



**Cullman Regional Medical Center  
(CRMC)  
Orientation Packet  
Clinical/Shadow/Vendor/Contract**



## **Welcome to Cullman Regional Medical Center!**

**While visiting CRMC, please feel free to ask any questions that you may have.**

**For your safety, protection, and guidance as well as for the safety and protection of our patients, guests, and employees, we ask that you read the orientation packet concerning our facility.**

**If you have any questions regarding clarification of this information, please contact the House Supervisor, Charge Nurse, or Unit Coordinator.**

**In addition, we ask that you sign the “Statement of Comprehension Sign-In” sheet.**

**Thank you for your time and assistance in this matter. We hope that you will have a pleasant experience with us.**



### **About CRMC**

Cullman Regional Medical Center is a 145-bed medical center that is owned and operated by the Health Care Authority of Cullman County. The hospital is part of an extensive medical complex built in 1995 that contains some of the newest medical equipment and technology available.

### **Mission Statement of CRMC**

#### **MISSION:**

We are dedicated to promoting wellness by providing excellent healthcare services in the most efficient manner and exceeding the expectations of those we serve.

#### **VISION:**

We aspire to be the leading community based healthcare provider in the Southeast.

#### **VALUES:**

We believe in:

- Doing the right thing for the right reason
- Valuing each patient, visitor, employee, physician, and individual we touch
- Being a wise steward of community resources
- Respecting the sanctity of human life
- Providing service with compassion.

If you would like to obtain more information about CRMC you can access our web site at: [www.crmchospital.com](http://www.crmchospital.com)

## At CRMC we use the Five Fundamentals of Patient Communication termed

### “AIDET”

#### AIDET is:

- A framework for communication:
  - ♦ The primary focus is on patients and their families.
  - ♦ It is a tool to “Manage Up” coworkers.
- It Improves clinical outcomes by:
  - ♦ Reducing anxiety.
  - ♦ Increasing the trust in caregivers.
  - ♦ Improving patient compliance.
- It enhances patient satisfaction by:
  - ♦ Demonstrating care and empathy for the patient, family and guests.
  - ♦ Improving communication.

These communication tools are used by following the steps below when taking care of patients, families and guests.

#### Acknowledging

- ✓ Make the patient believe you are sincerely glad they are there.
- ✓ Use the person's name.
- ✓ Smile.
- ✓ Show genuine interest.
- ✓ Be positive and pleasant.

#### Introduce

- ✓ Share your experience and credentials.
- ✓ Reassure the patient that she/he has made a good choice for her/his care.
- ✓ Share 2 or 3 positives about your organization.
- ✓ “Manage Up” your co-workers.

#### Duration

- ✓ Set realistic expectations.
- ✓ Tell the common wait times.
- ✓ Tell the usual procedure time.
- ✓ Explain standard turnaround times for results back to their doctor.

#### Explanation

- ✓ Ask if the patient understands the procedure or process.
- ✓ Offer information, brochure, or website for extra information.
- ✓ Give appropriate prep information.
- ✓ Manage Up your coworkers.
- ✓ Be honest about pain.

#### Thank

- ✓ Tell the patient that your organization's goal is excellent care and their satisfaction.
- ✓ Explain any follow up required.
- ✓ Thank the patient for choosing your facility and smile.

A

I

D

E

T

The basis for our Guest Excellence program can be described through the acronym:

## **"I CARE"**

**Guest Excellence: Expectations for the way we treat each other and our guests.**

**INTTEGRITY: Doing the right thing for the right reasons.**

\*As a CRMC team member we treat every guest as the most important person we will meet today.

How is integrity demonstrated? Consider this attitude:

- We are empowered and accountable to create and maintain a culture of guest excellence
- Our attitude is that every day we have an opportunity to make a difference in the lives of people
- Our attitude is one of service to all guests and team members

**I**

**CCOURTESY: Valuing each guest we touch.**

\*As a CRMC team member we treat every guest and team member as we expect to be treated.

How do we demonstrate courtesy?

