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Introduction

Purpose
This orientation packet contains the information you need to have a safe and healthful experience while working at Orlando Health. Bloodborne Pathogen training is included in the Infection Control & Transmission Based Precautions section. Additional in-service training may be required for your specific work locations. This packet meets regulatory requirements for our organization. It is important that you read each section carefully and understand the information presented to you. If you have any questions, please refer to the information provided or speak with your instructor.

Instructions
1. Complete all the following on the answer sheet:
   ✓ Name
   ✓ Department Name or School Name
   ✓ Today’s Date
   ✓ Title of Program/Packet (Regulatory Education)

2. Read the entire self-learning packet.
3. Answer the post-test questions on the answer sheet provided.
4. Return the answer sheet and this orientation packet to your instructor or to Education & Development Department (only if instructed).
About Us

Orlando Health is a $2.1 billion not-for-profit healthcare organization and a community-based network of physician practices, hospitals, and outpatient care centers throughout Central Florida. The organization is home to the area’s only Level One Trauma Centers for adults and pediatrics and is a statutory teaching hospital system that offers both specialty and community hospitals. Nearly 3,000 physicians have privileges at Orlando Health, which is also one of the area’s largest employers with more than 15,000 employees who serve nearly 2 million Central Florida residents and more than 4,500 international patients annually. Additionally, Orlando Health provides more than $270 million in support of community health needs.

Our Mission, Vision & Values

Orlando Health will continue to grow and change to meet the needs of our patients today and in the future. YOU are an essential part of that future. When building something new, it is important to have a solid foundation. At Orlando Health, this foundation has three parts: Mission, Vision & Values.

Our Mission
To improve the health and quality of life of the individuals and communities we serve. Achieving our mission is always a work in progress. It requires that we grow and change.

Our Vision
A trusted leader inspiring hope through the advancement of health.

Our Values
People, quality & community. This is what matters most to us; they are the things that do NOT change. When faced with choices, our values direct our actions.
### Our Promise

<table>
<thead>
<tr>
<th><strong>P</strong>ositive <strong>A</strong>ttitude</th>
</tr>
</thead>
<tbody>
<tr>
<td>We promise to demonstrate a Positive Attitude every day, because we believe that caring for our patients is an honor.</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th><strong>R</strong>espect</th>
</tr>
</thead>
<tbody>
<tr>
<td>We promise to treat all of our patients, visitors and fellow caregivers with compassion, dignity and Respect.</td>
</tr>
</tbody>
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<table>
<thead>
<tr>
<th><strong>O</strong>wnership</th>
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</thead>
<tbody>
<tr>
<td>We promise to take Ownership in creating a positive experience for every patient.</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>M</strong>indfulness</th>
</tr>
</thead>
<tbody>
<tr>
<td>We promise to be Mindful of our actions, providing safe, quality care focused on the unique needs of each patient.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>I</strong>nclusiveness</th>
</tr>
</thead>
<tbody>
<tr>
<td>We promise to be Inclusive when caring for our patients by appreciating and valuing everyone and their individual opinions and ideas about their healthcare needs.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>S</strong>uperior <strong>C</strong>ommunication</th>
</tr>
</thead>
<tbody>
<tr>
<td>We promise to provide Superior Communication when caring for patients by keeping everyone informed about and involved in their care plan.</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th><strong>E</strong>xceed <strong>E</strong>xpectations</th>
</tr>
</thead>
<tbody>
<tr>
<td>We promise to do everything we can to Exceed Expectations of each patient and guest, by going above and beyond in anticipating needs and providing exceptional care.</td>
</tr>
</tbody>
</table>
Our Strategic Imperatives
To align with the mission & vision, we set strategic goals. These goals are ways that Orlando Health can improve and make our system better.

1- **Physician Alignment**: Develop a robust network of primary care physicians that have similar quality and cost measures as Orlando Health Inpatient. To achieve this goal, Orlando Health will expand its Clinically Integrated Network (CIN) in strategic market areas to a targeted group of high quality, low cost primary care physicians.

2- **Value-Based Care**: Orlando Health will pursue value-based care models where a focus is on improving the health of a defined population by managing outcomes and lowering overall costs. The organization will evaluate and monitor results from new value-based payer partnerships with a focus on care coordination across the continuum, resource utilization, patient outcomes and management of financial outcomes under risk-based payments.

3- **Service Line Growth**: In a highly competitive market, OH must continue to focus on targeted profitable service line growth. Future service line strategies will be driven by strategic programs that will provide OHI with a differentiated market advantage and will address access, quality, cost and the need for sustainable business results.

4- **Operational Effectiveness**: Sustaining our new culture of discipline, process improvements and efficiencies. Orlando Health will continue to focus on cost reduction efforts and operational efficiencies in order to align expenses to the current market realities without compromising access to care or patient satisfaction.

8
5- **Focus on Quality**: Providing the right care at the right time to 100% of our patients, with top 10% satisfaction scores. Orlando Health will provide patients with the highest level of excellent, safe care with demonstrated clinical outcomes. Care will be delivered with all possible efficiencies with a focus on recognition-worthy clinical.

6- **Outpatient Development**: Outcomes and industry leading patient satisfaction. As health services continue to shift from inpatient to outpatient care, Orlando Health Inpatient must establish ambulatory infrastructure as a strategic priority. To be competitive in the market, a system wide approach must be launched to capture market share in new geographic areas, lower costs, bring services closer to insured patients and add additional sources of revenue.

**Population Health Management**

**Population Health** is a term used to describe the future of healthcare. The focus is to improve the health of populations by encouraging healthier lifestyles. Population health management is critical to our success in delivering the highest quality care across the entire care continuum.

We will be coordinating care before our patients are in our hospitals, during and after.

**Care Coordination Process**
The care coordination process will involve all of our care teams in:

1. Improving the effectiveness of chronic disease management
2. Improving access to care
3. Promoting wellness and preventive services that improve quality of life

**Care Coordination Initiatives**

- Communicating with patients more accurately about their expectations on wait/stay times and discharge times.
- Implementing the Rapid Assessment Care Environment Program or RACE Track.
- Adding new role of Navigator in the Emergency Departments.
- Eliminating the concept of the “waiting room”.
- Establishing the Logistics Call Center.
Security

Security is a shared responsibility. Our patients and visitors need to know that our hospitals, clinics and other areas are protected so they can feel safe while at an Orlando Health facility. You need to feel that you and your belongings are safe and protected here so that you can focus on your work. Security officers are focused on creating a safe environment at Orlando Health, but it does not stop there. Just like patient care, you share responsibility to protect our patients, each other and corporate property.

Contacting Security
Security can be contacted at the following phone numbers. Note the numbers vary according to the campus:

<table>
<thead>
<tr>
<th>Location</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Any hospital building:</td>
<td>4321</td>
</tr>
<tr>
<td>Any non-hospital building:</td>
<td>321.841.5600</td>
</tr>
<tr>
<td>Non-hospital buildings (for emergency response):</td>
<td>911 (Police Dept.) – may need to dial 9 first to get outside line</td>
</tr>
</tbody>
</table>

Additionally, security officers can be found in designated permanent locations inside hospital facilities.

When to Call Security
You should initiate a call for assistance if:
- You observe a suspicious activity or persons on or near hospital property.
- You see property damage or if you suspect that something has been stolen.
- You observe suspicious packages anywhere on campus.
- You need an escort to your car.

How to Prevent Incidents
- Lock your vehicle and keep all valuables (especially phones) out of sight.
- Obey posted speed limits; in parking garages, the speed limit is 9 miles per hour.
- Watch out for pedestrians when driving around campus or in parking garages.
- When in doubt, call Security.
- Lock all doors and windows to your work area when not in use.
- Computers and other technology must be kept secure and behind locked doors when not in use.
- Report faulty locks and lighting outages to Engineering immediately.
- Leave valuables such as jewelry, cash and credit cards at home.
Counsel patients to send valuables home with relatives.

Never prop open facility doors or obstruct their smooth closure.

Safeguard hospital keys as you would your own house keys.

Ask questions of unidentified persons, who enter into your work area, especially if they ignore you, act suspicious, attempt to remove equipment or seem unsure of themselves.

**Your ID Badge**

The primary purpose of your ID badge is to identify you as a team member, student, contractor, etc. It also authorizes access to your work areas.

Your badge must be visible and above the waist at all times when you are in an Orlando Health facility.

**Caring for Your ID Badge**

To keep your badge working, take the following steps.

- Keep the badge intact – don’t make holes in your badge with pins or punches.
- Clean your badge with soap and water – never use solvents like alcohol or acetone.
- Protect your badge from heat and sunlight – don’t leave your badge in a hot car.

If you lose your badge, contact Security immediately. Arrangements can be made to replace it.

If you need to change information on your badge (e.g. transfer to a new department), then you will need to bring your badge and a copy of your transfer paperwork to the Badge Room.

If your badge stops working, bring it to the Badge Room for repair or replacement.

For team members off the downtown campus, take your badge to Security.

**Parking**

You must register your vehicle with Security. They will give you a parking decal that must be **permanently affixed** to the windshield of your vehicle. You will need to enter your vehicle registration information online using SWIFT before a decal can be issued.

Motorcycles must be registered, but owners do NOT have to obtain a parking decal as long as they park in motorcycle designated parking.

**Assist Visitors:** Visitors are everywhere, and they often need our help.

Ways you can help include:

- Watch for visitors who seem to be lost.
- Help visitors find their destination, guest parking areas and waiting areas.
If you observe a fire in an Orlando Health facility, no matter how small it may appear, act quickly using the following R.A.A.C.E. procedures.

<table>
<thead>
<tr>
<th>Remove</th>
<th>Remove guests, visitors, patients, co-workers and yourself from immediate area of the fire/smoke.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alarm</td>
<td>Activate the alarm by pulling the nearest pull station.</td>
</tr>
<tr>
<td></td>
<td>• Bells &amp; strobe lights are activated</td>
</tr>
<tr>
<td></td>
<td>• Some air handlers are shut down</td>
</tr>
<tr>
<td></td>
<td>• Some smoke compartment doors close</td>
</tr>
<tr>
<td></td>
<td>• The Fire Department is alerted</td>
</tr>
<tr>
<td>Alert</td>
<td>Call out “CODE RED” to alert nearby team member(s) to assist.</td>
</tr>
<tr>
<td></td>
<td>Call the emergency operator number (for hospital buildings) or 911 (for non-hospital buildings) to report the Code Red.</td>
</tr>
<tr>
<td>Confine</td>
<td>Close all doors in the affected area. Clear all items from hallways.</td>
</tr>
<tr>
<td>Extinguish (Hospital Building)</td>
<td>If safe to do so, extinguish the fire by using PASS (Pull, Aim, Squeeze, Sweep) from a safe distance and always leave yourself a way to escape. NEVER turn your back on a fire.</td>
</tr>
<tr>
<td>Evacuate (Non-Hospital Building)</td>
<td>Evacuate the building and meet at your assembly point. Conduct a head count to ensure everyone is out of the building.</td>
</tr>
</tbody>
</table>
Extinguishing a Fire
There are many types of fires; and at Orlando Health we use different types of extinguishers to help ensure your safety. Remember, if you know where the fire extinguishers are located in your work area, you have a better chance of preventing a small fire from becoming a big one.
For your safety and the safety of everyone around you, you need to know how to use an extinguisher. Remember, only use an extinguisher if it is safe to do so, and you have a means of escape.

<table>
<thead>
<tr>
<th>ABC extinguisher:</th>
<th>CO2 extinguisher:</th>
<th>MRI Safe extinguisher:</th>
<th>K-extinguisher:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Most commonly seen at Orlando Health; safe to use on combustibles, flammable material or electrical fires.</td>
<td>Uses CO2 to extinguish the fire; and are used in surgical suites, since they leave no residue.</td>
<td>A non-ferrous ABC extinguisher is safe to be used in the MRI room.</td>
<td>Specifically found in commercial kitchens and are designed for grease fires.</td>
</tr>
</tbody>
</table>

How to Use a Fire Extinguisher
For your safety and the safety of everyone around you, you need to know how to use an extinguisher.

<table>
<thead>
<tr>
<th>Pull</th>
<th>Aim</th>
<th>Squeeze</th>
<th>Sweep</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pull the pin out. Do not squeeze the handles yet or the pin will not come out</td>
<td>Aim the nozzle at the base of the fire.</td>
<td>Squeeze the handles together to release the contents.</td>
<td>Sweep from side to side. Continue to aim at the base of the fire</td>
</tr>
</tbody>
</table>

Remember Only use an extinguisher if it is safe to do so and you have a means of escape.
Fire Prevention – The Key to Fire Safety

Preventing fires is just as important as knowing what to do in case there is one. Each of us is responsible for practicing good fire safety. The lives of our patients, visitors and team members may depend on your alertness and the ability to act accordingly. Here are some ways we can work safely to ensure we prevent a fire from starting.

<table>
<thead>
<tr>
<th>All Orlando Health campuses are tobacco-free. A tobacco-free campus means the use of all tobacco products is prohibited on or in all facilities used by Orlando Health. This includes parking areas or parking lots and garages.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Only warm food or drink in a microwave. Always stay nearby when the microwave is running. Never leave a microwave unattended.</td>
</tr>
<tr>
<td>Do not interfere with the normal operation of the fire doors. The use of wedges or other items to prop fire doors open is prohibited. Hallway doors may be kept open only with the proper electrical magnetic device that is connected to the facility’s fire alarm system.</td>
</tr>
<tr>
<td>Be sure all non-clinical electric equipment requiring an electrical inspection has a sticker to show the inspection was completed</td>
</tr>
</tbody>
</table>

Fires always pose the danger of injury, death and property damage. Orlando Health facilities have different fire protection systems working together to identify and suppress fires when they occur. These include heat smoke detectors, sprinkler systems, fire smoke compartments, fire extinguishers, pull stations and alarm systems.

