

Student Orientation



NORTH MISSISSIPPI
HEALTH SERVICES

What We Believe

- Our *mission* is to continuously improve the health of the people of our region
- Our *vision* is to become the provider of the best patient- and family-centered care and health services in America
- *C.A.R.E.S. Values* and *Critical Success Factors* – your tools for success!



NORTH MISSISSIPPI
HEALTH SERVICES

Your Tools for Success

COMPASSION

Show sincere care and kindness for those I serve




ACCOUNTABILITY

Take responsibility for my actions




RESPECT

Treat everyone with dignity



EXCELLENCE

Achieve excellence through innovation, teamwork and doing my best



SMILE

Always be friendly



NORTH MISSISSIPPI
HEALTH SERVICES



Our Critical Success Factors

- Strategically designed with people being the foundation of what we do
- Each CSF describes elements that are essential to our culture of excellence
- Our system defines goals based on our CSFs to help us achieve mission-driven outcomes



**NORTH MISSISSIPPI
HEALTH SERVICES**

AIDET

Studer Group ®

What connected feels like®



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HEALTH SERVICES**



A foundational tactic for effective patient communication, AIDET is used by nurses, physicians, technicians, EVS, food service, administrators and all staff involved in patient and family encounters across the continuum of care.

AIDET

What connected feels like®



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A	Acknowledge:	Greet the patient by name. Make eye contact, smile, and acknowledge family or friends in the room.
I	Introduce:	Introduce yourself with your name, skill set, professional certification, and experience.
D	Duration:	Give an accurate time expectation for tests, physician arrival, and identify next steps. When this is not possible, give a time in which you will update the patient on progress.
E	Explanation:	Explain step-by-step what to expect next, answer questions, and let the patient know how to contact you, such as a nurse call button.
T	Thank You:	Thank the patient and/or family. You might express gratitude to them for choosing your hospital or for their communication and cooperation. Thank family members for being there to support the patient.

AIDET is proven to:

- ✓ Improve patient and customer perception of care or service
- ✓ Decrease anxiety (for staff & patients) and increase compliance resulting in better clinical outcomes
- ✓ Build patient and customer loyalty
- ✓ Ensure service providers deliver consistent measures of empathy, concern, and appreciation

What connected feels like®



**NORTH MISSISSIPPI
HEALTH SERVICES**

Employee Health



What does Employee Health (EH) have to do with Students?

- If a student has an injury on campus while doing clinical/observation time, have your instructor or preceptor enter a “Good Catch”- they do not have to be seen by EH.
- EH must be notified if a student has blood and body fluid exposure, sharps exposure (needle stick), or soiled uniform or clothing.

What do I do if...happens?

- If you are exposed to blood and body fluids or sharps, contact your preceptor, your clinical instructor (if applicable), and employee health. An Employee Occurrence Report (EOR) must be filled out and a Good Catch must be entered by the preceptor.
- If your uniform or clothing gets soiled, please contact your preceptor, your clinical instructor (if applicable), and Employee Health.
- NMHS will have your clothes cleaned and provide you with clean scrubs for you to wear. Hospital provided scrubs must be returned upon arrival to get your cleaned clothes back.

Needlestick Safety and Prevention Act

- Developed from Occupational Safety and Health Administration (OSHA) in 2001
- Requires employers to select and implement appropriate engineering controls to reduce or eliminate employee exposure to needles.
- Employees must evaluate all new safety devices, we use a Produce Evaluation Committee.
- Requires a confidential sharps injury log must be maintained.

If a Needlestick Happens...

- You must fill out a Confidential Post Exposure Evaluation.
- Be aware that follow-up test and/or immunizations may be included (HIV, Hepatitis B, Hepatitis C, Tetanus, etc.).

Employee Health is here to help

- Hours of operation Monday – Friday 7am-4pm.
- For after hours, you can pick up the phone, dial “0” and page the “employee health nurse on call” or notify the security department.


Infection Control



What is Infection Control?

- It is the policies and procedures that are in place and used to decrease the risk of spreading diseases and infections.
- It is aimed at protecting the patients, families, healthcare providers, support staff, visitors, students, and community.