- We treat every guest and team member in a courteous manner.
- We use the staff elevators only.
- We allow guests to enter doorways and elevators first.
- We park in areas designated for hospital staff.
- We keep the hallways as quiet as possible.
- We express our gratitude to every guest for choosing CRMC hospital.

**C**

**ADVOCACY: Shows support for our guests and team members.**

\*As a CRMC team member we are committed to providing a safe environment for our guests and team members.

How do we demonstrate advocacy?

- We think safety and report unsafe practices.
- We know proper infection control practices.
- We know all emergency codes and the proper actions to take.
- We know the location of the MSDS in our area.
- We know the location of the disaster preparedness manual in our area.

**A**

**RESOURCEFULNESS: Effectively meeting the needs of our guest and the CRMC team.**

\*As a CRMC team member we consider the most effective way to utilize the community resources that we have been given.

How do we demonstrate resourcefulness?

- We clock in and out appropriately.
- We are aware of the hospital resources available to guests and team members.
- We are empowered and accountable to do the right thing for the right reason.
- If we are unable to help within the scope of our responsibility, we will find someone who can.

**R**

**EXCELLENCE: Participating in activities that promote excellence for the individual, the team and CRMC.**

\*As a CRMC team member we strive for excellence in everything we do.

How do we demonstrate excellence?

- We are committed to the highest quality of care for our guests and team members.
- We know and practice the quality standards in our area of responsibility.
- We never ignore customer needs or complaints and we address these needs or find someone who can.

**E**

## **Chain of Communication**

During your time of service at CRMC, questions or concerns may arise. Please contact the supervisor or unit director of the area for which you have direct contact. If neither of these is available, you may have the operator page or call the House Supervisor (ext. 2000).

## **Patient's Rights**

In accordance with its mission and values, CRMC treats each patient as a whole, irreplaceable, unique and worthy person. Specific standards of professional and humane behavior for patient care are outlined in CRMC's brochure "Patient's Rights." This brochure is given upon admission.

## **Confidentiality/HIPAA (Health Insurance Portability and Accountability Act)**

Confidentiality of patient information must be maintained at all times! Not only is this the ethical thing to do, **it is the law**. Under HIPAA regulations that went into effect April 2003, you are required to maintain all patient confidentiality. In recognition of our patient's rights, CRMC treats patient sign-in logs, schedules, medical records and electronic information as confidential. All patients are given a "Notice of Privacy Practices" brochure and a 4 digit personal identification number. This number will be used for all inquiries regarding their status while they are in the hospital. The patient is responsible for making sure this number is given to one family member that will serve as the contact person for friends and family about the patient's status.



## **Informed Consent/Ethical Issues**

In order to provide treatment, CRMC must have the patient's consent or authorization. Both written and verbal consents are legal. It is the policy of CRMC that patients and other guests have a basic right to a level of care which protects their personal dignity and respects their culture, psych, social, and spiritual values. An Ethics Committee is available to serve in an advisory capacity for ethical issues in patient care.

## **Patient Concerns: How to be Heard**

CRMC is committed to providing quality health care and medical services in a caring, safe, and supportive environment. If you have concerns or issues there are processes in place to help you address concerns. We will respect your comments and keep this information private. Please contact a member of the patient care team or nurse manager. You may not feel comfortable contacting hospital personnel regarding your concerns. If this happens, you may call the Alabama Department of Public Health at 1-800-356-9596, the Alabama Quality Assurance Foundation at 205-977-4200, or Joint Commission on Accreditation of Health Care at 1-800-994-8610.

## **"Speak Up" and "It's Ok To Ask"**

The "Speak Up" program, sponsored by the Joint Commission on Accreditation of Healthcare Organizations, urges patients to get involved in their care. This initiative provides simple advice to patients on how to be involved in their health care. "It's Ok to Ask" is an educational program intended to help patients and families of patients to become active in their own healthcare by encouraging them to ask healthcare personnel about proper hand hygiene. This will help protect them from germs that cause infections. CRMC encourages and is proactive in both programs; patients are given the informative brochures upon admission.