In the event of a fire, remember above all else to remain calm. Panic poses the greatest danger in any fire situation. If you panic, others are likely to react the same way. Also, avoid using the word “fire” instead refer to the situation as “Code Red.”

Our safety regulations have been established for the protection of everyone. Any violation of these safety standards will be handled in accordance with Orlando Health’s disciplinary procedures.

**Remember** Safety is everyone’s responsibility!

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**General Safety**

By working safely and providing a safe environment for all, we can help reduce injuries so we are able to perform our regular duties, provide quality care and reduce harm. This section outlines safe work practices so we can ensure our safety and the safety of those around us.

**Safety in the Office Setting**

- Never try to open more than one drawer of a filing cabinet at once. Having more than one drawer open at the same time can cause the cabinet to tip over.
- Close drawers when not in use.
- Use caution when using or refilling staplers. Use a staple remover to remove staples.
- Lighting is important—report burned-out bulbs to **Engineering** immediately.

**Positioning at the Computer**

Poor positioning while using a computer is another source of workplace injuries. You can prevent injuries by following these guidelines:

- Hands, wrists and forearms are straight as possible, not bent up or down or left or right.
- Head is facing forward.
- Eye level is near the top of the monitor.
- Shoulders are relaxed and upper arms hang normally at the side of the body.
- Feet are supported by the floor or foot rest.
- Lower back is supported by chair.
- Thighs and hips are supported by seat and generally aligned to the floor.
- Take a stretch break at least once an hour.
- To minimize eye strain, follow the 20-20-20 rule.

**REMEMBER** **Every 20 minutes look 20 feet away for 20 seconds**

More information about proper positioning to avoid injury is available from Outpatient Rehabilitation at 407.841.6888.
Safety Lifting

1. Assess if you can safely lift the object
2. If the object is too heavy, get help or use an assistive device (like a dolly).
3. When you carry objects, make sure you can see where you are going and that your path of travel is clear.

Improper lifting can cause:

- Unnecessary pain
- Loss of time at work
- Compromised safety of your patient, yourself and co-workers.

Lifting techniques

- Get as close to the object as you can
- Position your feet shoulder width apart
- Bend at your knees
- Keep your back straight
- Get a firm grip on the object with your palm and fingers
- Lift with your legs, not your back, to stand up
- Once standing, hold the object close to your body at waist level
- If you must turn, move your feet to turn your body and avoid twisting
- Set object down in a smooth movement using your legs and not your back

Orlando Health is committed to taking all the necessary steps to eliminate team member, patient and visitor exposure to accidental injury or to unsafe conditions. As part of that commitment, please review the following points to help you, other team members and our patients.
Preventing Hazards

- Report all team member injuries by completing a Team Member Injury Report Form. If there is an injury to a visitor or volunteer, an Event Report Form must be completed. Report all injuries to your supervisor immediately.
- Report unsafe conditions or hazards to the supervisor, Corporate Safety or appropriate departments. These include, but are not limited to, spilled liquids on the floor, broken equipment, and torn carpet or damaged electrical cords.
- All passageways must be kept clear of tripping hazards, such as wastebaskets, electrical cords, open drawers, etc.
- Avoid elevator injuries by not rushing into a closing elevator or sticking your hand or body through a closing space.
- Avoid cuts and puncture wounds by handling sharp objects carefully and disposing of them in the proper containers.
- Wear proper clothing for the job at hand. Use safety equipment, such as respiratory protection, gloves, eye protection and earplugs, when needed.
- Keep your work and storage areas clean and organized. Housekeeping is the responsibility of everyone.
- All Orlando Health buildings and campuses are tobacco free. Smoking is not permitted anywhere on campus by team members, guests or patients.
- Flammable liquids must be stored in the following manner:
  - In original container or approved safety container with closed lid
  - In a safety cabinet away from heat
  - In an area that contains a sprinkler system

Mobile Radio Frequency Equipment

Over the past years, we have noticed a new problem occurring in acute care facilities with radio frequency (RF) transmitting devices, which have the potential to interfere with equipment used in the hospital, such as ventilators (to assist breathing), apnea monitors (to observe breathing) and other medical equipment. Maintaining a distance of at least ten feet from any electronic medical equipment is necessary to reduce occurrences of interference. RF transmitters include, but are not limited to:
- Cell phones
- Two-way radios
- Interactive pagers
- Wireless digital assistants (e.g. palm pilots)
- Web-connected iPods or netbooks
Hazardous Material Safety

The Orlando Health policy on hazardous material safety has been established to provide guidelines for the safe use, storage and disposal of hazardous materials used in the work environment. You are responsible for knowing how to handle, use, store, transport and dispose of hazardous materials. Safety Data Sheets (SDS) are available online on the intranet. To access them on SWIFT, click the Safety tab, then the yellow SDS binder graphic. You can search by using the product name or location (must have IE8 or newer to view appropriately).

Types of Hazardous Materials

Throughout Orlando Health, many chemicals are used in both patient-care and support areas. Some chemicals are harmless; others are:
- Corrosive (damages tissue on contact)
- Explosive
- Flammable (catches fire easily)
- Radioactive
- Reactive (burns, explodes, or releases toxic vapors when exposed to another incompatible chemical, air, or water)
- Toxic (causes physical illness or death)

Hazardous materials come in all forms: solids, liquids and gases. Some examples include:
- Cleaning agents, such as floor polishes, bleach, window cleaner, etc.
- Oils, paint thinner, welding gases, portable torches, solder, resin, fuel
- Radioactive isotopes, x-rays, film-processing chemicals, anesthetic gases, other gases under pressure, disinfectants and drugs
- Raw chemicals such as alcohol, ether, acids, alkalis, formalin, paraffin, xylene
- Mercury

Recognizing Hazards

Orlando Health is required to provide team members with information about hazards associated with materials in their work areas. The SDS identifies a chemical, why it is hazardous and how to safely work with it. It also details the proper PPE and how to dispose of the chemical.

If you recognize a spill or release, remove yourself and others from the immediate area. Isolate the area and warn others. Refer to the SDS for first aid. If the spill is greater than a gallon report a Code Orange via phone.

It is the responsibility of everyone including agency team members to know how to recognize hazardous materials and (if job duties require) how to use and dispose of them.
Reading Labels
Product labels and package inserts provide much of the information needed for the safe use and disposal of hazardous materials. Remember to read the label carefully before using any hazardous material. If you find a container that has no label or a container in which the label is unreadable, notify your supervisor and the Safety Department immediately. Do not attempt to use or discard any product that has no label or an unreadable label.

Physical Effects of Hazardous Materials
Physical harm caused by hazardous materials is usually the result of careless handling. Hazardous materials can cause serious and long-term health problems if not handled properly. Acute effects usually happen fast. Chronic effects happen over a period of time.
There are three routes a chemical can enter the body:
- Skin contact (it passes through the skin, eyes or other membrane, or enters through a puncture, such as a needlestick)
- Inhalation (we breathe it in)
- Ingestion (we eat or drink it)

Tips for Safe Handling of Hazardous Materials
1. Be sure you know and understand the specific health and safety hazards of the chemicals with which you work and follow the recommended safety precautions.
2. Use barrier protection as appropriate:
   - Gloves to handle, pour or clean up spills
   - Lab coat or apron to protect skin and clothes
   - Face shields and goggles to protect eyes and mucous membranes
3. Do not mix chemicals.
4. Do not store chemicals in an unmarked container.
5. Store hazardous materials properly. Do not store incompatible materials on the same shelf.
6. Dispose of the materials properly. Refer to SDS for complete instructions or contact the Safety Department.
7. Always follow warning signs posted in the areas in which hazardous materials are located and used.

Procedures for Spills or Leaks
Universal Spill Kits are located at each Orlando Health facility; consult your supervisor.
In the event of a small spill (less than one gallon):
When minor spills occur, it is the responsibility of the department involved to clean the spill.
Immediately treat any physical injury. If you are exposed to a chemical, immediately wash the area with water (refer to SDS). Follow up with appropriate medical care as directed by your supervisor and complete an Initial Report of Employee Injury form.

1. If you encounter an area with an unusual smell, if your eyes begin to water or if breathing becomes difficult, leave at once and notify your supervisor and the Safety Department.

2. Refer to SDS and follow the directions to clean up the spill. Be sure to wear the appropriate Personal Protective Equipment (PPE).

3. Limit access to personnel responding to clean the spill.

4. Immediately following the incident, complete a Spill Response Critique form and submit to your Site Safety Council Chairperson.

5. Contact the Corporate Safety Office to make arrangements for pick-up and disposal of the spill waste material.

**In the event of a large spill (greater than one gallon) – Code Orange**

If a major spill of a hazardous chemical occurs and poses a life safety risk, follow steps outlined in How to Report an Emergency by Telephone:

1. Evacuate and secure the immediate area.

2. Treat any contaminated individuals.


4. If you are exposed, complete an Initial Report of Employee Injury form.

5. Immediately following the incident, complete a Spill Response Critique Form and submit to Site Safety Council Chairperson.

6. Contact the Corporate Safety Office to make arrangements for pick-up and disposal of the spill waste material.

**Decontamination Procedures**

People contaminated or exposed to chemicals could approach any team member at any time. If this happens, talk to them from a safe distance and do not touch them. The emphasis is to remove them to an isolated area, away from others. Immediately notify the hospital/facility operator and initiate decontamination procedures. Trained decontamination personnel are available at each hospital facility.
Biohazardous Waste

Sharps
One of the most hazardous items in the hospital is the needle that has been used for injections, drawing blood or starting IVs. All sharps contaminated with body fluids are a danger to healthcare workers. Scalpel blades, glass slides, lancets, blood tubes, needles and other sharp items that have touched body fluids must be discarded in special sharps containers. Even clean, unused needles and blades must be placed in these containers to prevent injuries. Sharps containers are removed and replaced when they are 3/4 full to avoid overfilling and subsequent injury.

Vertical drop sharps container

At Orlando Health where safety devices are available, their use is mandatory. Failure to use safety devices can initiate a written counseling. A list of current safety devices can be found in the Bloodborne Pathogens Exposure Control Plan in the Patient Care Policies. Orlando Health reviews current safety devices annually and whenever they are associated with increased injury. Here are some guidelines for safe needle disposal:

- Always activate the safety device before disposal.
- Always place sharps in appropriate container immediately after use.
- Use the one-hand, one-step technique.
- Always look to ensure sharp has dropped.
- Place only items that will fit into the container.
- Do not use the container for trocars, wires, etc.
- Do not place dressings, tape, tubing, etc., into the container.
- Know where the key is on your unit in case you need to exchange a full, closed box for a new one.
- Never overfill a sharps container. Check the fill line on the front of the container.

In addition to the above, for sharps containers with a vertical drop opening, follow these safety rules:
- Hold sharp vertically and drop into opening.
- Never reach into opening with hand.
Liquid Waste
Disposable suction canisters containing liquid waste (e.g. n/g tube drainage, chest tube drainage) are NOT emptied into toilets or hoppers because of the risk of splashing; instead, they are sealed tightly and placed in special receptacles in the soiled utility room for disposal.

Solid Waste
Make sure that only biohazardous trash is placed in red bags. Orlando Health pays for disposal of biohazardous "red-bagged" trash by the pound! If the outside of the red bag is contaminated or torn, it must be placed in a second red bag. Red bags are never to be put down the chute or handled in a rough manner. Know the pick-up site in your work location.

Waste Disposal
Waste must be disposed of in the proper containers to protect the people who must handle the waste and the environment. Orlando Health uses four different types of waste containers.

Biohazardous Waste: Red bags are used for disposables that are soiled with blood or body fluids that contain visible blood:
- Laboratory waste containing human disease-causing agents.
- Absorbent material like bandages, sponges or gauze that are saturated with blood or bloody body fluids and drip if compressed.
- Any non-absorbent item that contains visible blood.

Pharmaceutical Waste (Hospital):
2 Gallon: Sharps with medication, syringes (with/without needles), and ampoules.
8 Gallon: Non-sharp items containing partially used medication and chemotherapy drugs in sealed containers; vials, bottles, creams, ointments, IV bags, tubing, pills, contrast solutions.
DO NOT dispose of DEA controlled substances in this container. They must be witness-wasted.

Pharmaceutical Waste (Non-hospital)
2 Gallon & 12 Gallon: Both sized containers can be used for all items listed above.

Trace Chemotherapy Waste:
Yellow containers are used ONLY for waste contaminated with traces (a drop or two) of chemotherapy drugs (e.g. empty IV tubing used to administer chemotherapy, protective clothing such as: gowns, gloves worn during preparation/handling/administration of chemotherapy drugs).
Regular Trash: Waste that does not match the above descriptions is disposed of in the regular trash.

Linen
All soiled linen is treated as biohazardous and discarded in a covered linen hamper at the point of use. **Never discard linen in a red bag/container, even if it has blood on it!** Make sure sharps are removed from linen prior to disposal. Do not shake linen or carry it close to your body.

Spills
Any spills of body substances must be cleaned up promptly. Liquid spills are absorbed with paper towels, then the area is cleaned with an approved hospital disinfectant. Personnel cleaning the spill must wear gloves and other protective equipment as needed. If broken glass or other sharps are involved, do not pick up these items with your hands. They must be picked up using an instrument or brush and dust pan (items used to aid in cleaning up the spill that cannot be cleaned and disinfected shall be disposed of as bio-hazardous waste). Be sure to dispose of the waste properly: saturated absorbent material in red bags, glass or other sharps in the sharps container. If the spill is large or involves splashes to walls, beds or equipment, cover as much of the spill as you can with towels and call Environmental Services.

Radiation Safety
 Radiation can be harmful if proper precautions are not followed. At Orlando Health, everything possible is done to reduce radiation exposure for all team members and patients. There are policies and procedures for handling radiation based on the **ALARA** (As Low As Reasonably Achievable) principle. Most radiology equipment only poses a danger when the machine is in use. Rooms containing this type of equipment have signs above the door to alert you when it is safe to enter.