Three Major Components

- Hand Hygiene
 - Standard Precautions and Isolation Precautions
 - Cleaning of Equipment
- 

When to Perform Hand Hygiene

- Immediately before touching a patient
- Before performing an aseptic task (i.e. inserting a catheter)
- Before moving from a soiled body site to a clean on the same patient
- After touching the patient or the patient's immediate environment
- After contact with blood, body fluids or contaminated surfaces.
- Immediately after glove removal

When to Use Soap and Water

- When hands are visibly soiled
- After caring for a person with known or suspected infectious diarrhea (e.g. C-diff)
- After using the restroom


Standard Precautions

“Standard Precautions are the minimum infection prevention practices that apply to all patient care, regardless of suspected or confirmed infection status of the patient, in any setting where health care is delivered. These practices are designed to both protect DHCP and prevent DHCP from spreading infections among patients. Standard Precautions include”

- Hand hygiene.
- Use of personal protective equipment (e.g., gloves, masks, eyewear).
- Respiratory hygiene / cough etiquette.
- Sharps safety (engineering and work practice controls).
- Safe injection practices (i.e., aseptic technique for parenteral medications).
- Sterile instruments and devices.
- Clean and disinfected environmental surfaces

[Standard Precautions \(cdc.gov\)](https://www.cdc.gov/infectioncontrol/precautions/)

Isolation Precautions

- What is it?
 - Why do we use it?
 - What are the different types
 - How will I know my patient is in isolation?
 - When do I put it on and take it off?
- 

Contact Precautions



GOWN



GLOVES



**DEDICATED
EQUIPMENT**



NORTH MISSISSIPPI
MEDICAL CENTER

- Put on PPE before entering the room.
- Take off PPE before leaving the room.

Droplet Precautions



MASK



GOWN



NORTH MISSISSIPPI
MEDICAL CENTER

- Change your mask when you leave the room.
- Make sure visitors are masked while in the room.

Airborne Precautions



MASK
(Staff N95)



GOWN



**KEEP DOOR
CLOSED**




NORTH MISSISSIPPI
MEDICAL CENTER

- Known or suspected TB (Mycobacterium Tuberculosis) - MAC (Mycobacterium Avium Complex) does not require isolation
- N-95 mask (fit tested)
- Must place in negative pressure room or use HEPA filter


Special Droplet/Airborne Precautions (COVID)

- When possible, patients will be admitted to dedicated units/rooms.
- Special Droplet/Airborne precautions (add eye protection-face shield or goggles)
- An N95 must be worn (that you have been fit tested for)
- Must place in negative pressure room or use a HEPA filter (Keep door closed)



STOP Special Droplet/Airborne Precautions **STOP**
In addition to Standard Precautions

Everyone must:


-  Clean hands when entering & leaving room
-  Wear an N-95 mask for which you have been fit tested
-  Wear eye protection (face shield or goggles)
-  Gown & glove at door

 Keep door closed

 Use patient-dedicated or disposable equipment when possible

 NORTH MISSISSIPPI MEDICAL CENTER

How Do I Know The Patient is in Isolation?

- Teletracking
 - Signage
 - Reports
 - Hand off and communication
 - Electronic Health Record
- 

Approved Disinfectant Products

Oxivir: 1 minute wet time. Used for general cleaning.

Bleach Germicidal Wipes: Clorox
3 minute wet time. Used for patients with suspected/confirmed c-diff.

Additional cleaners may be approved by areas such as EVS. It is important to follow the manufactures instructions and wet times.