## **Advance Directive**

An advance directive specifies what medical life-extending or life-saving measures will be taken in the event that a person becomes incompetent, because of an injury or advanced illness. The directive will name the person who can make such decisions and clearly state the procedures that may be forbidden. All patients (with the exception of patients with persistent vegetative state, severe dementia, or coma) should be asked if they have a living will or health care proxy. An informative brochure "Deciding about Your Health Care" is available upon request.



## **Cultural Diversity**

Culture refers to the way we live, along with our thoughts, communication, actions, customs, beliefs, values, and institutions of racial, ethnic, religious, or social groups. Competent cultural skills involve treating each patient as an individual and considering the person's culture when providing care. Avoid stereotyping. Consider other factors such as age and learn about each person's unique views on healthcare. Cultural experiences influence choices in healthcare decisions.

## **End of Life**

The staff of CRMC recognizes and acknowledges the special needs of the dying patient. Recognition and acknowledgement of care is accomplished through care that encompasses symptom management, which includes aggressive pain management and identification of spiritual and psychosocial needs unique to the dying. CRMC staff will provide comfort and dignity during end-of-life care.

## **Abuse**

Healthcare personnel are required by law to report any suspected abuse. Notify Social Worker (256-739-5185) or House Supervisor of suspected abuse. If after hours, weekend, or holidays notify the physician, nurse, or other licensed personnel.

## **Organ Donation**

CRMC will comply with Federal and Alabama Law concerning organ and tissue donation.

For more information contact the Alabama Organ Center at <http://www.uab.edu/aoc>.



## **Pain Management**

Patients will be assessed upon admission and regularly thereafter to manage their pain. The patient's cultural, spiritual, ethnic, and personal beliefs are considered in the identification and management of pain. Interventions to manage pain include analgesics, emotional support, comfort measures, and cognitive techniques.

## **Age Specific**

Planning for care, treatment, and services is individualized to meet the patient's needs and circumstances. The patient should receive education and training specific to his/her needs and as appropriate to care, treatment, and services provided and specific to the patient's ability. Age is a factor that should be considered when planning for care and education.

Infants:

- Need to feel safe and secure
- Education will be focused toward the parents when caring for the infant

Toddlers:

- Interact through play
- Education will be focused toward the parents, evolving the toddlers as needed.

School-aged children:

- Fear being hurt
- They may be anxious/worried about being in the hospital
- Listen to his/her fears/concerns.

Adolescents:

- Are in the process of defining themselves
- Illness and hospitalization can be very stressful; it may affect how they see themselves
- Actively involve them in their care
- Provide privacy as much as possible.

Adults:

- Need to retain some level of choice and control
- Involve the adult patient in education and planning of care.

Older adults:

- Fear the loss of control
- They may have physical limitations or sensory impairment
- Assess the patient and meet their needs



## **Corporate Compliance**

Cullman Regional Medical Center has a Corporate Compliance Hotline which may be used to report any suspected breach of corporate compliance. The number is 1-800-398-1496 information reported is completely anonymous. A conflict of interest would be persons that accept gifts, favors, or hospitality that might influence the decision making or actions affecting CRMC.

## **Team Building**

CRMC uses an interdisciplinary/multidisciplinary (a variety of healthcare providers) team approach. This team will work together to make decisions about patient care.

## **Policy and Procedures**

CRMC policy and procedures are available to you through the hospital computer **intranet**. Process to access:

- Go to desktop and click on Internet Explorer
- CRMC Net page appears
- Click on CRMC Manuals located to the left of the screen under documents
- In the upper right hand corner of the screen you can type in a word that relates to the policy
- Hit enter this will perform a document search.



## **Dress Code**

Each department has a dress code specific to that department. Hair should be neat and clean. When working in patient care areas a minimum of jewelry and no perfume should be worn. Fingernails should be kept to a length of ¼" or shorter. False fingernails or overlays are prohibited in patient care areas. Identification badges are to be worn at all times and be visible to the patients, visitors, physicians and other employees. Clinical/shadow students, please check with the department you will be rotating through for appropriate dress code. Employees/students shall be professional at all times.