**If the sign is lit (example to the left), stay out!**

**If the sign is not lit (example to the left), knock and ask if it is okay to enter.**

The best ways to reduce exposure to radiation are **time**, **distance** and **shielding**. Spend as little time as possible in any radiation area. The further away you are from radiation the less exposure you will receive. As long as you are six (6) feet or more away from the machine, you are safe. When indicated, wear lead aprons and stand behind shielded barriers/walls to reduce the amount of radiation exposure.
Portable x-ray machines travel all over the hospital. Here is how to stay safe. Before you enter a room, look to see if portable x-ray equipment is in use. A portable x-ray machine is shown in the picture to the right.

Portable x-ray machines only pose a danger when the technician is making an x-ray film. Before this happens, the technician will loudly call out “X-RAY.”

There are three types of radiation signs used at Orlando Health. They denote the use of radiation in restricted areas.

These caution signs are for your safety, and protect you from exposure to radiation. If you have any questions, before entering, you should call the department who posted the sign: Nuclear Medicine, Radiology or Radiation Oncology. Each department will be able to advise you on what is appropriate and safe.

**MRI Safety**

Magnetic Resonance Imaging (MRI) is a specialized diagnostic test. The MRI equipment uses very powerful magnets that produce strong magnetic fields. The magnetic field of the MRI is always on, even if the machine is not in use. **Before entering the MRI room,** every patient and every team member must be personally screened by the MRI technologist. The screening helps keep you and our patients safe. Many people have internal devices that could be affected by the magnetic field. Items such as aneurysm clips, stimulators, pacemakers and stents could cause serious injury or even death if they were affected by the magnet.

Orlando Health has created MRI safety zones to ensure everyone’s safety in an MRI area:

| Zone 1: General public access | Zone 2: Patient holding screening area | Zone 3: Access only when accompanied by MRI personnel. This is the area where any MRI unsafe items are removed and secured. | Zone 4: Entry only when accompanied by an MRI Technologist. |
MRI items brought into the MRI scan room can cause serious injury or death. If an object has a magnetic attraction, it can be drawn into the magnetic field at high speed. Examples of some items that are attracted to the magnet and must not be brought into the exam room include:

- Personal items: cell phones, pagers, ID badges, pens, watches
- Patient care equipment: oxygen tanks, wheelchairs, stretchers
- Other equipment: mops, buckets, floor buffers

If a metal object is drawn into a scanner, DO NOT try to pull it out. The object can move suddenly causing serious or fatal injuries. Report the incident to a member of the MRI team immediately.

All patient care equipment used within the MRI room is specially designed for use within a magnetic field. The MRI technologist will identify what equipment may enter the room and what equipment must be replaced with special MRI safe devices during the test.

What can be taken into an MRI room safely? Items that are MRI SAFE and are non-ferrous include:

- Items indicated as MRI safe
- Brass
- Aluminum
- Plastic

What steps do you take in the case of a patient emergency?

- The first and most important step is to safely remove the patient from the MRI suite with MRI safe equipment. It is the responsibility of the MRI staff to remove the patient from the scanner and bring them to a safe area for emergency treatment.

- No patient related codes will ever be managed in the MRI room due to the inability to quickly and carefully screen the responding team members and the potential for aiding equipment to become dangerous missiles.

- In case of a Code Red, any fire extinguisher brought into the MRI room must be labeled as “MRI Safe.” In the event of a fire in or near the MRI suite, designated MRI personnel will monitor what is brought into the room.
Emergency Preparedness

We promise our patients the highest quality care even during emergencies or disasters. Plans, resources and tools are in place to help you do the best possible job even in difficult situations. We need your help in using these tools to better take care of everyone when emergencies occur.

Emergency Operation Plans

Emergency Operation Plans (EOPs) have been developed and can be activated at a moment's notice. These plans describe many possible emergencies and what actions to take for each.

- Color-coded charts are located on SWIFT. These wall charts give team members quick reference about EOPs and emergency codes, and they summarize actions to take in an emergency.
- Every team member is issued a code card (badge reel) along with their team member ID badge for immediate reference on EOPs and emergency codes.

Once a code situation is discovered, it is important to report it using your facility's emergency number.

How to Report an Emergency by Telephone

For all Hospital Buildings:

1. Dial the dedicated emergency telephone number for your location (listed here):
   - Dial “22” at ORMC, Ambulatory Care Center (ACC), UF Health, Arnold Palmer Hospital, Winnie Palmer Hospital and Dr. P. Phillips Hospital
   - Dial “111” at South Seminole Hospital
2. State your name and job title
3. State the type of code and pertinent information
4. State your exact location, including hospital area and room number (if applicable)
5. Wait for the operator to repeat the information back to you

For all Non-Hospital Buildings:

1. Dial “911” (you may need to dial “9” first to get an outside line)
2. State the following:
   - Your name
   - The nature of the problem
   - The address of your building
If needed, your location within the building. **Do not use Orlando Health codes or terminology when dialing 911.**

Once the call has been made to PBX, they will announce the appropriate hospital overhead announcement three times activating the emergency code.

**Hospital Incident Command System**

When Emergency Operation Plans are activated, we also may activate the Hospital Incident Command System (HICS). HICS is activated to coordinate emergency efforts within and between all Orlando Health facilities. During an emergency, you may see HICS team members around the hospital. Team members will be wearing a vest in an assigned color.

In the event an emergency warrants activation of an EOP, a message will be announced and repeated three times (e.g. “Code Red: ORMC ED”). When the emergency is over, a message will be repeated three times (e.g. “Code Red: ORMC ED all clear”)

**Mass Casualty Incident Plan**

The Mass Casualty Incident Plan is an example of when the Hospital Incident Command System (HICS) may be put into action. This code occurs when we are notified that we will be receiving patients due to a mass casualty incident, such as a bus crash.

When we are notified of a mass casualty incident, the operator will announce **three times**: "**The Mass Casualty Incident Plan is now on standby**" every 15 minutes until the patients arrive at the hospital.

When patients begin to arrive at the hospital, the operator will announce **three times** “**The Mass Casualty Incident Plan is now in effect.**”

**Mass Fatality Incident Plan**

The Mass Fatality Incident Plan is another example of when the Hospital Incident Command System (HICS) may be put into action. This code occurs when there is a mass casualty incident that may result in numerous fatalities, such as a tornado incident.

Dealing with the remains is a very stressful and important matter. That is why this plan was created to assist our organization in response to such an incident if it were to ever occur.

**Unplanned Situations**

If you come in contact with a hazardous or unsafe situation, take personal responsibility and do the following:
1- Assess the situation.
2- Establish communication: Do not use your radio or cell phone near suspicious items.
3- Request additional resources, if needed.
4- Identify the danger zone: is everyone in a safe location?
5- Attend to the immediate needs of affected patients, visitors, vendors and team members.

All Orlando Health team members will manage hygiene and sanitation needs of patients and team members during an emergency. Examples include:

- Wearing PPE appropriately
- Hand washing
- Properly throwing away soiled or contaminated items
- Keeping a clean work environment

**Emergency Codes**

We use several emergency codes to communicate information about emergency situations to our team members while minimizing panic to our guests. A color-coded emergency chart is available on SWIFT as a quick interactive reference in case of an emergency. It is vital that each team member is familiar with emergency codes that are used at Orlando Health.

This table lists the emergency codes currently used throughout Orlando Health hospitals.

<table>
<thead>
<tr>
<th>Code Red</th>
<th>Fire</th>
</tr>
</thead>
<tbody>
<tr>
<td>Code Red STAT</td>
<td>Horizontal evacuation due to fire</td>
</tr>
<tr>
<td>Code Brown</td>
<td>Tornado/Severe weather in immediate area</td>
</tr>
<tr>
<td>Code Black</td>
<td>Bomb Threat</td>
</tr>
<tr>
<td>Code Copper</td>
<td>Information Technology Infrastructure Failure</td>
</tr>
<tr>
<td>Code Green</td>
<td>Medical Gas Failure (oxygen, vacuum, etc.)</td>
</tr>
<tr>
<td>Code Blue 90</td>
<td>Adult Cardiac Arrest</td>
</tr>
<tr>
<td>Code Blue 45</td>
<td>Pediatric Cardiac Arrest</td>
</tr>
<tr>
<td>Code Orange</td>
<td>Large Chemical Spill (greater than 1 gallon)</td>
</tr>
<tr>
<td>Code White</td>
<td>Staff, visitor, or patient taken hostage.</td>
</tr>
<tr>
<td>Code Echo</td>
<td>Patient eloement</td>
</tr>
<tr>
<td>Code Pink</td>
<td>Abduction of infant (Code Pink), child (Code Pink <em>indicated age</em>), or adult against his will (Code Pink Adult)</td>
</tr>
<tr>
<td>Code PE</td>
<td>Crisis assistance needed in Behavioral Health Unit at SSH</td>
</tr>
<tr>
<td>Code Gray / Code Gray Zero</td>
<td>Patient, visitor, or staff is threatening harm; need immediate assistance in patient care area</td>
</tr>
<tr>
<td>Code Silver</td>
<td>Active Shooter</td>
</tr>
<tr>
<td>-------------</td>
<td>----------------</td>
</tr>
<tr>
<td><strong>Code Zulu</strong></td>
<td>The initial notification of appropriate personnel and Emergency Services in the event that a medical helicopter experiences a crash landing on an Orlando Health facility’s heliport or anywhere on property.</td>
</tr>
<tr>
<td><strong>Person Down</strong></td>
<td>An ill or injured person needs assistance inside an Orlando Health hospital in a non-clinical area or outside of an Orlando Health hospital with an emergency department</td>
</tr>
</tbody>
</table>

**Hospital Emergency Response Team (HERT)**

Sometimes we have advance notice that a disaster is about to happen (like a hurricane). The Hospital Emergency Response Team (HERT) was created for situations like this and other emergencies. The HERT Team is also now an All-Hazards team that can be activated in response to many types of emergencies.

If you are interested in becoming a HERT member, ask your manager for more information and reference HERT Policy 5916-1519.
Infection Prevention

No area of any healthcare organization is free of infection risks. Many patients die as a result of infections they acquire while receiving care in the hospital. Infections are the fourth leading cause of death in the United States. Hospital infections kill more people than car accidents, fires and drowning combined.

It is Orlando Health’s goal to work toward a zero hospital infection rate in our patients during their stay. We provide our patients with a safe environment to lower the risk of infection. Good infection prevention practices can stop the spread of infections to your patients, yourself, co-workers and family.

All areas of healthcare organizations need to be aware of proper infection prevention techniques. In fact, the Joint Commission lists as one of their National Patient Safety Goals to reduce the risk of hospital acquired infections.

The Chain of Infection

In order to prevent the spread of infection, it is important to know what happens. There are three links in the chain of infection.

<table>
<thead>
<tr>
<th>Cause</th>
<th>Transmission</th>
<th>Host</th>
</tr>
</thead>
<tbody>
<tr>
<td>The cause can be a fungus, virus or bacteria. All multiply very quickly; one organism can become trillions within 24 hours.</td>
<td>Germs can be transmitted by contact, droplet, air or food. Germs can live on your clothing, skin and equipment. Anything that has come into contact with the germs can be a carrier.</td>
<td>Germs need a host to cause infection. People with strong immune systems can resist many infections. Due to a weakened immune system, young, old and sick persons may have a weaker immune system and may not resist infections well.</td>
</tr>
</tbody>
</table>

How Do We Break the Chain?

Breaking the chain of infection is not difficult, but it does require constant attention to the way we do things. Hand hygiene, use of Standard and Transmission Based Precautions, and segregation of biohazardous waste are important elements in preventing the spread of infection in the hospital.
**Hand Hygiene**

Washing hands correctly (hand hygiene) is the single most important thing you can do to stop the spread of infection. You should always use an alcohol-based handrub or wash your hands with soap and warm water.

**Note:** Do not wear artificial fingernails when having direct contact with patients. Keep natural nail tips less than ¼-inch long.

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**When Must I Wash My Hands?**

**Before & After:**
- Every patient contact, whether or not gloves are worn
- Performing/assisting with invasive procedures
- Handling medication
- Handling food

**Between:** Patient care procedures on the same patient

**After:**
- Touching (with or without gloves) equipment or surfaces that may be contaminated with body fluids
- Removing gloves or any protective equipment
- Using the bathroom

Before turning off the water, dry your hands thoroughly with a paper towel. Turn off the water with another clean, dry paper towel.

**Use soap and water if your hands are visibly soiled**
- Wet hands thoroughly
- Apply soap
- Wash vigorously for at least 15 seconds
- Friction is the key to effective hand washing. Friction loosens and removes soil and debris from your skin. Pay special attention to the areas between your fingers, under your nails, around your cuticles and your wrists.
- Rinse hands thoroughly
- Before turning off the water, dry your hands thoroughly with a paper towel
- Turn off the water with another clean, dry paper towel

**You may use alcohol hand rub if your hands are not visibly soiled**

Hand rubs save time, they are easier on the hands and encourage hand-washing between patients. They also significantly reduce the number of germs on the skin. Alcohol-based hand rubs are available in all patient care areas.
- Use enough products to thoroughly wet hands.
- Apply to the palm of one hand and rub hands together, covering all surfaces of your hands and fingers.
- Rub hands until dry

We encourage our patients and families to partner with us and speak up to ask the health care workers if they washed their hands. Orlando Health is monitoring hand hygiene compliance in clinical areas. Hand rub dispensers have been placed throughout the hospital including the cafeterias for easy access to wash hands.

**Equipment Cleaning**
At Orlando Health, in addition to routine cleaning, we clean and disinfect all equipment after it leaves a patient's room.

**Standard Precautions**
One of the most common ways health care workers are exposed to disease is through accidental exposure to blood. To prevent this exposure, policies, procedures and equipment are available to you and must be followed. These processes are called Standard Precautions. Standard precautions are used with **all patients**. This approach to infection control considers all body fluids, mucous membranes and broken skin as potentially infectious.

