appropriate.)
- 2. You are responsible for protecting the rights of the patients that come to Wyoming Medical Center.
- 3. You put yourself and the hospital at risk when you share patient information inappropriately.

**WHAT HAS WYOMING MEDICAL CENTER DONE TO COMPLY?**

- 1. Named a Privacy Officer to coordinate the HIPAA implementation effort.
- 2. Created a Notice of Privacy Practices to inform patients of their rights.
- 3. Developed a Business Associate Agreement to ensure that our partners in business are using our patient’s information appropriately.
- 4. Formed a HIPAA committee to address the HIPAA standards.

**HIPAA TEST**

- 1. **Who is Wyoming Medical Center’s Privacy Officer?** Matt Frederiksen
- 2. **Name 3 instances when an authorization is not required?**
  - Patient Directory      -Keep family members informed.      -Tissue/organ donations.
  - Inform appropriate agencies during disaster relief efforts.      -Health oversight activities
  - To report victims of abuse, neglect, or domestic violence.      -To avert a crime from being committed
  - Public health activities related to the prevention or control of disease.
  - Coroners, medical examiners, or funeral home directors.
- 3. **When is it OK to use or disclose patient information?** Treatment, Payments, or Other healthcare operations.
- 4. **Who should you contact (Gatekeeper) when a patient requests a copy of their patient records?** Health Information Management Department.
- 5. **What does HIPAA stand for?** The Health Insurance Portability and Accountability Act of 1996.
- 6. **A patient should get a copy of our Notice of Privacy Practices upon their initial visit. (T or F)** T
- 7. **Who should you call if you have a question about HIPAA or patient confidentiality?** Privacy Officer or Matt Frederiksen.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Non-Employee Signature

**Statement of Confidentiality and Non-Disclosure**

I, the undersigned, do hereby acknowledge that access to Wyoming Medical Center’s network and data is a privilege, and not a right. As such, all information obtained through the use of the hospital’s computer systems with respect to any patient or employee data, and/or learned through conference with physicians, employees, patients, or family members is to be handled in the highest manner of confidentiality. This information is not for dissemination, sale, or personal use. It is not to be discussed or shared with anyone outside of the direct care of the patient, or contract. By signing this document, I am indicating I understand and fully comply with these guidelines. I also understand that any violation of the confidentiality of said information gleaned while an employee or contractor of WMC which results in financial, reputation, or other type of harm to the patient or employee may result in disciplinary action, up to and including discharge for employees, and civil actions against contractors.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Non-Employee Number

\_\_\_\_\_  
Printed Name

## **BLOODBORNE PATHOGENS**

### *A SHARPER IMAGE*

Our image of blood borne diseases has sharpened in recent years due to research and technological advances. More is known about the transmission, prevention and treatment of diseases such as hepatitis B, hepatitis C and HIV (Human Immunodeficiency Virus) infection.

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 numbers of exposures to blood borne pathogens.

#### **HEPATITIS B VIRUS**

Hepatitis B virus (HBV) causes serious liver disease. About half of the people infected with hepatitis B have no symptoms. Those with symptoms may experience jaundice, fatigue, abdominal pain, loss of appetite, occasional nausea or vomiting. Most people infected with HBV recover and clear the infection. Each year, more than 5,000 people die from chronic liver disease and liver cancer linked to HBV, as many as 200 are healthcare workers. The Hepatitis B virus poses a greater risk to healthcare workers than Hepatitis C or HIV, since it is more easily transmitted. Fortunately, the hepatitis B vaccine can prevent the disease.

#### **HEPATITIS C VIRUS**

Hepatitis C virus (HCV) causes a serious liver disease known as hepatitis C. This liver disease may cause symptoms similar to hepatitis B. However, there are important differences between HBV and HCV. While 85 percent of people infected with HCV have chronic infections, only 10 percent of those infected with HBV are chronically infected. The Centers of Disease control and Prevention (CDC) reports about three million people in the United States are chronically infected with the hepatitis C virus while about 1.25 million are chronically infected with the hepatitis B virus. Further, many people infected with these viruses have no symptoms at all: that includes about 50 percent infected with HBV and up to 75 percent of people infected by HCV. People chronically infected with hepatitis C may have no symptoms for up to 30 years, yet during that time the infection may be slowly damaging the liver. Every year, up to 10,000 people die from HCV related chronic liver disease. Hepatitis C is the leading indicator for liver transplants. There is no vaccine to prevent Hepatitis C. However, newly approved antiviral drugs have been effective in some people who have contracted the infection.