## **Body Mechanics**

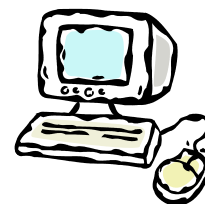
Back injuries are painful, often serious, and all too common. Pay attention to the way you sit, walk, and lift. If you do these four things carefully, you will be less likely to be injured:

1. Keep head up, chest forward, seat out, knees and hips bent, feet at shoulder length apart
2. Keep load close to body
3. Tighten stomach muscles when lifting
4. Avoid twisting body – decide on a plan before moving.



## **Computer System (CPSI)**

CRMC uses a computer system called CPSI. All orders, medical records, and documentation are electronically driven through the computer system. Each employee is given a sign-on number, and then they create an individual password. This password is not to be shared with anyone. Computers are in each of the patient's rooms, as well as at each unit desk for easy access. All patients wear armbands that have barcodes, which can be scanned to match the patient's information, with the correct medication, etc.



## **Patient Safety Goals**

CRMC is a Joint Commission accredited hospital. We abide by the Joint Commission standards of care and have implemented measures to ensure compliance. Patient safety is one of the newest quality initiatives by Joint Commission, the Centers for Medicare & Medicaid Services, AHA and other Legislative services. The purpose of the Joint Commission National Patient Safety Goals (NSPGs) is to promote specific improvements in patient safety. The requirements highlight problematic areas in health care and describe evidence and expert-based solutions to these problems.

### ***2015 National Patient Safety Goals are:***

- Identify patients correctly
- Improve staff communication
- Uses medicines safely
- Use alarms safely
- Prevent infection
- Identify patient safety risks
- Prevent mistakes in surgery



You can access more information at <http://www.jcrinc.com> or call Joint Commission with any safety concerns at 1-630-268-7400.

## **General Safety**

CRMC is dedicated to the safety, quality of care, treatment and services we provide to our patients by abiding by the Joint Commission standards. Proper identification is to be worn at all times indicating your purpose for being in the facility. Any accidents or injury while on the premises must be reported to the supervisor/director or house supervisor immediately.

## **O2 Safety Measures**

O2 cylinders are used for many clinical situations such as transport or temporary/short term use. Identified below are some safety issues:

- Always **read the label** to identify and verify the cylinder contents.
- Always make sure cylinder is securely fastened to holder /wheelchair or wall.
- Never leave a cylinder standing. Lay it on the floor if a holder/support is unavailable.
- CRMC uses walk-about cylinders; these cylinders have handles and built in regulators.
- Cylinders 500 or less are considered empty / 500 or greater are considered partial/full



The **Respiratory Department, the Safety Officer, House Supervisor, Administration on Call, Fire Department** is responsible for seeing that the oxygen supply is cut off to an area in the event of a fire.



## Utilities Management

CRMC is dependent upon the good working order of its utilities. It is essential that all utilities are in proper working condition and that staff be aware of their capabilities, limitations, and applications to ensure their safe and effective use. Each department has specific instructions to follow during a utility outage. Red outlets should be used for essential EQ only. In the event of an outage the plan is located on-line.



## Emergency Management Plan

An emergency management plan is created for each possible emergency. The plan is available on the computer at each unit. The plan includes:

- Steps to lessen the severity and impact of an emergency
- Resources identified to use during an emergency
- Process for activating the emergency management plan
- Recovery from the emergency and returning to usual activities.



## Emergency Code List

- Codes are initiated by dialing **555**.
- House Operator will announce the **type of Code** and **Location of Code**.
- House Operator will announce when the Code is **all clear**.