The purpose of Standard Precautions is to protect you from exposure to any body fluid/tissue that may be infected. Standard Precautions are ways to put a barrier between you and blood/body fluids. This means wearing personal protective equipment (PPE) when required. Personal protective equipment includes gowns, gloves, masks and goggles. You must evaluate the situation to decide what protective equipment to wear.

1. Evaluate the risk
2. Choose the appropriate PPE per policy
3. Dispose of the contaminated waste properly

At all times, try to avoid contact with all blood/body fluids regardless of diagnosis or person and wear the protective equipment if contact might occur.
Bloodborne Pathogens
Infectious agents that live in the blood can cause serious disease in humans. HIV and Hepatitis B and C are viruses that live in body fluids, especially blood. All have documented transmission via puncture and splash. That is why the OSHA regulations require that you protect yourself by using PPE whenever you anticipate coming in contact with blood or body fluids.
Using PPE is mandatory. Failure to use PPE when indicated at Orlando Health can result in disciplinary action. PPE includes gloves, masks, eye shields, face shields and impervious gowns.

Follow Standard Precautions if there is risk of exposure to any of the following:
- Blood
- Body fluids (e.g. cerebrospinal, pleural, amniotic, peritoneal, pericardial and other “fluids”)
- Secretions and excretions (e.g. sputum, urine, stool, wound drainage, etc.)
- Non-intact skin (e.g. burns, rashes, wounds, ulcers, etc.)
- Mucous membranes
- Surfaces or items that might be contaminated with any of the above

Standard Precautions include the following:
- Wash your hands before and after each patient contact, immediately after you remove gloves and immediately after you are contaminated with blood or body fluids.
- Wear gloves when:
  - in contact with blood, body fluids, broken skin or mucous membranes
  - handling items or surfaces contaminated with blood or body fluids
  - performing procedures, such as venipuncture, starting IVs, doing dressing changes or when contact with blood or body fluids could potentially occur
- Wear a gown or plastic apron when performing procedures during which splashing of body fluids on clothing may occur.
- Wear a mask with shield, goggles or face shield to protect the mucous membranes of the mouth, eyes and nose during procedures where splashing of blood or body fluids may occur.
- Change protective clothing (gowns, gloves, masks, etc.) between patients.
- Do not recap, bend, break or cut needles.
- Dispose of needles and sharps in rigid, puncture-proof containers. These containers should be located as close as possible to the area of use.
Always use safety devices whenever available. It is Orlando Health policy that failure to use safety devices when available will result in disciplinary action. These devices are essential in protecting you from unnecessary exposure, or needle sticks.

Keep resuscitation bags, mouthpieces and airways available to minimize the need for mouth-to-mouth resuscitation.

If you have open wounds or weeping skin, avoid direct patient contact and the handling of equipment contaminated with blood or body fluids. It is also essential that you wear gloves if you have open wounds or weeping skin.

All soiled linen must be considered contaminated and handled accordingly.

There is no need for isolation of patients with HIV infection (except Standard Precautions). Isolation must be used only if the patient has other associated conditions that require isolation, such as tuberculosis, meningitis or scabies.

Careful and consistent use of Standard Precautions with all patients is the most important means of protection. Following Standard Precautions cannot be over-emphasized.

Corporate Infection Prevention policies give specific guidelines for compliance with the OSHA Bloodborne Pathogen Standard. Please refer to Patient Care policies titled “Bloodborne Pathogen Exposure Control Plan” and “Transmission Based Isolation Precautions” for detailed information.

**Significant Exposures**

A Significant Exposure is defined as a percutaneous (through the skin) exposure to blood or body fluid (usually a needlestick), a splash of blood or body fluid into a mucous membrane (eyes, nose or mouth), or contact with blood or body fluid to non-intact skin or a large exposure to intact skin. Splashes are the most common cause of significant exposures at Orlando Health.

Using Standard Precautions is your best protection against exposure, but needlesticks and sharps injuries, as well as splashes to the face, may occur despite proper use of Standard Precautions. When such exposures occur, it is very important that you report the incident to your supervisor immediately and begin the post-exposure evaluation.

As soon as the exposure occurs, clean the affected area with soap and water or flush the affected mucous membranes with water. Call your immediate supervisor who will then notify the Administrative Supervisor. The Administrative Supervisor will bring you the Exposure Packet and will assist you in completing the reports.
It is very important that you see a qualified health care provider as soon as possible - preferably within the first two hours and no more than 24 hours following the incident. You will be instructed to report to Occupational Health (for injuries sustained on the main campus during daytime hours) or the Emergency Department (for injuries sustained off the main campus or after hours on the main campus) for evaluation.

Once a physician examines you and you agree to be tested for HIV, Hepatitis B and Hepatitis C, the source patient's physician will approach him or her for permission to test for the same organisms. Under Florida law and OSHA regulations, if the source patient refuses testing and the laboratory already has blood on hold that has been voluntarily obtained, that blood may be tested for HIV even if the source patient does not consent. If the source patient refuses testing AND does not have blood on hold, blood for testing can be obtained by court order as defined by Florida law. To test without the source patient's consent, the health care worker who sustained the exposure must agree to his or her own HIV testing or be able to provide a record of negative HIV results completed within the last six months. If the health care worker refuses testing and cannot produce evidence of negative HIV test results, the health care provider’s Worker's Compensation rights may be waived. If the examining physician feels you should have treatment to prevent infection, the treatment must be started in a timely manner.

**HIV / AIDS**

**Why Do I Need To Learn About HIV/AIDS?**

Not knowing the facts about HIV has caused a lot of panic and fear. By learning about HIV, you can protect yourself and your family from becoming infected with HIV. In addition, your job may involve taking care of patients with HIV/AIDS. Florida ranks third in the nation in the number of AIDS cases, so it is very likely you will see HIV/AIDS patients in your facility.

**What is HIV/AIDS?**

HIV infection is a serious condition that weakens the body's immune system. A healthy immune system is what keeps people from getting sick. Human Immunodeficiency Virus (HIV) is a virus that damages the cells in the body that fight off infection and disease. As the virus destroys immune system cells, the body gradually becomes unable to protect itself against illness and infection.

AIDS stands for Acquired Immune Deficiency Syndrome. AIDS is the final stage of HIV infection when the immune system has been destroyed and can no longer fight infection or disease. Persons with AIDS usually die from these infections and diseases. So far, there is no vaccine or cure for HIV. Education and safe behavior are our best weapons against the spread of the virus.
What are the stages of HIV Infection?

There are three stages of HIV:

1. Acute HIV infection
2. Asymptomatic HIV infection (person has no symptoms)
3. Symptomatic HIV disease (AIDS)

Acute retroviral syndrome begins two to six weeks after exposure and usually lasts about one week. The person will feel like they have the flu and may have a skin rash.

Asymptomatic HIV disease (without symptoms) can last from two to twelve years. The person feels well and is most likely living a normal life. In this stage, the person is able to spread the virus, without even knowing he or she has it. The virus is active during this stage. It is still reproducing and destroying the immune system.

Symptomatic HIV disease is the stage most people refer to as "full-blown" AIDS. In this stage, the person has very low helper T cells and can develop many different kinds of “opportunistic” infections, such as pneumocystis carinii pneumonia, fungal diseases (Candida albicans, aspergillus), herpes, CMV (cytomegalovirus) and TB.

How is HIV Spread?

HIV is spread by people infected with the virus. The infected person does not have to be sick to pass on the virus. Many people have no symptoms for years but are able to pass the virus to others. However, research has shown that people who have AIDS or who have developed symptoms of HIV infection are more prone to spreading the virus than people who are asymptomatic.

HIV is spread three ways:

- Sexual intercourse with an infected person
- Contact with contaminated blood, blood products, needles or syringes (most common method is through sharing of needles during IV drug abuse), splash of blood or body fluid to non-intact skin or mucous membrane
- From an infected mother to her baby before, during or after birth (through breastfeeding)

**HIV is not spread** through casual contact or through the air. Research has shown that you **cannot** get HIV by:

- sitting next to someone
- touching, shaking hands or from a social kiss
- eating in a restaurant
- using restrooms, telephones or water fountains
- donating blood
- being bitten by mosquitoes or other bugs
- swimming in public pools or hot tubs
The primary way health care workers are exposed to HIV is through accidental needlesticks. Exposure can also occur through splashing of blood or body fluids into the eyes, nose or mouth or onto non-intact skin. The chances of getting the virus through contaminated blood transfusion has decreased since 1985 when blood banks began screening blood donors and testing donated blood for the presence of the virus.

People infected with HIV may look healthy! A sex partner does not have to look sick to spread the virus. A person infected with HIV can spread it to others without even knowing it.

**What are the signs and symptoms of HIV Infection?**

**Common symptoms include the following:**

- unexplained persistent tiredness (fatigue)
- unexplained fever, night sweats, shaking, chills
- sudden and unexplained weight loss (more than ten pounds)
- diarrhea that lasts several weeks
- a dry cough that will not go away
- purple or pink spots or bumps on or under the skin, inside the mouth or nose, or around the eyes
- white spots around or in the mouth

Many of these symptoms are the same for the flu and the common cold. The difference is how severe the signs and symptoms are, and the length of time they last. HIV infection cannot be self-diagnosed. If you have any concerns about symptoms you may have, you should see your doctor.

**How is HIV Treated?**

There is no known cure for HIV infection, although research continues with the hope of finding a cure. There is usually a long period of time between actual exposure to HIV and the appearance of symptoms. During this time, if the person knows they are infected, he or she can help delay or avoid the development of AIDS by exercising, eating a well-balanced diet, avoiding drug and alcohol abuse and seeking prompt medical attention.

Antiviral drugs can be given to improve clinical outcomes and delay progression to AIDS and death. Usually a combination of drugs is used. These drugs have many potential side effects and interactions with other drugs the patient may be taking; and patient compliance often becomes an issue.

It is important to stress good nutrition for persons infected with HIV. Weight loss and diarrhea are very common symptoms of HIV. Aching muscles and joints are also common symptoms, as well as extreme fatigue. Careful handling of muscles and joints,
gentle exercise and regular rest periods can help. It is also important to prevent and look for complications. Infection can be deadly for these patients. Strict aseptic technique and good hand-washing hygiene are important.

Keep in mind when caring for the HIV/AIDS patient is to create an atmosphere of acceptance and reassurance. Patients and families need emotional support while trying to face the fatal nature and stigma of the disease.

Confidentiality

HIV test results are confidential. The law defines who has the right to know test results. Any hospital team member who provides care to the patient or handles body fluids or tissues of the patient has a need to know. No one who is not directly taking care of the patient, or handling body secretions or blood needs to know.

The law is very clear who can be given HIV test results. Individuals who have the right to know are the following:
- the person who is tested
- legal representative if the person is incapacitated
- legal representative if the person is deceased
- adoptive parents
- persons working in prisons
- adults responsible for foster care
- health care providers taking care of the person
- state agencies that have been appointed as guardian of the patient

Hepatitis

Hepatitis is another infection that is common in healthcare organizations. There are many types of Hepatitis. A, B and C are the most common.

**Hepatitis A**
- Hepatitis A is transmitted by not washing hands after going to the bathroom (oral-fecal route)
- It is most often associated with contaminated food
- It can also be transmitted sexually
✓ Vaccine available

**Hepatitis B**

✓ Hepatitis B is transmitted through blood and sexual contact
✓ It can cause liver failure and liver cancer
✓ Vaccine available

**Hepatitis C**

✓ Hepatitis C is transmitted through blood and sexual contact
✓ It can cause liver failure and liver cancer
✓ **No vaccine available**

In general, there is no cure for Hepatitis. Treatment is based on symptoms and not all persons have symptoms. Hepatitis can produce flu-like symptoms such as:

- Fever
- Aches & pains
- Decreased appetite
- Nausea & Vomiting
- Dark urine
- Sore Throat
- Yellow Skin
- Fatigue

There are highly effective vaccines to prevent Hepatitis A and B. All health care workers who are at risk for exposure are offered these vaccines free of charge at Orlando Health. Contact Occupational Health if you have not been vaccinated and would like to be.

All health care workers whose job responsibilities include contact with blood or body fluids should be immunized against Hepatitis B. Immunization consists of three injections over a six-month period. The CDC and OSHA recommend this immunization.
Transmission Based Precautions

Transmission-Based Precautions prevent the spread of disease. This keeps our patients, visitors, you and your family protected. Protecting our patients in this way is part of our commitment to quality care.

Transmission Based Precautions & Quality

Some patients require additional precautions if they have a very infectious or drug resistant organism. These are called “Transmission Based Precautions” and are used in addition to Standard Precautions. Transmission Based Precautions (TBP) prevents the spread of disease. This keeps our patients, visitors, you and your family protected. When these precautions are followed, our patients are healthier, and you are better able to do your job.

An isolation sign is posted on the patient’s door specifying which precautions are in effect. Do not enter an isolation room without first speaking to the nurse so that you will not expose yourself to an infectious organism. The nurse will instruct you on the protective equipment you will need. The isolation sign provides additional information about PPE. Patients on TBP are often transferred to different units or sent to other departments for treatment or testing. ALWAYS notify the receiving unit/department of the patient’s isolation status before transfer. This allows them to have proper precautions in place when the patient arrives.

The Patient Care policy “Transmission-Based Isolation Precautions” contains an alphabetical listing of infectious diseases and the precautions or isolation category to be used. This policy also notes which diseases must be reported to the Infection Control Department.

When initiating isolation, the nurse must do the following:

1. Correctly mark and place the isolation sign on the patient’s door. A copy is also placed in the front of the chart.
2. Enter the isolation category in the computerized medical record.

Clostridium Difficile Precautions

Clostridium difficile is a serious infection of the large bowel which can lead to surgical removal of the patient’s colon and in extreme cases can cause death. Additional procedures are required to help prevent its spread.