#### **HIV**

HIV attacks the immune system and causes it to break down. The infected person becomes seriously ill when the immune system loses its ability to fight infections. Some infected people go on to develop AIDS. The clinical picture of HIV infection differs widely from person to person. According to the CDC up to 900,000 people in the United States are infected with HIV. The number of HIV-infected people who develop serious illness and who die from AIDS has decreased, thanks to the success of recent treatments. People with HIV now live longer and healthier lives. There is no preventive vaccine against HIV.

#### **TRANSMISSION**

Hepatitis B, Hepatitis C and HIV spread most easily through contact with blood. They also spread through contact with other potentially infectious materials, or OPIM, including semen and vaginal secretions, or any other body fluid or tissue containing visible blood. OPIM also includes cerebrospinal fluid, synovial fluid, pleural fluid, peritoneal fluid, pericardial fluid, amniotic fluid and saliva in dental procedures. Non-intact skin or organs from living or dead humans and, cell tissue or organ cultures and other biological matter from laboratory experiments are also considered to be OPIM. Blood borne viruses are most commonly transmitted through sharing needles to inject drugs, by having unprotected sexual intercourse with an infected person, or passed from mother to unborn child before or during birth.

##### **Focus on Exposures at Work**

At work, you can be exposed to blood borne pathogens if:

1. A contaminated sharp punctures you skin.
2. Blood or OPIM splash your broken skin or mucous membranes or your eyes, nose or mouth.

According to the research, needle-stick injuries cause 80 percent of exposures to healthcare workers. The Occupational Safety and Health Administration (OSHA) reports 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.

#### **SAFETY GUIDELINES**

##### **A Safe Picture**

Your facility's Exposure Control Plan (ECP) details blood borne pathogen safety measures, including a method of identifying and evaluating safety devices such as protective sharps. Your Exposure Control Plan is based on OSHA's Blood borne Pathogen Standard and CDC guidelines for healthcare personnel.

## **Hepatitis B Vaccine**

According to OSHA, immunization against HBV has proven very effective. In 1985, 12,000 healthcare workers were infected with HBV on the job. By 1995, after immunizations were promoted, only 800 healthcare workers were infected at work, and that's currently true. Today's vaccines are safe and very effective at protecting you from getting hepatitis B infection if the series is completed.

## **Standard Precautions**

Standard Precautions means treating blood, all body fluids, excretions and secretions (except sweat), plus non-intact skin and mucous membranes as though infected with blood borne or other pathogens. Standard Precautions incorporates features of both Universal Precautions and Body Substance Isolation practices to protect you against the risk of blood borne pathogens as well as pathogens from moist body substances.

## **Personal Protective Equipment**

To follow Standard Precautions you must use barrier protection, or personal protective equipment (PPE), when you anticipate touching blood, body fluids, secretions, excretions and contaminated surfaces. PPE may include gloves, gowns, lab coats, face shields or masks and eye protection, resuscitation bags, pocket masks or other ventilation devices. Some tasks require more PPE and some less or none at all. You only need to wear as much equipment as necessary.

## **Gloves**

Gloves are the most common type of PPE. Single use, disposable gloves that are low protein and powder-free are used for medical procedures, and heavy-duty utility gloves are used for some housekeeping duties. Gloves can be torn or punctured, so cover any hand cuts you may have before being gloved. The glove should fit snugly over your fingers and be pulled as far over your wrists as possible. Single use disposable gloves should only be worn once, and then thrown away. Always change gloves between each patient. If a glove tears, punctures, leaks or becomes contaminated, remove it as soon as possible and discard. Never reuse gloves. Utility gloves may be cleaned or decontaminated and reused if no damaged. If they are damaged, throw them out. Avoid touching the outside of contaminated gloves when removing and always wash your hands after removal.