<b>Code Blue</b>	Called in the event a patient is found without a pulse and/or respirations. Location will be called out. The Code Team responds to a Code Blue.
<b>Code “D”</b>	Called in order to notify personnel to prepare for multiple casualties coming into the hospital. Personnel will be called to assist. Telephones and elevators should not be used unless in an emergency during this time.
<b>Code “E”</b>	“E” Elopement (Pt missing from premises)
<b>Code Tornado Watch</b>	Called when conditions are favorable for tornadoes in the immediate Cullman area.
<b>Code Tornado Warning</b>	Called when tornadoes are sighted in the immediate Cullman area. Take immediate precautions.
<b>Code Infant Security</b>	Called when an infant abduction is suspected on the premises.
<b>Code Pediatric Security</b>	Called when a pediatric abduction is suspected on the premises.
<b>Dr. Redbird</b>	Called to announce a fire or suspected fire on the premises. Location will be given.
<b>Code Silver</b>	Active Shooter ( <i>Duck and Cover</i> ).
<b>Code “R”</b>	Called when assistance is required to control a violent or abusive patient, visitor, or employee. Location <b>will</b> be given.

## Hazard Communications

The CRMC Hazard Communication Plan protects you against the dangers of chemicals and medical gases. The plan is located in the Emergency Preparedness Manual and The Exposure Control Plan in each department and can be accessed on-line.

Chemicals should be properly labeled and stored. CRMC adheres to the Occupational Safety and Health Administration (OSHA) regulations, and its policies and procedures are written to adhere to these standards. If you have any questions regarding our Hazard Communications plan, please address them with the supervisor/charge nurse or director on the unit.



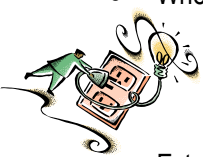
## Safety Data Sheets (SDS)

These sheets provide information that describes the hazards, possible exposure mechanisms, symptoms of exposure, and interventions to take if exposed to chemicals. The material safety data sheets are located at each unit/department and may be accessed by computer or hard copy.

## Electrical Safety/Medical Equipment Safety

When normal power is interrupted an emergency generator takes over. The generator comes on within seconds.

- When using electrical equipment watch for the following hazards:
  - Electrical cords in or near water or other liquids
  - Electrical cords that are damaged or frayed
  - Loose electrical connections
  - Loss or lack of grounding (For example, does the cord end have a broken or loose grounding prong?).
- Extension cords are **NOT** allowed.
- Equipment that is malfunctioning will be tagged, taken out of service, and reported to Bio-Med Department. The Bio-Med Department performs regular performance and preventive maintenance inspections.





## **MRI Safety**

The MRI machine is located in Diagnostic Imaging Department. This piece of equipment uses a magnetic field and attracts metal objects. For your safety and the safety of others do not enter the MRI area



## **Communication-Interpreters**

Some patients may need assistance with language barriers. CRMC provides a Translation Service through the Vocera System.

Process to access Interpreter:

- Access Vocera Unit
- Press silver button and say "Call Translation Service"
- The Vocera will place a call to Translation Services follow the prompts.
- If you do not have access to the Vocera then you can place a call at 1-800-225-5254 from a desk/regular phone.



## **Fire Safety**

Familiarize yourself with the basic hospital building; evacuation routes, emergency exits, and location of fire extinguishers. Extinguishers and fire alarm pulls should be visible and free of obstruction. Staff should be familiar with responsibilities in their areas.

When fire or smoke is first sighted or reported, the person will take immediate action in the following manner **R.A.C.E.**



- **R – Rescue**
- **A – Alarm**
- **C – Confine/Contain**
- **E – Extinguish or Evacuate**

Your responsibility during this event will be to remain with your patient. Instructions will be given to you by hospital personnel as to any further actions that you should take. Do not attempt to use the elevator or phones. Fire alarms should be unobstructed and doors should not be wedged open. Sprinkler heads should have an 18" clearance. EQ should not be left in the hall any longer than 30'. Halls should be unobstructed. Smoke/Fire doors should be able to close and latch.