In addition to contact precautions, for patients with Clostridium difficile, caregivers should wash hands with soap and water after providing care and removing PPE.

The patient’s room and equipment should be cleaned with bleach products. In addition, patients with Clostridium difficile will be identified with a different sign.
Types of Precautions

The type of precaution required is based on how the disease is spread. Some diseases can be spread by contact (touch), droplets or air. There are three categories of Transmission-Based Precautions.

1- Contact Precautions

Contact transmission (organisms passed/spread by touching) is one of the most common ways infections are spread. There are two forms of contact transmission:

1. **Direct contact**: occurs when organisms (germs) move from person to person.
2. **Indirect contact**: occurs when organisms (germs) move from person to object.

Patients with infections or conditions spread by direct or indirect contact are placed on contact precautions. Examples are drug resistant organisms like MRSA or VRE, scabies, lice and *C. difficile*.

- Wash your hands before entering and when leaving the room.
- Wear gloves and a gown at all times in a room.
- Remove gown and gloves before leaving the room.
- Wash your hands prior to leaving the room.

**Remember**

Take care not to contaminate your skin or clothing. Remove the gown and gloves without touching the outer side.

2- Droplet Precautions

Droplet transmission occurs when droplets are produced by coughing, sneezing, talking or during certain procedures such as suctioning. Droplets can spread infection by moving short distances (about 3 feet) through the air and by landing on a person's eyes, nose or mouth.
Patients with diseases spread by inhalation of infected droplets are placed on droplet precautions. Examples are meningitis, mumps, whooping cough and flu.

- Wash your hands before entering and when leaving the room.
- Wear a mask with eye protection and gloves at all times in the room.
- Remove gown and gloves before leaving the room.
- Wash your hands prior to leaving the room.

**REMEMBER** Take care not to contaminate your skin or clothing. If your skin or clothing can become contaminated, it is recommended that you wear a gown. Remove the mask and gloves without touching the outer side.

Note that some conditions may require two types of precautions be used. For example, chicken pox is transmitted by both airborne and contact routes. In that case, both categories are marked on the isolation sign and appropriate precautions taken.

**3- Airborne Precautions**

Airborne Transmission is another category and occurs when infectious organisms are spread long distances through the air and breathed in. Airborne precautions are used for diseases like TB, chicken pox, measles and small pox that are spread through the air. Airborne precautions require a private room with negative pressure. Doors must remain closed and anyone entering the room must wear a respirator (N-95) to protect them from exposure. The germs that require airborne precautions are very small, so small that they may pass right through the fibers of a regular surgical mask. To enter an airborne precautions room, you must wear a respirator (N-95). These respirators (N-95) offer better protection against the tiny germs and have been approved by NIOSH (National Institute for Occupational Safety and Health) for use by health care workers caring for patients under airborne isolation. These respirators (N-95) come in different sizes and you must be “fit tested” yearly on your birthday month to see which size mask you need. DO NOT enter an airborne isolation room if you have not been fit tested, and ALWAYS wear the correct size mask that you have been fit tested for maximum protection.
Remember to do a seal check whenever you put on a respirator (N-95). This is accomplished after the respirator is put on. Breathe in and out through your mouth checking to see if the respirator maintains a seal around your face. In addition, you must not feel cool air coming in around the sides of the respirator. If you do not get a proper seal or if you feel cool air (or both), readjust your respirator. Remember that if changes that can affect your respirator fit, such as having gained or lost 10 pounds or had major facial changes you must be re-fit tested. Facial hair (beards and mustaches) may not allow for a proper seal or fit. Team members required to care for patients in airborne isolation cannot have facial hair in the area of the seal of the respirator.

Patients on airborne precautions may not leave their room except for emergency medical procedures that cannot be performed in the patient’s room, and they must wear a regular surgical mask while outside their room. When caring for these patients, remember not to remove your respirator (N-95) until after you have left the room.

- Wash your hands before entering and when leaving the room.
- Put on a special fitted respirator before entering the room and wear it at all times while in the room.
- Take the respirator off outside the room.
- Wash your hands prior to leaving the room.

Visitors must also wear the respirator (N-95); and can be fit-checked with instructions, on the nursing unit.

**Tuberculosis Specific Considerations**

Tuberculosis (TB) is an infectious disease that has been documented as far back as the early Egyptian times. In the 1980's, tuberculosis seemed well under control in the United States, and the Centers for Disease Control (CDC) hoped it would be totally eradicated by the turn of the century. However, since 1985, as we started seeing increases in the HIV-positive, homeless and immigrant populations, we also began to see a rise in the number of TB cases.

*Mycobacterium tuberculosis* is the bacterium that causes TB. It is spread by airborne transmission; that is, when a person with active tuberculosis disease coughs, talks, laughs, sings or sneezes, tiny droplets that contain TB are sprayed into the immediate environment. These "droplet nuclei" may remain suspended in the air for several
hours. Anyone exposed to a person with active TB for extended periods and who inhales these germs is at risk to develop TB infection.

**Tuberculosis Signs & Symptoms**
- Cough lasting longer than 2 weeks
- Low Grade Fever
- Night Sweats
- Fatigue
- Weight Loss
- Chills
- Bloody Sputum

**Tuberculosis infection is not the same as tuberculosis disease.** When a person is exposed to TB, the TB germ enters the lungs. In a healthy person, the body’s immune response safely “walls off” the germs, which prevents them from multiplying and spreading. With **TB infection**, the person will test PPD positive but is not contagious. Over his/her lifetime, there is a ten percent chance that the person will progress to **TB disease**. This usually occurs when the individual’s immune system is weakened, due to a disease such as AIDS or cancer or simply due to the aging process. The immune system can no longer contain the germs, they begin to multiply, and then the patient develops signs and symptoms of TB and can transmit the TB disease to others.

**TB Screening**

Early detection and prompt isolation of TB patients is vital to prevent the spread of the disease to the staff and other patients. All admissions are assessed for possible pulmonary TB.

Because of the high risk of exposure, all Orlando Health team members must follow the Occupational Health’s TB testing requirements in their birth month.

Tuberculin skin tests (TST) or a blood test called Interferon-gamma release assay (IGRA) may be required for team members in certain situations such as exposures to TB or working in a high risk environment for TB.
Quality & Regulatory

It is Orlando Health’s goal to deliver the right care to the right patient 100 percent of the time. The use of data can improve quality. We also compare our data with others to see how we are doing.

Examples of data collected from within Orlando Health are:
- Number of deaths
- Number of patient falls
- Length of stay
- Wait times
- Infection rates
- Error rates

Examples of data collected from outside Orlando Health used to measure our progress are:
- Picker Survey benchmarks
- CMS Core Measures

Data collected are used to measure performance and identify, prevent and correct problems. It has been identified that variation causes harm. Doing things the same way every time lowers the chance of mistakes. Avoid workarounds and shortcuts. Follow policies, best practices and Orlando Health guidelines to keep patients safe and provide the highest quality care.

All Orlando Health team members and contracted staff are expected to keep up to date with knowledge relating to their jobs. It is an important part of our commitment to quality. Orlando Health provides a wide variety of education and support to keep you current.

Regulatory Agencies

The regulatory and accreditation agencies that we work with help us to identify the minimum standards for safe quality care. We welcome the help of these agencies as we continue on our quality of care journey.

Survey

Regulatory and accrediting organizations assess us to get a clear picture of how we take care of our patients. This assessment is called a survey. Surveys are generally unannounced. Unannounced surveys are seen as valid by outside organizations and the public because they provide an accurate picture of a hospital’s actual day-to-day performance. Orlando Health has adopted the motto, “Ever Ready” to help keep us prepared. We are committed to being “Ever Ready.”
Your Role
During the survey process, the surveyor may ask you questions regarding your practice, patient care or safety. It is important to maintain a positive attitude and answer the questions to the best of your knowledge. And if the surveyor comes unaccompanied, notify a representative for the Regulatory or Risk Department before answering questions.

- Remember, you represent Orlando Health.
- Orlando Health takes these surveys very seriously.
- Be familiar with your regulatory resources and practice answers on a daily basis. For example, know what to do for a Code Red drill.

Three primary regulatory agencies are:
2. The Joint Commission.
3. Agency for Healthcare Administration (AHCA).

1- Center for Medicare & Medicaid Services
CMS is a federal government agency that develops standards of care for the elderly, the poor and children.

All hospitals must follow the Conditions of Participation (CoPs) when providing patient care. If Conditions of Participation are NOT followed, the hospital will NOT be paid for the care provided to the patient. Orlando Health depends on these payments to pay for the cost of doing business.

2- The Joint Commission
Orlando Health chooses to be accredited by The Joint Commission because they are recognized nationwide as an accrediting agency that is authorized by CMS. Orlando Health has earned and maintained The Joint Commission’s Gold Seal of Approval™.

The Joint Commission uses a patient tracer format during the survey. They follow the experience of several patients through almost every aspect of their Orlando Health experience. They evaluate our compliance to the standards that apply to those patients. At the completion of the survey, The Joint Commission sends a report that identifies areas for improvement. Action plans are then developed and implemented to ensure compliance.

3- Agency for Health Care Administration (AHCA)
AHCA is a state agency that monitors all aspects of health care quality and Medicaid in Florida. Other agencies that provide accreditation or certification at Orlando Health include, but are not limited to, Commission on Accreditation of Rehabilitation Facilities (CARF), College of American Pathologists (CAP) for the laboratory and American Nurses Association for Magnet designation.

**Day of Survey**
When a Joint Commission survey team arrives at Orlando Health, the PBX operator will page a welcome overhead three times to alert team members. For example, you would hear three times: **Attention please! Orlando Health would like to welcome The Joint Commission.**

**National Patient Safety Goals**
National Patient Safety Goals (NPSG) was created by The Joint Commission to help prevent medical errors and improve patient safety. Orlando Health follows the standards set by The Joint Commission to improve the way we care for our patients. If you work in a clinical area, you should know what the National Patient Safety Goals are, as they can change each year. Visit SWIFT at the link provided below [https://swift.orhs.org/regulatory/index2.cfm?groupname=JointCommission](https://swift.orhs.org/regulatory/index2.cfm?groupname=JointCommission)

The Joint Commission Contact Information
If you have concerns related to quality patient care or safety, please tell your manager or follow the three step communication process described in the Corporate Compliance section. If the problem is not fixed, you may contact the Joint Commission. Contact information is available on SWIFT under the Regulatory tab.

**Hospital Compare**
How do you know how well a hospital is doing? Public Reporting places hospital quality, patient satisfaction, and pricing data on the Internet for the public to view at any time. This allows consumers to make informed choices. Anyone can now easily compare results among many hospitals. Listed below are two sites that are available to the public to check on health care quality. [http://www.medicare.gov/hospitalcompare/](http://www.medicare.gov/hospitalcompare/) [http://www.qualitycheck.org/consumer/searchQCR.aspx](http://www.qualitycheck.org/consumer/searchQCR.aspx)
How to Report a Complaint
To report the details about your complaint to The Joint Commission, use one of the following options.

<table>
<thead>
<tr>
<th>On-line:</th>
<th>Submit a new complaint. <a href="http://jcwebnoc.jcaho.org/QMSInternet/IncidentEntry.aspx">http://jcwebnoc.jcaho.org/QMSInternet/IncidentEntry.aspx</a> Submit an update to a complaint. (You must have your complaint reference number) <a href="http://jcwebnoc.jcaho.org/QMSInternet/IncidentUpdate.aspx">http://jcwebnoc.jcaho.org/QMSInternet/IncidentUpdate.aspx</a></th>
</tr>
</thead>
<tbody>
<tr>
<td>E-mail:</td>
<td><a href="mailto:complaint@jointcommission.org">complaint@jointcommission.org</a></td>
</tr>
<tr>
<td>FAX:</td>
<td>Office of Quality Monitoring 630.792.5636</td>
</tr>
<tr>
<td>Telephone:</td>
<td>1.800.994.6610</td>
</tr>
<tr>
<td>Mail:</td>
<td>Office of Quality Monitoring The Joint Commission One Renaissance Blvd. Oakbrook Terrace, IL 60181</td>
</tr>
</tbody>
</table>
Risk Prevention

Doing things the same way every time lowers the chance of mistakes. Follow policies, best practices and Orlando Health guidelines to keep patients safe and provide the highest quality care. Avoid mistakes and shortcuts.

When Things Go Wrong

- An event is any occurrence, expected or unexpected, that endangers the safety of our patients, visitors, team members, volunteers and medical staff. OR
- A happening that is considered out of the ordinary of every day workings.
- A near miss is an event that might have caused harm had it reached the patient.

Events Requiring Immediate Action

Risk Management uses The Joint Commission’s term “sentinel event” to identify harm events that require immediate action. Examples of sentinel events are:

- Surgery on the wrong patient or body part
- Patient suicide
- Major loss of a bodily function
- Unanticipated patient death
- Permanent disfigurement
- Brain damage
- Fracture of bones

Events Reports

All events that cause harm or have the potential to cause harm (including near misses) are reviewed. If you witness an event or near miss at Orlando Health, YOU are responsible for initiating an Event Report immediately. Reporting errors and potential errors helps us to improve the quality of the processes that serve and protect our patients. Event forms are documented in the event reporting system so that Risk Managers can review them in a timely manner. When events are reviewed, all errors and potential errors are reported and evaluated without blaming specific persons, but evaluating the whole process. It is the goal to look for ways to improve our processes to provide extraordinary care and a safe environment for our patients.

Examples of Events

<table>
<thead>
<tr>
<th>1. Falls</th>
<th>2. Medication errors</th>
<th>3. Large chemical spill</th>
</tr>
</thead>
<tbody>
<tr>
<td>4. Transfer of patient to higher level of care</td>
<td>5. Malfunctioning equipment</td>
<td>6. An event out of the ordinary</td>
</tr>
</tbody>
</table>
Informing Patients & Families of Harm Events

In order to keep our patients and families informed when any event causing harm occurs, designated members of the health care team meet with them to discuss the event.