### **Other PPE**

1. Wear a mask, eye protection or a face shield to protect your eyes, nose and mouth during activities that may generate splatters of blood or OPIM.
2. Wear a gown to protect clothing or skin from exposure. If you anticipate contact with large amounts of blood or body fluids use a fluid-resistant gown.
3. Wear a surgical cap/hood and shoe/boot covers when large amounts of blood may be encountered.
4. Wear PPE when resuscitating a patient. Emergency respiratory devices and pocket mask isolate you from contact with patient's body fluids. Make sure emergency ventilation devices are available where they're most needed, such as on crash carts and in certain patient and procedure rooms.

Your facility will provide you with necessary PPE and train you to use it. Make sure PPE fits properly. Check it routinely for physical flaws or damage. Remove as soon as possible if blood or OPIM penetrates PPE. Always remove PPE before leaving the work area. Immediately dispose of used PPE or have it laundered or decontaminated according to your facility's policy. Always wash your hands after removing PPE.

## **Safe Work Practices**

### **Hand Hygiene Guidelines**

Hand Hygiene is your number one protection against infection and it keeps you from infecting other people or objects. The Centers for Disease Control and Prevention (CDC) recommends decontaminating your hands with approved water-less alcohol antiseptic hand rub if hands are not visibly soiled. Apply the product to the palm of one hand; rub hands together covering all hand surfaces and fingers until hands are dry. Decontaminate your hands between all patient contacts to avoid transferring pathogens to other patients.

If hands are visibly soiled, you still must wash your hands with soap and water as soon as possible. Wash hands with soap and running water for at least 10 to 15 seconds. Rub vigorously over all surfaces including above your wrists. Rinse thoroughly. Then dry with a clean paper towel and discard. Now using a clean paper towel, turn off the faucet.

2. Use antimicrobial soaps only when indicated; they remove your skins natural protective defenses and may cause dryness.
3. Do not eat, drink or smoke where you are likely to be exposed to blood/body fluids. Do not handle contact lenses or apply cosmetics/lip balms where exposure is possible. Never keep food/drinks in places where blood or OPIM are present.
4. Never mouth-pipette or mouth-suction blood or OPIM.
5. Always minimize splashing, spraying and spattering when performing procedures involving blood or OPIM.
6. Transport specimens of blood or OPIM in closed, leak-proof containers. Wear gloves and handle carefully.

7. Handle contaminated patient equipment with care. Do not let it touch your skin, mucous membranes, clothing, other patients, visitors or items in the environment. Clean reusable equipment properly before using it on another patient. Discard single-use items appropriately.
8. Clean all blood/fluid spills promptly, according to facility policy. Keep work surfaces and protective coverings clean.
9. Handle contaminated laundry carefully to prevent exposure of your clothing and skin. Wear gloves. Place in an appropriate container in the area where used. Deposit wet laundry in a leak-resistant container.
10. Never use your hands or feet to push down trash since it may contain sharps or OPIM. Instead, gently shake down waste containers. Carry waste bags by the top, away from your body.
11. Dispose of blood and other regulated medical waste in appropriately labeled closable, leak-proof containers. Follow your state regulations, as specified in your Exposure Control Plan.
12. Be aware of fluorescent orange-red labels, red bags and containers, and warning signs. They warn you that the contents contain blood or OPIM.

### **Sharps Safety**

You are at greatest risk of exposure to blood borne pathogens when handling contaminated sharps. Studies show that sharps safety devices may significantly reduce your risk of injury during procedures such as joining IV lines, drawing blood, injecting medications and suturing during surgery. The FDA and OSHA now recommend use of breakage-restraint blood capillary tubes to decrease exposure. Safety devices include needleless systems and engineered protective devices for needles and other sharps. You will be trained in the proper use of safety devices beforehand and will help evaluate their effectiveness.

Your Exposure Control Plan details sharps safety rules you should follow. Here are some general guidelines.