In the event that you should have to use a fire extinguisher, remember to **P.A.S.S.**:

- **P - Pull the pin**
- **A - Aim the extinguisher nozzle at the base of the fire**
- **S - Squeeze the handle to activate**
- **S - Sweep the nozzle side to side**



**Facts to Know:** Authorization to evacuate patients from the floors will come from one of the following: Medical Staff President, Administrator on Call, House Supervisor, or Fire Marshall

## **Radiation Safety**

The use and presents of radiation is around us every day. It is emitted from sources within our planet, the sun and many instruments created to aid us with diagnosis and treatment of different disease processes.

As healthcare members, our responsibility is to provide protection to our patients and ourselves when medical test require the use of radioactive materials or radiation producing equipment.

Radiation protection can be summed up as Time, distance and shielding.

**TIME:** Limit the time you spend within radioactive sources. This can be holding patients or breathing for patients that require exams that utilize radiation to produce images.

- **DISTANCE:** If patient care permits, leave the immediate area or move away from the primary beam during exposure times.
- **SHIELDING:** If patient care requires you to remain close to or in the exposure area, always wear proper shielding. Wear a leaded apron and move away from the primary beam as much as possible. Radiation losses strength as it travels distances.

## **Life Safety Measures**

Life Safety program (based on Life Safety Code Standards) helps employees with safety issues during renovation and construction including:

- **Life safety management-** this protects patients, staff, visitors, and property from harm by providing for the safe use of buildings and grounds.
- **Interim life safety-** measures to ensure that areas in and near construction sites meet safety codes.

## Restraints

Restraints will be used only for the safety and well-being of the patient and only after other alternatives has been tried. Any restraint devices applied by officers of the court are not part of CRMC restraint policies

## Security

CRMC provides security personnel 24/7. You may contact them by calling from any phone **559**, Vocera, page overhead, phone # 256.595.2634, or House Supervisor. For the safety of patients, staff, physicians, and visitors, some areas of the hospital are considered high risk/security sensitive work areas.

The following areas are identified as security sensitive areas and a specific code, security card, or permission must be granted before you can enter these areas. Main entrance doors are locked after the hours of 8:00 p.m. If you have a badge you may enter through the main doors. All other visitors will have to enter the hospital through the Emergency Room door.

## Forensic Patient –Law Enforcement Personnel

A forensic patient is a patient that is in the custody of a penal institution. The patient will be accompanied by one or more officers, depending on the nature of the crime. The patient may be in handcuffs and /or leg shackles, which are managed by the officer.



## Violence Prevention

**Report incidents promptly:** to charge nurse, director or house supervisor. It is the policy of CRMC to promote maximum security and safety for patients, visitors, and employees. Violent behavior will not be tolerated at this organization. Persons (patients, visitors, volunteers, and/or employees) committing acts of violence will be reported.

**Warning signs:** threats, screaming, cursing, pacing, violent gestures, and carrying weapons.

**Prevent violence:** treat each person with respect, watch for warning signs, stay calm, and look for an escape path.

## Patient/Guest/Employee Interaction

At CRMC, we believe in valuing each patient, respecting their dignity, and providing service with compassion. It is very important that you practice these same beliefs while providing a service to our facility. To ensure safe interaction and effective communications between you, the patient, and the staff we have provided you with information that you can integrate and apply to build effective relationships.

### Verbal Intervention Tips and Techniques for Patient/Family Interaction

#### DO

Remain Calm  
Isolate the situation  
Listen  
Be aware of non-verbal's  
Be consistent

#### DON'T

Overreact  
Get in a power struggle  
Make false promises  
Fake attention  
Be threatening



### Empathic listening is the active process to discern what a person is trying to say

Be non-judgmental  
Listen to the real message

Give undivided attention  
Allow silence for reflection

Restate to clarify information

It is important that you remain in control of your own behavior. The behavior and attitudes of the staff impact the behaviors and attitudes of those in their care.