Waste Disposal



RED
MEDICAL



BLUE
LINEN



WHITE
GENERAL

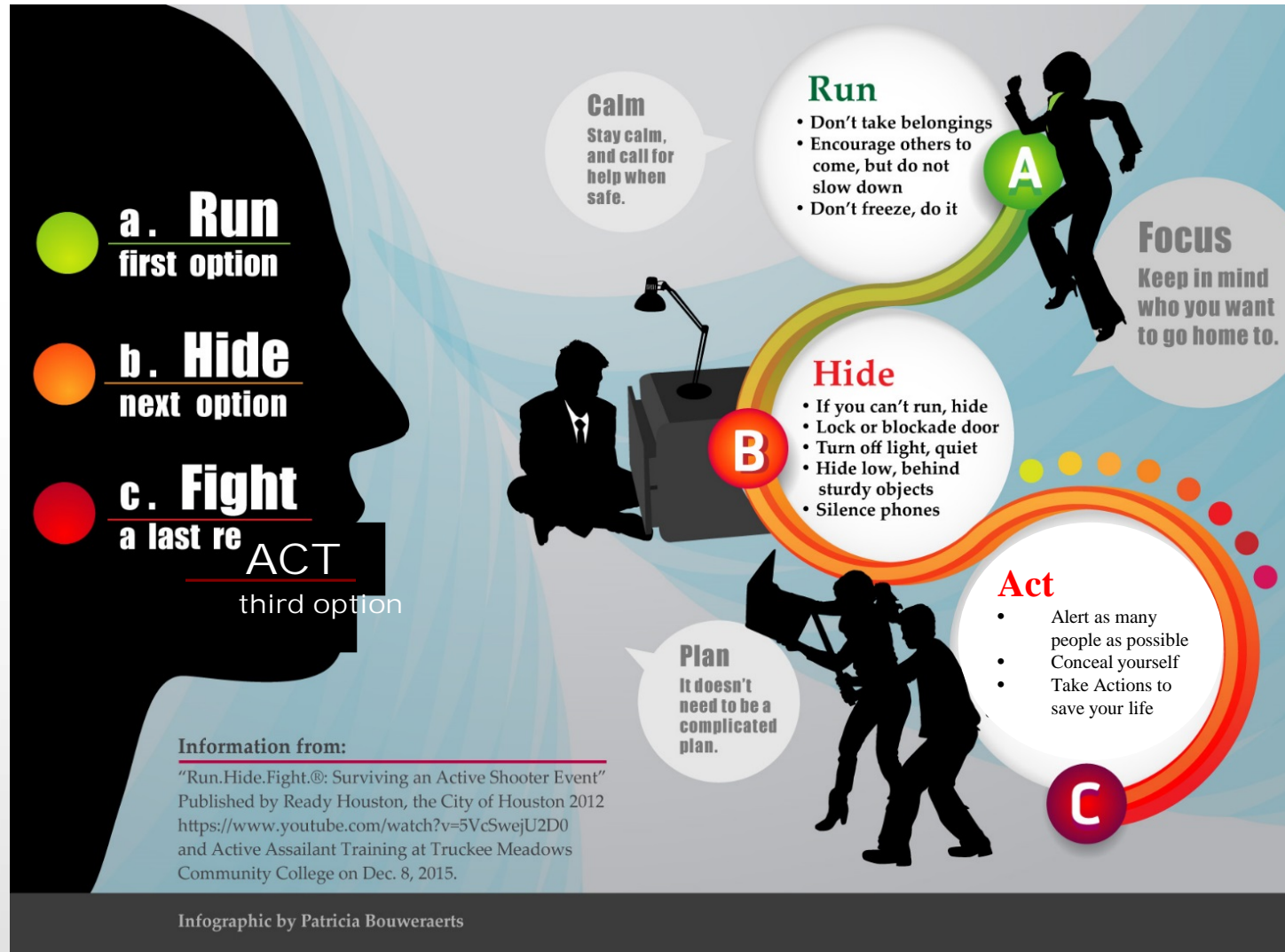
SAFETY



Codes at NMHS Facilities

CODE RED	Fire
CODE BLUE	Patient Resuscitation
CODE GREEN	Emergency Disaster
CODE YELLOW	Hazardous Spill
CODE BLACK	Bomb Threat
EMERGENCY SECURITY ALERT	Active Aggressor
CODE SECURE	Security Notification
CODE ADAM	Infant/Child abduction
CODE GRAY	Inclement Weather

Emergency Security Alert - Active Aggressor



Code Red

Dial 60 and RACE for On-site

Dial 911 for off-site



- **Rescue**
- **Alarm**
- **Contain**
- **Extinguish**

Emergency Management

Code Green

- **Level 1**
 - Which is the ***stand-by level*** and is dealt with only by those staff members already on duty
 - Command post forms / NIMS compliance
- **Level 2**
 - Which establishes the ***Labor Pool*** for nursing in the Nursing Coordinator's office and is a liaison with the command post
- **Level 3**
 - Which is the ***most extreme*** level requiring ***all hospital personnel*** to be available for duty and involves outside agencies (Red Cross, HAZMAT Team, National Guard)

Bomb Threat Procedure

- Keep the caller talking while alerting someone nearby
- Notify Administration, Director of Security and Director of Safety
- Let the caller know that detonation will cause injury or death to patients