- B. Use a safe-needle device or needleless system for withdrawal of body fluids, accessing a vein or artery, or administering medications or fluids.
- C. Use either a needleless system or a needle with engineered sharps protection for any other procedure requiring needle devices, when available.
- D. Use either a needleless system or a needle with engineered sharps protection for any other procedure requiring needle devices, when available.
- E. Use non-needle sharps with engineered sharps protection when available.
- F. When using sharps, always follow effective, safe handling techniques to prevent injury.
- G. Never shear, break, bend or recap contaminated needles or sharps, except in cases when recapping is required by the procedure. Then, use a re-sheathing device or a one-handed scoop method.
- H. Never reuse disposable sharps.
- I. Do not pick up contaminated broken glass (also a sharp) with your hands. Use a broom and dustpan, forceps or tongs.
- J. Discard contaminated sharps immediately after use in an appropriate, puncture-resistant, color-coded container. Nearly one-third of all sharps injuries happen during disposal. The National Institute for Occupational Safety and Health (NIOSH) suggests this risk can be decreased by placing sharps containers within easy reach and slightly below eye level. Do not allow containers to overfill. Never reach into a container of contaminated sharps.
- K. Report all sharps injuries as directed in Exposure Control Plan. Document sharps exposure incidents including date, time and type of sharp used; effectiveness of any safety device used; and how the injury could have been prevented, if possible. This information, entered into the Sharps Injury Log, is used to judge the effectiveness of current sharps safety devices

### **WHAT TO DO IF EXPOSED**

Immediately, wash the exposed skin area, needle-sticks and cuts with soap and water. Flush eyes and exposed mucous membranes with large amounts of clean water. Do not use caustic agents, such as bleach. Next, report the exposure to the designated person right away, so that post-exposure evaluation, counseling and any necessary treatment can begin. Act quickly; be cause for some infections, treatment should start right away. If you are exposed, don't panic. Remember: Most exposures do not lead to infection. To become infected, a large enough dose of the live virus must enter your bloodstream and overcome your body's defense system. To put it in perspective, here are the risks of contracting a blood borne infection after a sharps injury. Studies report the risk of acquiring hepatitis B if unvaccinated is between 6-30 percent; for hepatitis C it's 1.8 percent; and for HIV the risk is approximately 0.3 percent or 1 in 300.

**The risk of infection is real and should be taken seriously. You can protect yourself by using safe work practices.**

**BLOODBORNE PATHOGENS Quiz- PLEASE CIRCLE TRUE OR FALSE**

- B. Health Care workers most often become exposed to hepatitis B, hepatitis C and HIV through accidental needle-sticks. **True/False**
- C. HIV poses a greater risk to healthcare workers than hepatitis B or hepatitis C because it is transmitted more easily. **True/False**
- D. Most people infected with hepatitis B virus do recover and clear the infection. **True/False**
- E. Most people infected with HCV become chronically infected. **True/False**
- F. People infected with HIV usually experience the same types of symptoms. **True/False**
- G. Fortunately, there are vaccines to prevent both hepatitis B and hepatitis C. **True/False**
- H. Hepatitis B virus, hepatitis C virus and HIV spread most easily through contact with blood. **True/False**
- I. You can be exposed to blood borne pathogens at work if a contaminated sharp punctures your skin or if blood or other infectious material splashes your broken skin or mucous membranes. **True/False**
- J. Most needle-stick injuries occur when disposing of needles, giving medications, drawing blood or handling trash or dirty linens. **True/False**
- K. The hepatitis B vaccine is very effective if the series is completed. **True/False**
- L. Standard Precautions means wearing gloves when having direct contact with any patient. **True/False**
- M. Standard Precautions incorporates features from both Universal Precautions and Body Substance Isolation practices to protect you against the risk of blood borne as well as other pathogens. **True/False**
- N. You need to wash your hands after removing gloves only when you touch the outside of the gloves. **True/False**
- O. You should wear a mask, eye protection and a gown during activities that may generate spatters of blood to your face and clothing. **True/False**
- P. You don't need to wear gloves when handling dirty linens, unless the linens are contaminated with blood. **True/ False**
- Q. You are at greater risk of exposure to blood borne pathogens when you handle contaminated sharps. **True/False**
- R. Nearly one-third of all sharps injuries occur during the disposal process. **True/False**
- S. According to research safety precautions such as handling all blood and body fluids as though infectious, using PPE when needed and handling sharps carefully decrease the risk of exposure to blood borne pathogens. **True/False**
- T. If your skin is punctured by a contaminated sharp, wash area with soap and water or a diluted mixture of bleach and water, if available. **True/False**
- U. Most exposures to blood result in infection when caused by needle-sticks. **True/False**

**Acknowledgment of Training**

I have read and understand the training handbook, *Blood borne Pathogens: A Sharper Image (Featuring Sharps Safety Devices)*. I have also completed and passed the comprehensive quiz at the conclusion of this handbook.