## Color Coded Wristbands

CRMC participates in same colors for “medical alert” wristbands, as a safety initiative of the hospitals in Alabama and sanctioned by the Alabama Hospital Association. In an effort to reduce the risk of potential for confusion associated with the use of color-coded wristbands. The same colors will be used for:

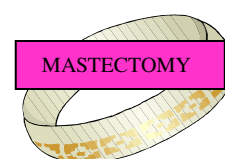
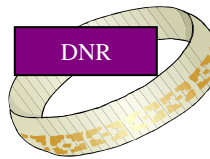
**ALLERGY ALERT** will be **RED**

**FALL RISK** will be **YELLOW**

**DNR** (Do not resuscitate) will be **PURPLE**

**MASTECTOMY ALERT** will be **PINK**

**BLOOD BANK Armband** will be **Green** it will have a place for the Patient Name, MR#, Date, Time and Identification number



FEF 4249	PT:	Date:	FEF 4249	FEF 4249	FEF 4249	FEF 4249	FEF 4249
	MR#:	Time: PB:					

## Medication Safety

As a student I am **NOT** allowed to dispense /administer medication in any form without the supervision of a licensed CRMC employee or a licensed clinical instructor from the college I am attending. I understand that dispensing medications while unsupervised as a student is practicing without a license. I understand that if I dispense/administer medications while unsupervised this will result in my privileges as a student at CRMC being revoked.

The “**Five Medication Rights**” will be used:

- **The Right Patient** -Always use **TWO** patient identifiers **NAME and DATE OF BIRTH** verbalized by patient to you and compared to the patient identification armband.
- **The Right Medication**- Is this corrects medication for the patient, is there an allergy listed for this medication or contraindicated.
- **The Right Dose**- Is this the correct dosage for this patient.
- **The Right Time**- Is this the correct time for medication to be given. What time of day should the medication be taken? What about food? Should it taken before a meal, with a meal, after a meal, or with a snack?
- **The Right Route**- How the medication should be administered? Oral, IM, Sub Q, IV, Sublingual, Skin Patch. Is it to be swallowed or chewed? Can it be crushed if necessary? Take with a sip of water or a full glass? Does it come in liquid form?



**\*\*Medication errors are all too often the result of carelessness. Taking and giving medications is an act that needs to be done carefully and taken quite seriously. All efforts need to be made to avoid errors.**

## Fall Prevention

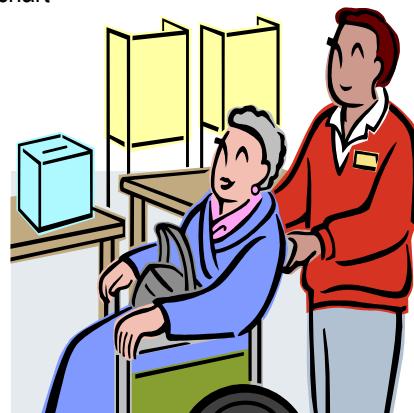
Falls happen in every department. Therefore interventions and prevention measures require a multifaceted (interdisciplinary) approach. Halls and stairwells should be free of clutter. A visual check for any slip, trip, or fall hazards should be done.

Appropriate safety measures will be taken, and any potential fall risks should be reported to supervisor of that area.

CRMC has a policy to recognize patients identified on admission as high risk for falls or injuries these patients are assessed on admission, every shift, after a change in level of care, and after any fall using the Morse Fall Scale. Education is given on admission to the patient and/or family regarding falls with the Fall Prevention Sheet. All education is to be documented in the Education section of the chart. If a patient scores a “Moderate” or “High” risk range fall precautions will be added to the chart. A yellow “**Fall**” sticker will be placed on the patient census board at the front desk. The charge nurse will check with the primary nurse and the PCA each shift to ensure that all Fall Prevention Interventions are being followed. Documentation of fall interventions shall be done every 2 hours.