Informing patients and families of harm events is different from keeping them informed about other aspects of their care. The designated members of the health care team will meet with the patient and/or the patient’s representative to disclose (share) and discuss the event. We follow all laws of reporting events to appropriate agencies (AHCA, The Joint Commission).

Who Is Responsible for Initiating an Event Report?

The answer is simple: **We are ALL responsible.** Any team member or physician who discovers an incident or adverse event is responsible for initiating an Event Report.

When Must an Event Report Be Completed?

1. Any unexpected incident—e.g., medication error, policy and procedure variance, pressure sores upon admission or acquired while in the hospital, falls (patient or visitor), injuries (patient or visitor).
2. Any unexpected complication—e.g., Code Blue, unplanned transfer to higher level of care, unplanned return to surgery within twenty-four hours, unplanned procedure or surgery.
3. Safety violations—e.g., chemical spill, improper disposal of hazardous waste, improper utilization of equipment, smoking in non-designated areas.
4. Property damage—e.g., personal belongings, dental apparatus, hospital vehicles.
5. Lost or missing articles—e.g., money (patient, visitor and team member), eye wear, clothing, dentures, valuables.
6. Equipment failure—e.g., broken or malfunctioning whether it causes an injury to the patient or not.

In the event of a known injury, a telephone call must be made to Risk Management as soon as possible and followed up with an Event Report within twenty-four (24) hours.

If in doubt, fill out the Event Report. Florida Statute 395.0197 mandates that all licensed healthcare facilities have an internal Risk Management program whose function includes the development and implementation of an event reporting system. Florida law also places a legal obligation on all health care providers, agents and team members of our healthcare facilities to report events to Risk Management within three business days of the event, or within twenty-four hours if any injury has occurred. These
Event Reports are considered privileged and confidential. **No copies may be made of any Event Report for any reason.**

Orlando Health policy and procedures provide instruction for the completion of an Event Report. Timely reporting is required by AHCA (Agency for Healthcare Administration) and is essential for the purpose of investigation. An inspection of the program is performed by AHCA, whose focus is on the completeness and timeliness of Event Reports.

In order to keep our patients and families informed when any event causing harm occurs, designated members of the health care team meet with them to discuss the event. Informing patients and families of harm events is different from keeping them informed about other aspects of their care. The physician, risk manager or administrator will meet with the patient and/or the patient’s representative to disclose (share) and discuss the event. We follow all laws of reporting incidents to appropriate agencies (AHCA, The Joint Commission).

**Giving Patient a Voice**

Our patients tell us many things that can help us give higher quality care. We just have to listen to them. Below is how YOU can help patients’ voices be heard:

**Patient Complaints**

Addressing patient complaints immediately is a way of providing quality care and listening to their voices, choices and wishes.

**How to Handle a Patient Complaint**

1- If someone comes to you with a complaint, listen to the problem and gather the information. Let the person know that the problem will be addressed.

2- Take care of the problem, if possible. For any patient related complaints, document it in the medical record.

3- If you are not able to take care of the problem, notify the appropriate person/department. Also, contact the appropriate supervisor or manager.

**Patient Safety**

We check medical equipment to make sure it is working properly. If equipment is not working properly, remove it from use and tag it so it can be repaired. It is a shared responsibility to make sure the equipment is not used until it has been repaired.

All equipment is identified and tracked by a CE number or barcode. This information is used to track routine maintenance, repairs and events. Examples of each are shown below:
Safe Medical Devices Act, 1990 (SMDA)

The Safe Medical Devices Act is a federal law passed in 1990 requiring a hospital to report to the FDA and manufacturer within 10 working days, any device that may have contributed to the death, illness or injury of a patient. If a piece of medical equipment malfunctions you must:

1. Stabilize the patient.
2. If a patient death, injury, or illness was caused by the medical equipment, place a STAT call to Risk Management and Biomedical Engineering. If no adverse effects, notify Biomedical Engineering.
3. Remove medical equipment from use and apply a yellow equipment tag or some form of label to prevent accidental use.
4. Complete an Event Report including the CE # and/or serial # of the medical equipment.
5. Biomedical Engineering will come get the medical equipment. Do NOT try to fix or alter the medical equipment in any way since it may be needed as evidence.

Advance Directives

Any team member can talk with a patient about an Advance Directive. Advance Directive is a witnessed, written document or oral statement expressing the patient’s health care desires. This document may include:

| **Health Care Surrogate:** A person that is legally selected by the patient to make health care decisions only if the patient is no longer able to do so. |
| **Living Will:** A written, legal document that lists the patient's wishes for what type of medical care he/she wants if any of the following occur: |
| ➢ terminal condition (e.g. cancer) |
| ➢ end stage condition (e.g. kidney disease) |
| ➢ persistent vegetative state (e.g. coma) |

State and Federal law dictates that any patient entering our facility must be offered information about Advance Directives.

Who talks to the patient about Advanced Directives?

Any team member can talk with the patient about an Advance Directive. These documents are an important part of advanced planning for all patients, not just those approaching the end of life. Of course, some team members will be more knowledgeable than others. If a patient asks you about these documents and you don’t know the answers, locate someone who does.
Although anyone can talk to the patient about Advance Directives, there are limits on who can sign as a witness on these documents. If you have questions, refer to Patient Care Policy #1275. Risk Managers are a resource for Advance Directives documentation.

General Consent for Treatment

Acknowledge that the CFT (Consent for Treatment) is documented on top right hand corner of the patient’s face sheet during patient registration.

Example: CFT: 01/01/2013 UR. The date indicates when CFT form is signed.

Status of CFT is indicated as: UR, CD or US

- UR (Until Revoked)
- CD (Conditional – valid for this visit only)
- US (Unable to sign)

Informed Consent Guidelines

In the State of Florida (Florida Statute 766.103), the only person in our hospital who can obtain informed consent is the physician. Any adult may witness the patient’s signature, but the physician must first:

1. Describe the procedure to be done in clear language
2. Review significant risks involved in the procedure
3. Describe the available alternatives and benefits

In addition, the person who signs the consent must be a competent adult or the patient’s legal representative. Minors can consent for pregnancy and pregnancy related conditions when seeking testing and treatment of sexually transmitted diseases and for care of their own children. There may be other instances when a minor may consent for treatment—contact Risk Management. Consents become a permanent part of the medical record. Emergency care may be rendered without patient consent based on the theory of implied consent.

Furthermore, the Good Samaritan Act (768.13) provides: “Any hospital licensed under Chapter 395, any team member of such a hospital working in a clinical area within the facility and providing patient care, and any person licensed to practice medicine who in good faith renders medical care or treatment necessitated by a sudden, unexpected situation or occurrence resulting in a serious medical condition demanding immediate medical attention, for which the patient enters the hospital through its emergency room or trauma center, shall not be held liable for any civil damages as a result of such medical care or treatment unless such damages result from providing, or failing to provide, medical care or treatment under circumstances demonstrating a reckless disregard for the consequences as to affect the life or health of another.”

If the patient is unable to consent and no one in the family is available to give consent, documentation must be made in the medical record regarding attempts to reach the family or surrogate. If the situation is an emergency, the physician must document the emergency situation clearly and carefully either in the progress notes or, if desired, on the treatment consent form under the signature line where the patient
normally signs. **It is not necessary or warranted for the physician to sign his or her name on the patient’s signatory blank.** The consent form is then placed in the usual place in the medical record.

**Case of Abuse**

Child and elder abuse is a serious problem that affects people from all walks of life. One of the most important ways to protect victims from abuse is by making sure they get the help they need and by reporting cases to the authorities.

**Child Abuse**

Children who are victims of physical or emotional abuse often display mental and social development problems. In most cases, the abuse comes from their own parents or caretakers.

Below are some of the signs of abuse:

- **Physical abuse:** A child who suffers from physical abuse might have bruises, burn marks, fractures and scars. They are often fearful of adults or certain people.
- **Sexual abuse:** Victims of sexual abuse are forced to have sexual relations or engage in inappropriate physical contact with adults. One sign of sexual abuse is feeling uncomfortable when changing clothes.
- **Emotional abuse:** Children who experience emotional abuse are often victims of private or public humiliation and neglect. A child who is a victim might show sudden changes in behavior and act violently.
- **Neglect:** Children who are physically neglected show signs of lack of personal hygiene and bad health due to malnutrition, among other things.

**Elder Abuse**

Elder abuse can occur in the victim’s home or at places like assisted living facilities. People who abuse the elderly are usually people who know or take care of the victims. There are several types of abuse and all of them can have a profound negative impact on a person’s physical and mental health.

- **Physical abuse:** As with child abuse, elders who suffer from physical abuse also might show bruises or other signs of injury on their bodies. They might often act fearful or look intimidated.
- **Sexual abuse:** Elders who suffer from sexual abuse might become withdrawn.
- **Emotional abuse:** This occurs when the victim is humiliated and treated with disrespect. The victim might feel useless or inferior and might suffer from depression.
- **Neglect:** Elders show signs of physical neglect when caretakers fail to help them with their personal hygiene, food, clothing and medications.
- **Financial abuse:** Elders are often targets of financial fraud. This usually happens when people who take care of elders steal their retirement or Social Security money.

*Source: [http://blog.usa.gov/post/54353070179](http://blog.usa.gov/post/54353070179)*

Florida Law requires mandatory reporting of suspected or known abuse, neglect, or exploitation of vulnerable adults and children: Reference to Policy #1600.
Reporting Patient Abuse or Neglect

Any Orlando Health personnel or physician who has reasonable cause or who suspects abuse, neglect, or exploitation shall make a verbal report to the Department of Children and Families (DCF) Florida Abuse Hotline 1.800.962.2873 (1.800.96.ABUSE). For cases of certain abuses against children, consult with the Arnold Palmer Hospital Child Protection Team (CPT).

Any member of the medical staff or Orlando Health personnel involved in the admission, examination, care or treatment of an adult patient who has reasonable cause or suspects abuse, neglect or exploitation shall notify the attending physician, the Administrative Supervisor and at APH the Clinical Social Work Department of the referral to the abuse registry.

Document all calls in the medical record including date, time and the name and ID number of the person accepting the referral at the DCF abuse hotline.

Orlando Health personnel or physicians, who suspect abuse, neglect or exploitation, will complete an incident report.
Privacy & Information Security

Because you work in a health care system, you see and hear things that are private. You must keep that information private to protect our patients, fellow team members and yourself.

Privacy & Potential Violation

1- **Use of documents**: such as looking up information on a friend so you can tell church members how she is doing.

2- **Destruction of documents**: Such as shredding a document after 5 years when the law requires keeping it for 7 years.

3- **Alteration of documents**: Such as mistakenly recording one patient's payment in another patient's record.

Why do you need to how to protect patient records & business documents?

1- Protecting information shows our respect for the patient's rights and wishes as to whom they want to know about their medical care. It's the right thing to do. It's also the law destruction of documents, such as shredding a document after 5 years when the law requires keeping it for 7 years.

2- Florida State laws require you to protect medical records and documents.

3- Stolen, lost or unauthorized use of information can cause financial loss or embarrassment to patients, their families and visitors, team members and/or Orlando Health. Federal laws, such as the Health Information Portability and Accountability Act (HIPAA), require you to protect patient information.

4- Protecting information also means that you and your team can trust the information to be safe, without change, and available when it is needed. Seamless patient care depends on reliable information.

How Can You Protect Information?

You must protect information that is both paper & electronic form.

<table>
<thead>
<tr>
<th>Paper Records</th>
<th>Electronic Records</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient charts, Census reports, Labels, Schedules, Team member files, Financial reports, Credit card receipts and Medical records.</td>
<td>Sunrise records, PeopleSoft data, Financial reports, X-rays, Spreadsheets and Emails.</td>
</tr>
</tbody>
</table>

To protect paper records:

- Hide papers with a cover sheet.
- Turn hanging charts to face the wall.
- Dispose of papers that containing patient information in shred bins.
- Keep documents and records in a secure place at work.
Do not take patient records or documents home with you, unless approved by your department manager.

To protect electronic records:
1- Keep passwords private.
2- Do not share passwords with anyone.
3- Use “hard to guess” passwords and do not write them down.
4- Log off computers and applications when you leave them.

Shred Bins:
Designated locked shred bins are numerous and placed throughout the facilities for proper disposal of documents containing Protected Health Information (PHI). Do not use boxes or trash cans with or without the word “shred” written on them. These are never allowed. Temporary storage containers are not secure and can be easily stolen or accidently discarded with normal trash. Even if the container is routinely emptied at the end of the day, the risk is too great.

When you are working on computers, laptops, USB drives or other mobile devices, save files (Word, Excel, etc.) to the V: or U: drive rather than the C: drive so they are protected against theft or tampering. Do not save files to any mobile device that does not have encryption such as smartphone, laptops USB drives, etc.

What kind of information is important to keep private?
Protected Health Information (called PHI) is any information about a patient’s health or payment for care that identifies the patient or can be used to identify the patient. This information can be on paper, on the computer or in a conversation. If these identifiers are removed, the PHI is de-identified and is no longer treated as PHI.

Elements of PHI include:
Use the Least Amount

Always use the least amount of patient information required to perform a task. HIPAA requires this. **Example:** If a patient's Social Security number is not needed on a charge or encounter form then it should not be used there. **Exception:** The least amount of information rule does not apply if you are treating a patient.

Know What is Allowed

Policies and guidelines assist you to use and protect information the correct way. Just because you can access information, doesn't mean you are allowed to do so according to the policy. **Example:** Susan is a nurse at Orlando Health. She can view the medical records of her neighbor who is a patient in our system, but she is not allowed to look at this information because she does not need to see it to perform her job.

Special Consideration

- Use good judgment when you have verbal discussions about patients.
- Use special care in public areas like elevators, bathrooms and cafeterias.
- Make sure others cannot overhear your conversation.
- Get permission from the patient before you share HIV, substance abuse or psychiatric information.