---

**Non-Employee's Signature**

---

**Date**

**Blood borne Pathogens Quiz Answers**

- |          |          |           |           |           |          |           |
|----------|----------|-----------|-----------|-----------|----------|-----------|
| 1. True  | 2. False | 3. True   | 4. True   | 5. False  | 6. False | 7. True   |
| 9. True  | 10. True | 11. False | 12. True  | 13. False | 14. True | 15. False |
| 16. True | 17. True | 18. True  | 19. False | 20. False |          |           |



## SUMMARY OF POLICIES & PRACTICES

Updated 2011

*This is a summary of some Wyoming Medical Center policies. This in no way is the entire policy. The responsibility is left to the non-employee to know the policy or seek the appropriate person for clarification. WMC policies & procedure are available on the Intranet and the nursing office. Ask an employee for access.*

**CUSTOMER SERVICE IS A PRIORITY!** - The behaviors we expect are a service attitude, empathy, respect, values, integrity, courtesy and excellence. Please read the brochure provided.

**Confidentiality** - All information obtained by being employed or associated at Wyoming Medical Center must remain confidential. Only by maintaining confidentiality can an organization maintain the trust of the community. If a breach of confidentiality occurs, a non-employee may not be allowed on WMC premises.

**Vision** - Wyoming Medical Center will be a leader in Quality, Safety and Service.

**Mission** - Wyoming Medical Center's mission is to deliver outstanding quality of care by people who care.

**Elevator Rules** - The first priority for elevator use is for the patient. Wyoming Medical Center associates are to give right-of-way to patient, family and guests. An employee of the medical center will further explain elevator etiquette.

**Patient Rights** - To receive service responsive to their needs and have available services identified to them and their family.

**Patient Communication** - Customers have a right to explanations by those responsible for their care. The health care provider has an expectation that the patient and their family ask questions or request clarification and then follow instructions and treatment plans. There are different appropriate communication methods based on age that WMC define the Age Appropriate Care manual.

**Restraints & Seclusion** - WMC uses two types of restraints these include: behavioral and medical. Within each there is chemical and physical component. Seclusion is removing a person from the general populous and must follow appropriate protocols. There are specific guidelines and documentation required for both of the above procedures. Refer to your mentor or the primary care giver for that patient for clarification on the restraint policy.

**Non-accidental trauma** - Suspected or actual abuse or neglect observed or communicated to a non-employee must be reported to your mentor or the primary care giver for that patient.

**Exits & Fire Extinguishers** - An employee will show you where all the exits and fire extinguishers are for the area you are in.

**Codes are methods of communication at Wyoming Medical Center. Codes are generally announced over the PA system.**

Code **Red** indicates Fire-*The acronym RACE is used to define the process for working through a fire.*

Rescue anyone in immediate danger

Activate the nearest fire alarm pull station, alert other staff members

Confine the fire by closing all doors

Evacuate or Extinguish if the fire is small enough and you have been trained in how to use a fire extinguisher.

Code **Red** indicates Fire

Code **Blue** indicates Cardiac or Respiratory Arrest

Code **Black** indicates Bomb Threat

Code **Orange** indicates Disaster

Code **Pink** indicates Abducted Child

Code **Green** indicates Physician not in attendance at delivery

Code **Gray** indicates a Behavioral Emergency Code **Tan** indicates a Staff Crisis

Code **Yellow** indicates a Hostage Situation (Requires no staff response)

**Call 3333 on campus and Call 9-911 is off campus when you identify one of these situations.**

*Campus is defined as the main hospital building, parking structures, the oncology building and WMC Support Services Building. This is the area between Conwell Street and Washington Street going north to south and Second Street and Third Street going east to west.*