### Fall Prevention Interventions:

- Patient/Family Education ongoing throughout shift with documentation placed in chart
- Fall prevention patient education signs posted in every room at foot of bed
- Yellow Dot Protocol
- Yellow Arm Band
- Yellow Socks with slipper skids on top/bottom or nonskid footwear
- Bed Alert System
- Assistance with ambulation and personal needs at all times
- Verbal handoff report to other departments
- Patient should never be left alone when in a wheelchair
- Call light and phone within reach
- Bed in low position and wheels locked
- Pathway clutter free
- Debilitated patients are not to get dressed without staff member in the room
- Bedside commode should not be left at bedside
- Side rails up x\_\_
- Rounding with 4 “Ps” Q 1 hour
  1. Pain
  2. Potty
  3. Position
  4. Possessions



## Pneumatic Tube System

Specimens should be correctly labeled and placed in a “red bag” (biohazard). If the item for Lab does not fit in carrier correctly it must be delivered by hand to the Lab. Blood products i.e. transfusion must be picked up at Lab. Medication should be delivered in a “green bag” there may be exceptions i.e. 1 liter bags. Narcotic medication will not be delivered in the tube system.

## Infection Control/Blood-Borne Pathogen

The Infection Control Program maintains an effective hospital-wide system for the surveillance, prevention and control of infections at this hospital. The goal is to protect the patient, healthcare worker, visitors, and others in the healthcare environment. The program provides guidance to the hospital personnel by establishing guidelines in addition to providing educational information to prevent transmission of infection to patients, visitors, and hospital personnel.

If a patient is on isolation precautions, a sign will be posted on the patient's door. **Never enter a room occupied by an isolation patient** without first consulting with a nurse. If you must enter the room, follow any infection control precautions posted and instructions from the nurse.

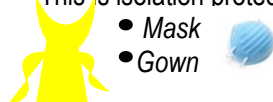
Transmission Precautions include:

1. **Airborne Precautions- sign color “Blue/Yellow”**
2. **Droplet Precautions- sign color “green/Yellow”**
3. **Contact Precautions- sign color “Orange/Yellow”**
4. **Enteric Contact Precautions-(i.e. C-Diff) sign color “Brown/Yellow”**
5. **Strict Contact Precautions-“Purple/yellow”**



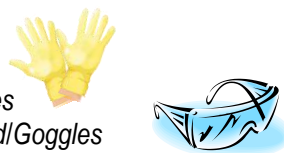
## Personal Protective Equipment

This is isolation protection equipment and consists of:



- Mask
- Gown

- Gloves
- Shield/Goggles



**Hand washing is the number one defense against the spread of infection. Wash hands before and after seeing each patient!!!**

If it is “wet” consider it contaminated. Be aware of Biohazard signs that denote contaminated items.

All patient care areas have alcohol-based hand cleaners that may be used in addition to handwashing and in place of handwashing as appropriate.

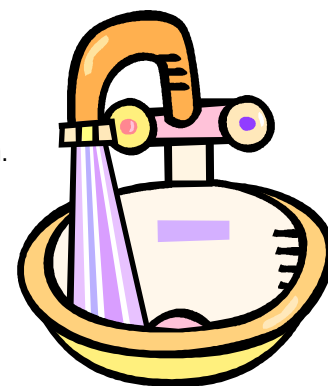
Proper Handwashing Technique:

- Be sure to stand far enough away from the sink to prevent touching it and contaminating uniform or clothing
- Turn on water and adjust temperature (warm water) and water flow. Wet hands thoroughly.
- Dispense soap
- Rub hands for minimum of 15 seconds. Wash all skin surfaces: especially the backs of hands, wrists, between fingers and under fingernails. (Limit jewelry! Be sure sleeves are not getting wet, touching sink, etc.).
- Rinse well with warm water-be careful not to touch the sink.
- Keep hands pointed down during washing and rinsing.
- Dry hands with paper towel. Begin at the wrist and wipe toward your fingertips.
- Leave water running.
- Use paper towel to turn off the water faucet.
- Dispose of towel without touching waste container.
- Use hospital approved hand lotion to prevent chapping. Germs love to hide in chapped skin.

Handwashing should be preformed:

- When starting your shift
- Before eating/after eating
- When cleaning spills
- When entering a patients room and having patient contact and when leaving
- After using the restroom
- After coughing or sneezing or blowing nose
- When coming off your shift

Sharps containers should not be over  $\frac{3}{4}$  full



**CRMC adheres to OSHA Standards and the Center for Disease Control Standards (CDC)**