Chemical Spill Response

- Know your chemicals!
- Evaluate and contain the spill
- Attend to any first aid needs
- Notify the Director of Safety, Environmental Services Director, and Facilities Director
- Remain at the scene until the Response Team arrives



**SAFETY
FIRST**

**Use gloves, eye wear &
protective apparel with
all chemical handling**

Secure Environment

Security will be involved in the following type of incidents: Contact **3064**

- Missing Patients
- Loss, Theft or Vandalism
- Vehicular Accidents
- Threats to Persons or Facility
- Disruptive Patients, Employees or Visitors
- Fires or Disaster Management
- Forensic Patient Management



Good to Know Information

- In any code situation, please notify your preceptor as soon as possible.
- Your preceptor will guide you in what you need to do.
- Never be afraid to report anything suspicious or that does not look right.
- When equipment does not work correctly, notify your preceptor or instructor and Biomed needs to be contacted at 3032.
- A Red receptacle or outlet is connected to emergency power in a power loss.
- NMHS has all tobacco free campuses.
- Safety mirrors are located in high traffic areas to help prevent collisions.
- Open doors slowly to provide for safety of those on the other side of the door.
- If you spill something, you clean it up.
- If you see a spill, please contact Environmental Services, extension 3443.
- Always practice safe lifting and get help when needed.