Families & Visitors

Always ask for permission to speak in front of visitors in the patient’s room. You must NOT assume that visitors have permission to hear the patient’s protected health information. If the patient cannot express his wishes, the law determines who you can share information with. There are exceptions for certain situations (e.g. a court order or guardianship). For more information, review Patient Care Policy #8465 “Use and Disclosures of Protected Health Information”.

You need to be able to identify when a patient has requested no visitors, and you must follow their wishes. Here's what to do:

- The patient's record will be flagged with a “No Publicity” (NP) flag in the computer system.
- If a patient has the “No Publicity” flag you must not share any information about that patient with visitors or family including their location or that they are a patient at Orlando Health.

What rights do patients have under HIPAA?

HIPAA requires us to tell patients how their medical information is used and disclosed (shared). Patients receive a copy of the Notice of Privacy Practices. These are given to patients by registration personnel on their first encounter. The patient must sign an acknowledgement that they have received the information. The Notice of Privacy Practices is also posted on the Orlando Health web site and on SWIFT.
Some of the patient rights outlined in the NPP are the right to:

- Request restrictions on the use and disclosure of PHI.
- Amend the medical record if the information is incorrect. Requests must be in made in writing.
- Request an accounting of disclosures. In most cases, authorization is required to disclose PHI and must be specific to the particular use. Elements of a valid authorization include the PHI to be disclosed, name of the person or entity authorized to disclose the PHI, name of the person/entity to receive the PHI, the purpose of the use or disclosure, an expiration date for the disclosure and the patient’s signature and date.

If the patient is able to understand, we must ask if he/she agrees to disclose PHI to family, friends, or others who are involved in their care or payment for care. We must also ask if the patient objects to notification of family members/significant others of the patient’s location, condition, or death. If the patient is unable to agree or object, do what is in the best interest of the patient until he/she can discuss their wishes.

When we give PHI to someone who has a right to know, we only give as much information as they need to do their job. For example, if you get hurt at work, we would only tell the people who handle your worker’s compensation case information about your injury. We would not give information about other illnesses or operations you might have had.

In some cases, a patient has a personal representative involved in his or her care. A personal representative is someone who has the legal authority to act for another. The personal representative is treated as if they are the patient they represent concerning issues related to health care and PHI. Examples of personal representatives include parent of an unemancipated minor, guardian, healthcare surrogate/proxy, healthcare power of attorney or durable power of attorney, and executor of an estate.

Orlando Health uses a patient’s PHI for treatment, to file claims, or for other approved hospital business.

In addition, the following special circumstances do not require patient authorization:

- If required by law
- Public health reports
- In abuse cases
- To oversight agencies
- In judicial proceedings
- For workers’ compensation
- To funeral directors/coroners
- For organ donation
- For some types of research
- To protect someone’s health or safety
- For law enforcement
- Treatment of the patient, including care coordination, consultation with another provider and referral to another provider

**Patient Information & the Internet**

If your job requires you to send patient information via email, click here to learn how to send secure email. For more details, review Administrative Policy #5706-0238- “Internet, Electronic Mail and Other Electronic Communication Resources.”
Remember, Orlando Health Internet connections are monitored to prevent computer viruses and improper use. It is important to respect the privacy of our patients. Their information does not belong on these sites. For more details, review Human Resources Policy # 5916-1523 Social Media Networking.

Patient Information & Social Media
- Do not discuss or post patient information on Internet sites like Facebook, Twitter or blogs.
- Do not post patient’s information on the Internet even if you do not use the patient’s name.
- Online behavior should be consistent with the Code of Conduct.
- You must identify yourself if speaking on behalf of Orlando Health.
- You must seek permission if you wish to post Orlando Health content elsewhere.
- You cannot post photos of other team members, vendors, patients engaged in corporate events or activities.
- You cannot post anything that is obscene, defamatory, libelous, threatening, abusive or harassing to another person or entity.
- Team members are to have NO expectation of privacy when posting in social media.

Protecting Orlando Health from Phishing
Phishing is the attempt to acquire sensitive information such as usernames, passwords, credit card information, etc., by masquerading as a trustworthy entity in an email. These emails are sent by individuals trying to “fish” for your personal or financial information and they can look very authentic. It is important that you never respond to any email with your confidential information or click on any links contained in suspicious emails. Orlando Health and other legitimate businesses will never ask for personal information via email, so be mindful of this when these types of requests are made.
If you receive a suspicious email, you can forward it to suspiciousemail@orlandohealth.com. Please remember to delete the email from your inbox and then from your Deleted Items folder.

Universal Serial Bus (USB) Drives
Universal Serial Bus (USB) drives, also known as flash or thumb drives, are data storage devices that allow users to transport data from one location to another. Due to the small size and portability of these devices, they are at a high risk for loss or theft.
Users should only utilize USB drives when absolutely necessary for temporary data storage purposes.
These three important points:

1- Use only Orlando Health approved encrypted drives to store data when needed. The current approved Kingston model flash drives can be purchased from the Materials Management department.

2- Secure USB drives in a locked drawer or filing cabinet when not in use. This will prevent theft of the device when unattended.

3- Be advised, there are alternatives to using a USB drive: Files and presentations can be saved to the V: or U: drive and accessed from any computer on the Orlando Health network. Presentations can also be emailed to yourself for off campus use. Outlook email is available via the Team Member section of www.OrlandoHealth.com anywhere there is Internet access.

Report Violations
Look out for privacy and information security incidents and policy violations. They must be reported to your manager.

Examples of Privacy and Information Security incidents:
- Finding patient paperwork left in public areas.
- Giving patient paperwork to the wrong patient.
- Finding patient information posted on Facebook.

If you have questions or need additional information, please visit the HIPAA page on SWIFT or call the numbers below

<table>
<thead>
<tr>
<th>Corporate Integrity</th>
<th>321.841.2335</th>
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<tbody>
<tr>
<td>Compliance Hotline</td>
<td>888.464.6747</td>
</tr>
<tr>
<td>HIPAA Hotline</td>
<td>321.843.3333</td>
</tr>
<tr>
<td>Corporate Privacy Officer</td>
<td>321.843.8693</td>
</tr>
<tr>
<td>Corporate Information Security Officer</td>
<td>321.841.2410</td>
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</tbody>
</table>
**Corporate Integrity**

**The Corporate Compliance Program**

Orlando Health’s Corporate Compliance Program (CCP) supports us in providing quality-driven patient care by helping us **do the right thing, the first time**. It helps you know the legal and ethical standards that apply to your position and understand how to follow them at work.

**The Corporate Compliance Program Components:** There are several components of the CCP.

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<table>
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<tr>
<td><strong>Standards of Conduct:</strong></td>
<td>The Corporate Compliance Program (CCP) helps you understand and follow laws, Codes of Conduct, and policies and procedures that impact your work. Everyone is responsible to understand this program in order to prevent errors and violations.</td>
</tr>
<tr>
<td><strong>Oversight:</strong></td>
<td>The CCP is your partner. It helps keep you aware of your compliance responsibilities so you can provide extraordinary care to our patients.</td>
</tr>
<tr>
<td><strong>Education &amp; Training:</strong></td>
<td>Under our CCP, education and training is offered to you. You can learn more about your responsibilities and how to prevent violations. Classes and resources including the Compliance in Action electronic newsletter are listed on the Compliance SWIFT page.</td>
</tr>
<tr>
<td><strong>Auditing &amp; Monitoring:</strong></td>
<td>Under our CCP, business processes are audited and monitored to prevent, detect and correct violations. Think of these activities as a way to collaborate with the experts on compliance.</td>
</tr>
<tr>
<td><strong>Reporting &amp; Investigations:</strong></td>
<td>If you know of a real or potential violation, you must report it. The CCP helps you properly follow the reporting and investigation processes at Orlando Health.</td>
</tr>
<tr>
<td><strong>Enforcement:</strong></td>
<td>It is important that you are committed to honest and ethical behavior. Under the CCP, reports of illegal or unethical behavior are investigated. Disciplinary action, including separation, may occur.</td>
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</table>
Response & Prevention: The Corporate Compliance Program (CCP) helps you avoid doing things that could hurt our patients and our reputation as a reliable, honest and trustworthy organization.

Doing the Right Things
Our Corporate Compliance Program is supported by the Corporate Integrity, Internal Audit and Privacy and Information Security teams. These teams along with our Code of Conduct help you follow Orlando Health's ethical and legal standards. All of us are expected to follow the Code of Conduct at all times while working.

Note that this training includes highlights from our Code of Conduct but is not a substitute for reviewing the entire document. A full text version is available for access on SWIFT. Please take time to read it in full. Our Code of Conduct is a guide when faced with questions about behavior or action. It helps us carry out our duties ethically and legally. Corporate policy also tells us how to do our jobs. If policy and our Code of Conduct disagree, you must follow our Code of Conduct. Contact Corporate Integrity with questions or concerns. Confidential Compliance Hotline: 1.888.464.6747

Or use the new web portal to report your concern at https://orlandohealth.alertline.com/gcs/welcome Legal Compliance is everyone’s responsibility. If you know of or suspect an ethical or legal violation, you must report it – even if you are unsure. All reports are investigated, and you will not get in trouble for reports made in good faith.

The Three-Step Communication Process
At Orlando Health, we use the Three-Step Communication process to report compliance problems.

1. Talk to your immediate supervisor.
2. Talk to the manager or director responsible for your area.
3. Call the confidential Compliance Hotline at 888.464.6747.

If your manager or supervisor is involved, or you think your report has not been acted on, call Corporate Integrity at 321.841.2335 or the Compliance Hotline at 888.464.6747 or use the new web portal to report your concern at https://orlandohealth.alertline.com/gcs/welcome

Avoid Problems
- You need to know the laws, regulations and policies that apply to your work.
- If you have questions, talk to your manager or contact Corporate Integrity.
- Some laws and regulations apply to nearly all of us.
Laws & Regulations You Should Know

Here are some other standards that outline other legal and ethical behaviors for Orlando Health:

**Whistleblower Protection:** Orlando Health wants to protect our patients and team members. As a result, if you see or suspect a legal or ethical problem, you are required to report it.

- We do not retaliate against anyone who honestly reports an illegal or unethical act (or the suspicion of one) in good faith.
- We follow all laws that protect people who report illegal or unethical acts.

**Copyright:** At Orlando Health, we follow all copyright laws even if the work does not carry the copyright symbol.

- Software CANNOT be installed without permission from Information Services.
- If your job involves making copies, using pictures or placing information on the intranet or internet, you need to know more.

To learn more, check the Administrative Policy 5706-0313, Copyright and the Code of Conduct.

**Research:** At Orlando Health we conduct many different types of research and we are careful to follow the laws. The Institutional Review Board (IRB) reviews and approves all human research at Orlando Health and helps us make sure our patients are protected.

**False Claims:** These actions are against the law:

- Knowingly submitting a false claim
- Using a false statement
- Receiving money or payment for a false claim

The laws, Code of Conduct, and our policies tell us we cannot do these things. If we do, we can suffer severe penalties including fines.

**Workplace Conduct:** At Orlando Health:

- We do not harass or insult anyone
- Offensive jokes or comments are not allowed
- Statements, suggestions or actions of a sexual nature are not tolerated.
- We do not use alcohol, smoke or use illegal drugs in the workplace.

**Criminal Acts:** Criminal acts are not allowed or ignored at Orlando Health. If you know about criminal activity, you must report it using the Three Step Communication Process. Orlando Health team members who perform criminal acts will be disciplined and may be terminated. Discipline is based on the nature of the act.
Company Assets: A company asset is anything owned by Orlando Health. Examples include
- Equipment
- Supplies
- Funds (money)
- Software
- Team member time (on the clock)
- Business strategies and financial data

Do not use company assets for non-Orlando Health purposes. The actions below are not allowed (even though they may be for a good purpose):
- Using your time while on the clock to make calls to raise money for charity.
- Using the software on your Orlando Health laptop to create ads for a church rummage sale.
- Taking ACE wraps from the supply cart to wrap your son's ankle after a sprain.
- Telling a friend how much Orlando Health pays for paint so he can prepare a competing bid.

Providing Treatment: We provide emergency medical care to any patient, whether or not they can pay. It's the right thing to do (and it's also the law).
We do not transfer patients to other hospitals because they cannot pay.
- We do not make medical decisions about treatment based on whether a patient can pay.

Gifts and Business Courtesies
If you receive gifts from a non-Orlando Health person or entity while working, it can look like we make decisions based on what people give us. If you give gifts to people outside Orlando Health, it can look like we are trying to improperly influence the decisions of others.
Orlando Health has specific rules about what types of gifts and business courtesies are allowed.

Compliance Concerns or Questions
If you have questions about the Corporate Compliance Program, the Code of Conduct or how they apply to you and your work, you should ask:
- Your manager or supervisor
- Corporate Integrity
Recognizing Other’s Rights

Civil Rights Law
As an organization, we need to make sure that we are in compliance with the federal laws that apply to protected populations and to people’s civil rights. Below are the laws that address preventing discrimination of others. All of these laws apply to Orlando Health facilities and notices of non-discrimination are posted in various public places around the organization.

- Title VI, Civil Rights Act of 1964
- Rehabilitation Act of 1973
- Americans with Disabilities Act (ADA) of 1990

By law and Joint Commission Standards, patients have a right to effective communication. Patients who speak and/or understand limited English must receive health care information in their preferred language and in a way they understand. This includes anyone who has trouble speaking, reading, writing, or understanding English. If patients are not given adequate language assistance, then there is no effective communication. This is equal to not having informed consent for care.