### **Infection Control - Blood/Body Fluids (BBF)**

In a healthcare facility, you may encounter blood borne pathogens. To routinely prevent contact with germs:

- Use Standard precaution procedure with all patients.
- Wash hands for 10 seconds before/after hand or glove contact with patient
- Wear gown and gloves to protect yourself from splashing if BBF is likely
- Wear mask and eye gear (or face shield) if BBF soiling is likely

*Any contact with an isolation patient requires further education*

**Communication** - We know communication is key to good patient and employee relationships. We communicate not only with our words, but through our tone, body language, and expressions. Communication is irreversible - once you say something, it is not possible to "take it back." Try to tailor your communication to fit your audience (even if it is only one person). Be sensitive to cultural and religious backgrounds.

- Break down communication barriers by thinking before you speak - what is the desired outcome? What is the other person's opinion? What are the potential responses?
- When you consider these issues, formulate your statement, observe the responses, ask for feedback, ask the listener to paraphrase to check their understanding. Speak clearly and concisely, and with enthusiasm.
- Be an active listener - don't interrupt your speaker. Ask questions when appropriate. Empathize with the person, be open-minded and non-judgmental.
- Foster open communication. Keep managers and co-workers informed. No one likes to be left out of the loop!
- The ultimate goal of communication at WMC is to promote clear and accessible channels of information sharing between team members, and to promote effective processes wherein patient and employee safety are achieved.
- For further communication training offerings, please contact the HR department at x 2456.

**Smoking** - Wyoming Medical Center is a tobacco-free environment.

**Dress Code** - The expectation is everyone that wears an identification badge with the Wyoming Medical Center logo is a representative of the medical center. The dress of each person should be professional and appropriate for the function the individual provides.

**Discrimination and Unlawful Harassment** - Everyone who enters Wyoming Medical Center whether employee, non-employee, patient or visitor must be treated with dignity and respect. "Harassment in any form, including verbal, physical, and visual harassment, because of a person's race, color, national origin, ancestry, sex, pregnancy, religious creed, age, physical disability or handicap, medical condition, marital status, or because of a person's relationship or association with members of a protected group or association with organizations established for the preservation of rights protected under the law, or for any other reason prohibited by law or regulation, is strictly prohibited." Contact a supervisor or Human Resources for questions.

**Organizational Ethics** is important in a healthcare environment. WMC has an organizational ethics policy. One important concept is the conflict of interest. If a person has an advantage due to their relationship with WMC that could include, but not limited to monetary compensation, you may be entering into a conflict of interest. If you feel you are making a decision which would be interpreted as a conflict of interest, check with a supervisor or Human Resources.

**Drug Free** - If an employee is suspected of being under the influence of a controlled substance or alcohol, the employee will be removed from duty and tested.

**PATIENT SAFETY**: The Patient Safety goals are:

Goal 1 - Improve the accuracy of patient identification.

- A. WMC use at least 2 patient identifiers (neither to be the patient's room number) whenever administering medications or blood products; taking blood samples and other specimens for clinical testing, or providing any other treatments or procedures.
- B. WMC conducts a final verification process to confirm the correct patient, procedure, site, and availability of appropriate documents.
- C. WMC labels containers used for blood and other specimen in the presence of the patient.

Goal 2 - Improve the effectiveness of communication among care givers.

- A. For verbal or telephone orders or for telephonic reporting of critical test results, verify the complete order or test result by having the person receiving the order or test result "read-back" the complete order or test result.
- B. A standardize list of abbreviations, acronyms and symbols that are not to be used are on all physician orders at WMC.
- C. The timelines to report critical test results and values is 30 minutes at WMC.
- D. The standardized approach to "hand off" communications, including an opportunity to ask and respond to questions is the "I PASS My BATON" at WMC.

Goal 3 - Improve the safety of using medications.

- A. The list of look-a-like/sound-a-like drugs that have been identified by WMC is located on the Omni Cell in each medication area.
- B. All medications or other solutions must be labeled once they leave their original container on and off the sterile field.
- C. WMC has a safety plan in place in relation to anticoagulation therapy.

Goals 4, 5, and 6 - Not applicable

Goal 7 - Reduce the risk of health care-associated infections.