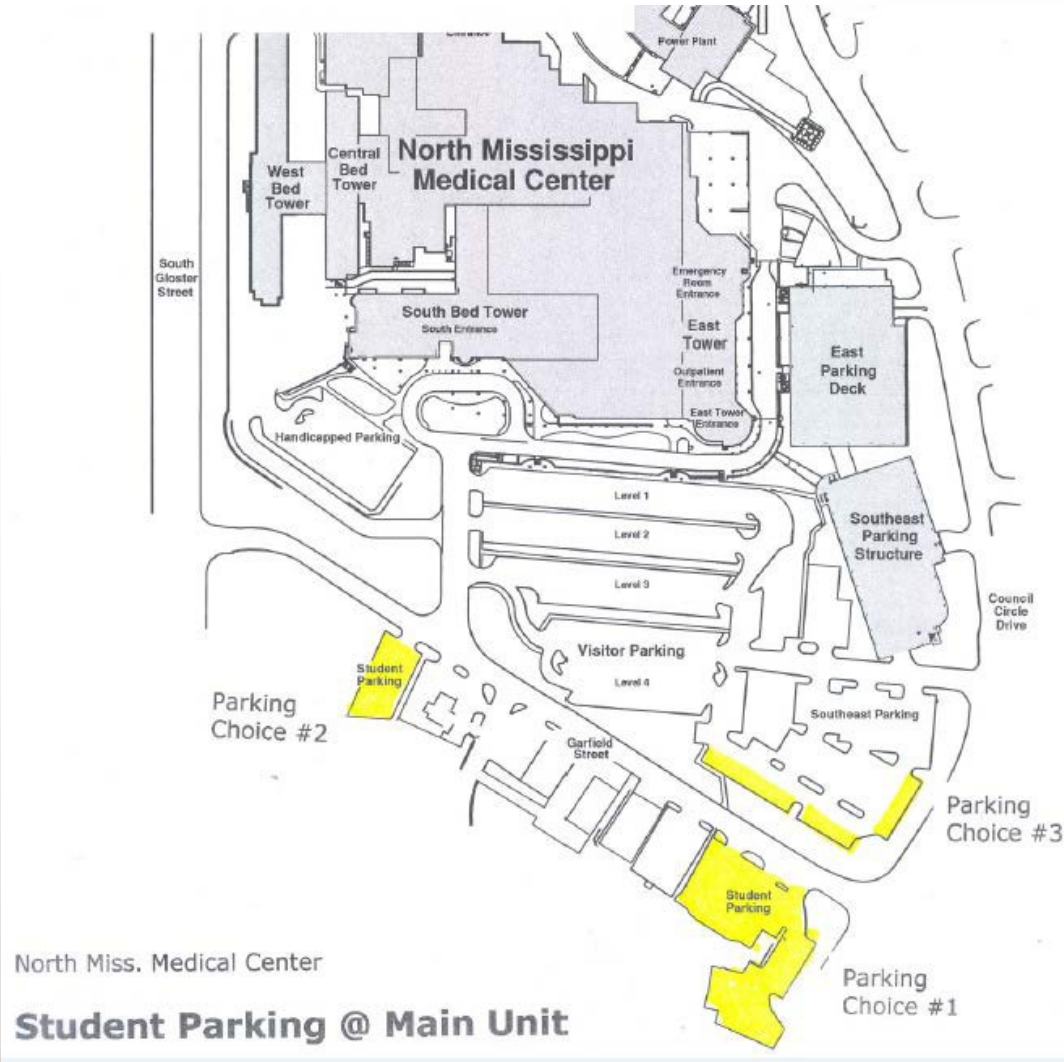
Dress Code

- All students are expected to wear scrubs, school uniform, or business professional clothes and closed toe shoes in clinical areas.
- All students must wear their school identification badge and a NMHS badge, one of the two badges should have a photo of the student on it.
- NMHS badge can be obtained from the NMMC-Tupelo campus security desk or your instructor.


Student Parking at NMMC Tupelo

Primary student parking – two designated student parking lots on Garfield Street. Highlighted Parking Choice #1 and #2

Back up parking – lower portion of the expanded southeast parking lot. Highlighted Parking Choice #3.



For more information

- Student Services – 662.377.6850
 - Employee Health – 662.377.4107
 - Infection Control – 662.377.3604
 - Security Department – 662.377.3064
 - Tupelo Main Unit – 662.377.3000
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Legal Issues

- Students and employees alike must be aware of the various legalities that regulate the healthcare system. Adhering to these regulations will ensure a safe, caring, and legal environment for those we serve and for those with whom we serve.
- In this segment, you will learn about Protective Health Information, TPO (Treatment, Payment, Operations), Patient Consent and Authorization, Restricted Access to Records, HIPAA, Penalties and Misuse of Patient Information, compliance, Risk Management, Patient Rights and Responsibilities, Advance Directives, and Patient Abuse and Exploitation.

What is PHI?

- Protected (Personal) Health Information (PHI) is individually identifiable information in any form or medium that relates to the past, present, or future physical or mental health or condition of a participant
- Data elements – date of birth, social security number, address
- Can be written, verbal, or electronic
- This is not PHI (broken arm)
- This is an example of PHI (Jane Doe MR#1234567 has a broken arm)
- Never email a social security number

What is HIPAA?

- Health Insurance Portability and Accountability Act of 1996
- Three main parts: insurance, portability, and privacy

When should medical records be accessed?

- Medical records should only be accessed for three reasons, TPO:
 - Treatment-healthcare providers may access records in dealing with the treatment of their patient
 - Payment-billing and coders must access records to correctly bill for services
 - Operations-support services when needed (example environmental services)

Beyond TPO Authorization

- Patients must still provide authorization to healthcare providers for most PHI uses and disclosures beyond TPO
- Unless otherwise required or permitted by law
- Law Enforcement/Government Agencies (generally provide written request, subpoena, or court order)
- Civil Litigation
 - Authorization signed by parties
 - Subpoena – notice to parties, wait 10 days
 - Court order

Minimum Necessary

- Privacy Rule - reasonable efforts to limit the use or disclosure of, and request for PHI, to the minimum necessary to accomplish the intended purpose
- Staff's access to records is limited to the patient(s) they are actively treating
- Summarized version of the above-only look at a medical record if you need to see it to provide care to that patient or document.

Is it ok to...

- Talk at the nurses' stations? Yes, use a low voice and be mindful of near by listening ears.
- Discuss PHI in a patient's room with visitors present? Yes, if you receive permission from the patient to discuss the information with visitors present.
- Have names on the doors? Yes, but we do not do this at our facilities.
- Have sign in sheets? Yes
- Announce a patient name in the ED or waiting room? Yes, but do not announce any other information.