Those with hearing or vision impairments also have the right to effective communication. In order to provide the most effective communication, the ADA requires certain types of supports, aid and services. Required support, aid and services include:

- Qualified interpreters (sign language)
- Assistive listening devices*
- Note takers and written material for individuals with hearing impairments
- Qualified readers
- Taped texts
- Large print materials or braille for individuals with vision impairments

*These items can be made available upon request, please call Culture and Language Resource Department at 321.843.5735

Isolation of patients with special needs must be avoided unless it is medically necessary. We also need to make sure the patient is not separated from his/her source of support or assistance. The following are examples that must stay with the patient:

- Medical equipment (including wheelchairs, walkers, scooters, catheters, ostomy supplies)
- Service animals (Patient Care Policy #0450)
- Caregivers and attendants
- Family members and companion
- Medications (Nitroglycerin and inhaler – with MD order), supplies

How Does Orlando Health Comply?
Orlando Health provides support services to patients who have limited English proficiency (LEP), hearing, visual, and or physical impairments at NO COST to them. Please refer to Orlando Health Patient Care Policy#0090 to learn when you must use a qualified interpreter.

**Providing Language Services**

You need to know when and how to use language and interpreter services. We must always try to communicate with the patient in their preferred language, but there are certain times when a qualified interpreter MUST be provided.

Interpreter services from a qualified interpreter must be provided when we:

- Explain living wills
- Give or explain a diagnosis
- Inform patients of their rights
- Give discharge instructions
- Give medication instructions
- Explain billing and insurance issues
- Explain medical procedures
- Obtain consent or permission for treatment
- Gather information about a patient’s history or health issue

Orlando Health offers qualified interpreting services 24 hours a day, 7 days a week. Interpreters for over 150 languages, including sign language, are available. Interpreting services can be provided over the phone, through video remote or person by person by qualified team members or vendors. Orlando Health team members who have completed our Interpreter program are identified as qualified interpreters. They will have an interpreter identifier attached to their badge. Instructions on how to initiate interpreter services can be found on SWIFT or on the badge language access card.

Children, parents, relatives and friends must never be used to interpret medical information except in life-threatening patient emergencies. Using a family member or friend, etc., who does not have documented training and competency to interpret medical information (especially consents) is equivalent to not having informed consent. This is a civil rights violation.

**Other Resources**

In addition to the Language Line qualified interpreters, the following is available:

- CYRACOM & LANGUAGE LINE telephonic interpreter service for foreign language speaking patients
- TTY (telephone typewriter, teletypewriter or text phone) or Telecommunications Device for the Deaf (TDD) phones for hearing impaired patients
- Video remote interpreting for the hearing impaired/deaf (iPads are available at hospital sites)

**Translation Services**
If you need a document translated, complete the “Translation Request - New or Revised” form on SWIFT and email it to the Documents Council at: mailto:R-documentsCouncil@orlandohealth.com
There are translated consent forms on SWIFT in Spanish, Haitian Creole, Vietnamese and Portuguese.

**Communication During Emergencies**

Orlando Health will maintain communication and coordinate activities with the community and faith-based organizations if there is an emergency, such as a natural disaster or acts of terrorism. Assistance with translation of written emergency information into other languages will also be provided.

**Consequences of Non-Compliance**

If legally charged with discrimination, the individual or organization:
- Will lose federal assistance and/or
- Will have appropriate legal action taken against them by the Department of Justice
- May be fined and/or individuals serve jail time

**Culturally & Linguistically Appropriate Care**

In addition to communicating with patients in their preferred language, we must also act in a way that shows respect to their culture.

It is important that patients trust us and tell us more about what is going on with their health. We need this information to provide quality care. Every team member is expected to provide culturally appropriate care.

- Be aware that people of diverse cultures have different needs when it comes to health care.
- Know where to find information about cultural practices of the patient population we serve.

Information about cultural practices (including communication tips and health preferences) can be found on SWIFT under Culture and Language Resources.

In the State of Florida, 2010 census data shows that more than one third of the population belongs to different races or ethnic minority groups. In addition, 27% of Florida’s population speaks languages other than English in their homes. Looking closer at Central Florida there is a slightly higher percentage of residents (29%) that speak languages other than English in their homes. The census also demonstrates that many of those with limited English proficiency (LEP) are elderly with low health literacy or knowledge even in their native languages. In general terms, cultural competence in healthcare refers to the ability of a healthcare employee and/or health organization to provide consistent successful care to patients of any race, ethnicity or culture.
**Weight Non-Discrimination**

There are other situations in which we need to show respect to our patients. Overweight patients often face discriminations and are not treated kindly. The Bariatric Center of Excellence at Orlando Health is an example of a quality program available to people who are unable to achieve or maintain a healthy weight through diet and exercise.

We need to make sure that we are sensitive to the needs of overweight patients and aware of biases related to obesity.

The way you treat people matters. Below are some ways you can help our obese patients feel comfortable and cared for. Most of these things apply to all patients.

- **Show patients you are sensitive to their needs:**
  - Make eye contact.
  - Don’t be afraid to touch the patient.

- **Reach out and introduce yourself; shake the patient’s hand:**
  - Patients notice when they receive genuine warm attention and believe you are available to meet their needs.

- **Avoid making “fat” jokes:**
  - Obesity is a chronic illness. No one laughs at other chronic illnesses such as diabetes, coronary artery disease or kidney disease.
For Orlando Health non-team members, students, and Orlando Health team members in a student role

Directions: Please complete the following post-test using an answer sheet.

1. When a Code Black is announced, you should:
   A. Leave the hospital immediately.
   B. Find out where the bomb is and remove it.
   C. Relocate patients to a safe place immediately.
   D. Wait in your work area and look for anything out of place.

2. The emergency code for severe weather is:
   A. Code Orange.
   B. Code Red.
   C. Code Brown.
   D. Code Blue.

3. What resource do you refer to for information on what to wear to clean up a mercury spill?
   A. SDS Online.
   B. HICS Policy.
   C. Biological Decontamination Plan.
   D. Team Member Handbook.

4. In a hospital building, RAACE stands for:
   A. Remove, alarm, alert, conceal, extinguish.
   B. Remove, alarm, alert, confine, extinguish.
   C. Remove, alarm, alert, confine, evacuate.
   D. Remove, activate, alert, conceal, evacuate.

5. To use a fire extinguisher correctly, the PASS procedure is used. PASS stands for:
   A. Pass, aim, squeeze, slide.
   B. Pull, alarm, squeeze, slide.
   C. Pull, aim, sweep, squeeze.
   D. Pull, aim, squeeze, sweep.

6. Which of the following is true about smoke doors?
A. There are no labels marking smoke doors.
B. All doors are smoke doors.
C. Smoke doors are single doors.
D. Smoke doors are not to be propped open.

7. You are in the front lobby of the hospital. What do you do if a person contaminated with an unknown chemical approaches you?
   A. Try to rinse off the chemical.
   B. Escort the person to the Emergency Department.
   C. Call 911.
   D. Do not touch the person, inform them help will be coming to assist and have them move away from others.

8. What should you do if you spilled a small amount of disinfectant?
   A. Call a Code Orange.
   B. Evacuate the spill area immediately.
   C. Clean it up following instructions in the SDS.
   D. Call the Administrative Supervisor.

9. You are asked to take an item to the MRI suite. Before entering the suite, you must:
   A. Knock and say why you are there, then enter.
   B. Remove your watch and ID badge, then enter.
   C. Wait for the MRI machine to stop running, then enter.
   D. Be screened by the MRI technologist before you enter.

10. When should you contact Security?
    A. If you witness suspicious activity.
    B. If you need an escort.
    C. If property is damaged or missing.
    D. All of the above.

11. What is the primary purpose of your ID badge?
    A. It allows a discount in the cafeteria.
    B. It allows you into Orlando Health parking garages.
    C. It identifies you as a team member, student, contractor, etc.
    D. It allows you access to areas of the hospital.
12. Standard Precautions apply to:
   A. All body fluids with visible blood.
   B. All body fluids except sweat.
   C. All body fluids from HIV patients.
   D. All infected body fluids.

13. Which type of disease transmission spreads on air currents over long distances?
   A. Indirect Contact.
   B. Direct Contact.
   C. Droplet.
   D. Airborne.

14. When should you wear gloves?
   A. At all times in the hospital setting.
   B. If there is any risk of coming in contact with anybody substance.
   C. Only during surgery.
   D. Only if a patient has an infection.

15. Which personal protective equipment should you wear if a patient is on contact precautions?
   A. Gloves only.
   B. Mask with shield and gloves.
   C. Gloves and gown.
   D. Mask, gloves and gown.

16. Which personal protective equipment should you wear if a patient is on droplet precautions?
   A. Gloves only.
   B. Mask with shield and gloves.
   C. Gloves and gown.
   D. Mask, gloves and gown.

17. Which of the following is true about hand hygiene?
   A. Hand rubs should never be used.
   B. It is the best way to prevent infection.
   C. It is okay to wear artificial nails.
   D. Rub hands together gently for 5 seconds.
18. A patient pulls you aside and has a complaint about the care he/she is receiving. Which of the following steps should you take first?
   A. Contact the Risk Management Department immediately.
   B. Suggest the patient call the “We’re Listening” line.
   C. Listen to the complaint and act on it appropriately.
   D. Be polite, but tell the patient you are not able to listen to the complaint.

19. What do you do first if you are involved in a significant exposure?
   A. Call the supervisor.
   B. Wash or flush the affected area.
   C. Call the Administrative Supervisor.
   D. Go to Occupational Health.

20. Which of the following statements is true about disposal of linen?
   A. All linen is treated as biohazardous and placed in the linen hamper.
   B. Linen contaminated with blood is put in a red bag/container.
   C. Only linen that is not contaminated with blood goes in the linen hamper.
   D. Linen contaminated with blood is put in a red bag and then in the linen hamper.

21. Airborne precautions require a fitted respirator to be worn at all times while in the patient room. If you are not familiar with the respirator, which of the following steps should be taken?
   A. Put the respirator on making sure to cover your mouth and nose.
   B. Wear a different mask.
   C. Ask the patient to wear a respirator.
   D. Do not enter the room. Contact the nurse for assistance. You need to complete respirator training and fit testing.

22. A patient requires a thorough explanation of his diagnosis but does not speak English. Which of the following is an acceptable method for providing an explanation?
   A. Ask a family member, who speaks English, to interpret the information.
   B. Provide a qualified interpreter who will explain the diagnosis.
   C. Provide written information that can be translated into the patient’s language.
   D. Ask any team member who speaks the patient’s language to interpret.

23. Which of the following is one of the service expectations at Orlando Health?
   A. Choose an “I just work here” attitude.
   B. Don’t over-communicate.
   C. Be “on stage” around patients only.
   D. Always show respect and compassion.
24. What is the Orlando Health Mission Statement?
   A. To improve the health and quality of life of the individuals and communities we serve.
   B. We don’t just care for you, we care about you.
   C. We love taking care of you and your family.
   D. Orlando Health works hard to care for patients and to serve the community.

25. Orlando Health’s values include:
   A. People.
   B. Quality.
   C. Community.
   D. All of the above.

26. Posting patient information on social networking sites such as Facebook or Twitter is not permitted, even if you do not use the patient’s name.
   A. True.
   B. False.

27. The main goal of the Corporate Integrity Department is to:
   A. Help avoid lawsuits against Orlando Health.
   B. Help you do the right thing at the right time for the right reasons.
   C. Help everyone to enforce compliance.
   D. Look for fraud and abuse within Orlando Health.

28. Which of the following is true about the Corporate Compliance Hotline?
   A. It accepts calls between 8 am and 5 pm.
   B. You must give your name.
   C. The number is 1.888.464.6747 and the call is confidential.
   D. Call only if you are certain an illegal activity has occurred.

29. What should you do if you find protected health information (PHI) in the parking lot?
   A. Leave it where you found it and notify Security.
   B. Dispose of it in the nearest trash can.
   C. Take it home with you and return it to medical records at your next opportunity.
   D. Notify Corporate Compliance of the breach immediately and follow their instructions for how to secure the information.
30. Which of the following would be a violation of HIPAA?
   A. Looking up PHI on a patient you are caring for.
   B. Asking for ID before releasing PHI.
   C. Removing PHI from the hospital.
   D. Shredding PHI when no longer needed.

31. Which of the following is not an element of PHI?
   A. Social Security Number.
   B. State of residence.
   C. Email address.
   D. Medical record number.

32. Which of the following items would we need patient authorization for prior to use or disclosure?
   A. Records to patient’s physician office.
   B. Records for workers’ compensation.
   C. Report of communicable disease.
   D. Report of abuse.

33. Which of the following pieces of information does not have to be protected?
   A. Patient information.
   B. Computer logon and password.
   C. Team member records.
   D. Corporate newsletters.

34. Which of the following is an example of following the Code of Conduct?
   A. Clocking in and out for a co-worker.
   B. Sharing organizational information with a vendor.
   C. Inaccurately coding a diagnosis due to guessing.
   D. Reporting an incident regarding fraud and abuse.

35. Whistleblowers are punished for their behavior.
   A. True.
   B. False.

36. Which of the following is a way to keep patient information private?
   A. Share your password.
   B. Discard lab reports in the trash.
   C. Look up information on a friend.
D. Log off when leaving a computer.

37. A type of Advance Directive where a person is selected to make healthcare decisions for a patient should he or she become unable to do so is called a:
   A. Living Will.
   B. Health Care Surrogate.

38. A type of Advance Directive where a legal document details a patient’s wishes should he or she become terminally ill is called a:
   A. Living Will.
   B. Health Care Surrogate.

39. If a piece of medical equipment malfunctions, which is your first action?
   A. Stabilize the patient.
   B. Write an incident report.
   C. Call Biomedical Engineering.
   D. Remove the equipment.

40. A team member witnesses a patient fall. Who is responsible for initiating an event report?
   A. Patient’s physician.
   B. Charge nurse on unit.
   C. Manager or supervisor.
   D. Team member witnessing fall.

41. Regulatory agencies help:
   A. Themselves by showing up for surveys unannounced.
   B. Us to validate our organization is adhering to practices and procedures which enable us to provide the highest quality of care for our patients.
   C. Patients by publishing any complaints on the internet.
   D. The community by posting on public internet sites how to make charitable donations to the hospital.