- A. Comply with the World Health Organization Hand Hygiene Guidelines or the Center for Disease Control Guidelines.
- B. WMC will do a full investigation of all identified cases of unanticipated death or major permanent loss of function associated with a health care-associated infection.

Goal 8 - Accurately and completely reconcile medications across the continuum of care.

- A. All medication will be reconciled on admission by taking a full list of the patients' home medications.
- B. All medication will be reconciled on transfer.
- C. All medication will be reconciled on discharge and the patient will be given a full list of medications to be taken at home.

Goal 9 - Reduce the risk of patient harm resulting from falls.

- A. WMC assesses all patients for falls including risk of fall and risk of injury from fall.
- B. WMC has a fall prevention program in place including Red Slippers, Colored Wristbands, and Magnetic Signs on patient room doors to indicate patient is a fall risk.

Goals 10, 11, and 12 - Not applicable

Goal 13 - Encourage patients' active involvement in their own care as a patient safety strategy.

- A. WMC has "Speak Up" posters in all patient rooms in ways patients can report concerns related to patient safety. Patient goals are established daily with input from the staff and the patient and communicated on a whiteboard in the patient's room.

Goal 14 - Not applicable

Goal 15 - The organization identifies safety risks inherent in its patient population.

- A. WMC identifies those patients at risk for suicide by doing a risk assessment on all patients.

Goal 16 - Improve recognition and response to changes in a patient's condition.

- A. WMC has a Rapid Response Team that may be initiated by staff if there is a change in the patient's condition and staff feels they need additional resources. To initiate call 3333.
- B. WMC has a Neurologic Team that may be initiated by staff if there is a neurologic change in the patient's condition and staff feel they need additional resources. To initiate call 3333.
- C. Patients and family may initiate a Condition H which is a Patient and Family activated rapid response. Patients and family will be educated to call 4444 if they feel additional resources are needed for their loved one.

## **RISK MANAGEMENT**

### **INCIDENT/OCCURRENCE REPORTING**

- Definition of an Incident/Occurrence: An unexpected outcome or series of events that could increase the risk of injury or loss to Wyoming Medical Center, its patients, employees, visitors, or medical staff.
- Report any incident/occurrences in one of the following ways (please be as detailed as possible): Midas REDI accessible on any Wyoming Medical Center computer through the intranet. Leave a message for Risk Management at x 2402 or x 2306. Send an e-mail to PtSafety@wmcnet.org

### **ENVIRONMENT OF CARE**

- 7 Management Areas (Safety, Security, Emergency, HazMat/Waste, Medical Equipment, Utilities, and Fire Prevention).
- Electrical Safety - All “red receptacles” are designated receptacles that are connected to the emergency power generator, in the loss of the electrical utility
- Defective Medical Equipment - Be sure to fill out a Defective Medical Equipment form for all pieces of equipment out of order. The form includes the date, time, WMC Control #, Requested by, Equipment user, Equipment description, whether or not equipment was in use on a patient at time of failure, detailed description of failure. One copy will be attached to the equipment.

### **HAZARDOUS COMMUNICATION - MSDS & YOUR RIGHT TO KNOW**

- The materials safety data sheet (MSDS) is the key data source on any hazardous chemical and must be available to you on the job. Every department should have an MAX COM book that contains a list of the chemicals used in that department.
- The MSDS gives the chemical name and hazardous ingredients, manufacturer, date of preparation, and safe exposure levels. It also contains what to do if the chemical spills or if you accidentally come in contact with chemical (first aid).
- The MSDS provides a list of required PPE (personal protective equipment) for safe handling of the chemical. Basically, the MSDS provides all of the important details about the chemical and its hazards and protections.
- The first step in any job involving a hazardous chemical is to read its label and MSDS and follow the precautions and instruction. When in doubt, ask.
- Never handle, move, or open a chemical container until you read the label and understand its hazards and protective measures. When in doubt, ask.
- Every chemical container in WMC shall bear a label with the necessary information.

*I have read and understand the information presented by the Wyoming Medical Center and its' employee and that which is on this form. I understand that it is my responsibility as a non-employee to adhere to Wyoming Medical Center policies.*

---

Signature

---

Date