Civil Penalties

<u>Violation</u>	<u>Minimum</u>	<u>Maximum</u>
No Knowledge	\$100/\$25,000	\$50,000/\$1.5 Mil
Reasonable Cause	\$1,000/\$1 Mil	\$50,000/\$1.5 Mil
Willful Neglect (Corrected)	\$10,000/\$250,000	\$50,000/\$1.5 Mil
Willful Neglect (Not Corrected)	\$50,000/\$1.5 Mil	\$50,000/\$1.5 Mil

Criminal Penalties

<u>Violation</u>	<u>Fine</u>	<u>Imprisonment</u>
Knowing Obtain/Disclose	\$ 50,000	One (1) Year
False Pretenses	\$100,000	Five (5) Years
Commercial Advantage	\$250,000	Ten (10) Years

NMHS Penalties

- NMHS reserves the right to not allow students to come to their campus if there has been an issue with, but not limited to privacy or compliance.
- Privacy Officer may terminate computer access codes and may require remedial training for violations

Risk Management Safety

It's Everybody's Job

Areas of Interest and Concern

- Organizational Ethics – do the right thing for and by all concerned
- Patient Rights and Responsibilities – what they are entitled to, what we need from them to provide the very best care
- Advance Directives – prior planning by patient for decisions regarding care
- Patient Abuse and Exploitation – if known, witnessed, or suspected, must be reported

Common Risk Management Issues

- These are areas of focus in providing a safe and caring environment.
 - Patient/Visitor falls
 - Patient/Visitor complaints
 - Suspected patient abuse
 - Medication errors
 - Policies/Procedures – must be clear and easy to understand
 - Medical malpractice issues

What are Organizational Ethics?

- Conduct & Conflict refers to how we operate as a healthcare organization.
- The Code of Ethics is adhered to regarding billing, basic decisions, communication, and patient rights.
- Organs – partner with MORA for donations (Mississippi Organ Recovery Agency)
- Research – regulated by the Institutional Review Board (IRB) to ensure understanding of risk for participating individuals.
- Non-participation in patient care – allows for discussion of provider rights/beliefs.

Patient Rights

Here are a few examples

- Guidelines – if you suspect that a patient is being denied care, contact your Clinical Instructor, Preceptor, or Coach.
- Proper care and treatment – patients have access regardless of race, creed, gender, national origin, religion, disability, or payment source
- We will provide care that respects cultural, psychosocial, and spiritual values (ethical treatment)
- Care and treatment information – information provided to allow patient participation in decisions regarding diagnosis, prognosis, risks, benefits, and alternatives (two-way communication with patients and families)
- Privacy, dignity, courtesy, respect, and compassion
- Ethical treatment

*Remember the Golden Rule
Treat others as you would like to be treated.*

Patient Responsibilities

Here are a few examples

- It is vital that those we serve provide accurate and complete information regarding present and past:
 - Complaints
 - Illnesses
 - Hospitalizations
 - Medications
 - Other health related information

Patient Responsibilities

- We require our patients, families, and guests to follow these guidelines
 - Follow the recommended treatment plan
 - Follow hospital rules/regulations:
 - Noise control – respect others
 - No smoking – tobacco free campus
 - Monitor the number and behavior of visitors – to prevent conflicts or disturbances that could compromise patient care

Advanced Directives

- A Living Will and an Advance Directive are similar documents. A patient has the right to make decisions in advance regarding his/her healthcare. This could apply to pain medications, life support, feeding tubes, etc. Advance directive documents are appropriate for all individuals age 18 or older regardless of current health status.
- Federal Law – Patient Self Determination Act of 1990 requires that healthcare providers inform patients about advance directives and their right to make healthcare decisions.

Advance Directives – Mississippi Law

Power of Attorney for Health Care

- Mississippi's law regarding advance directives went into effect July 1, 1998. The state now only has one advance directive document – Power of Attorney for Healthcare. It is not necessary to register with the Mississippi State Department of Health. It is a legal document, and its execution must be witnessed by two individuals not related to the patient (to prevent any conflict of interest). A NMHS employee cannot serve as a witness while at work. The document is not kept on file, as it can be amended or removed by the patient at any time.


Patient Abuse and Exploitation

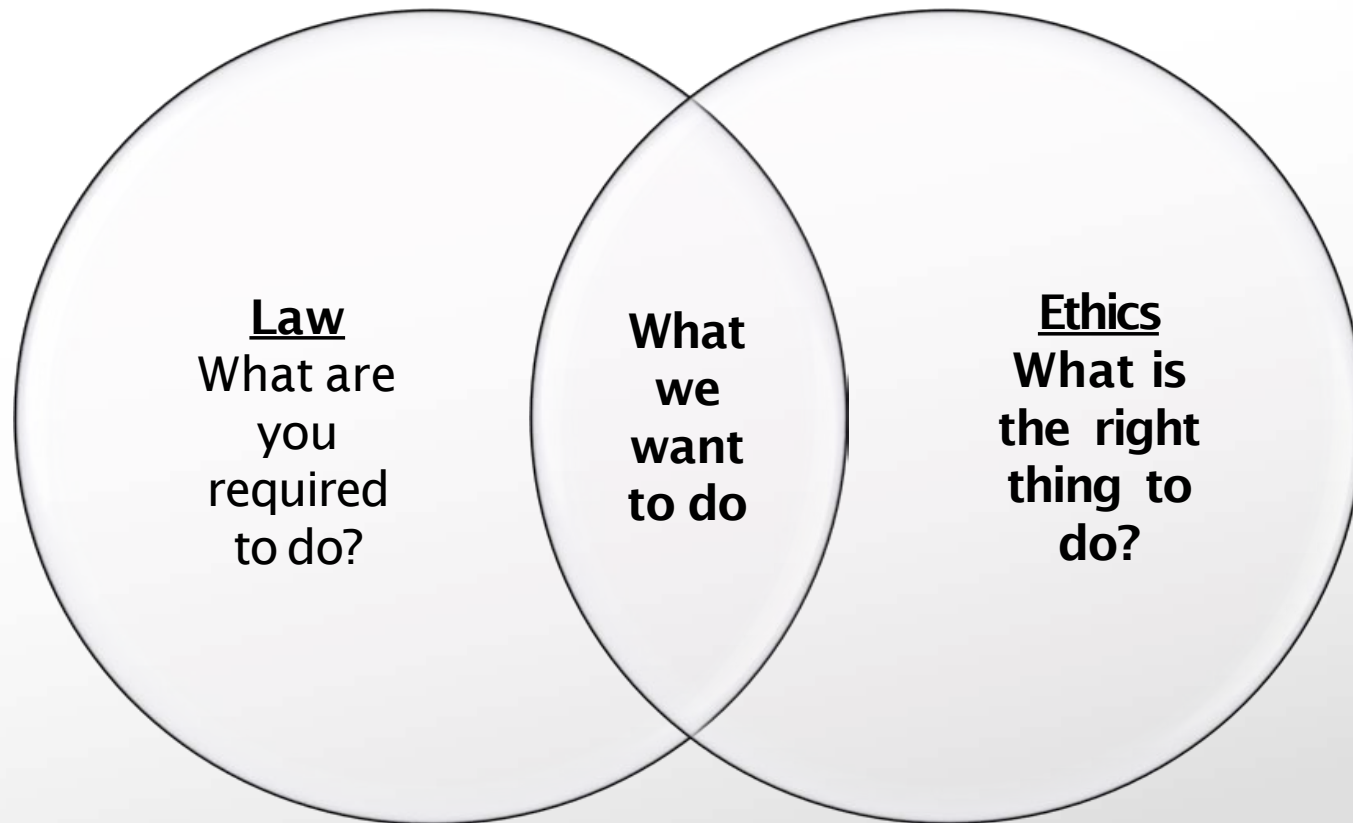
- “Any person who, within the scope of his/her employment at a care facility or in his professional capacity, has knowledge of or reasonable cause to believe that any patient or resident (regardless of age) of a care facility has been victim of abuse or exploitation shall report or cause a report to be made of the abuse or exploitation.”

When and Where do you report Patient Abuse and Exploitation

- If you question an incident of abuse or exploitation contact Risk Management, the Legal Department, the Social Work department, your clinical instructor or immediate supervisor.
- Examples of abuse include physical assault, rape, sexual molestation, domestic abuse, elder neglect/abuse, and child neglect/abuse.
- If a report is appropriate, it must be made within **24** hours of discovery with a written report made within **72** hours.

Compliance Plan

- Quality Care – most important for every patient every time
 - Physician Relationships
 - Vendor Relationships
 - Coding, Billing, and Reimbursement – includes documentation
 - EMTALA – deals with transfers, mostly in ED
 - HIPAA, Privacy, and Security
- 



Intersection of Law & Ethics

If ethics and culture differ, culture will trump ethics every time.

When everyone is looking and when no one is looking,
do the right thing.



✓ Right Thing

✓ Right Time

✓ Every Time

A mistake is not fraud, but a pattern of mistakes is fraud.

Rule of Thumb

- When faced with a compliance or ethical decision, ask yourself:
 - Is it legal?
 - Does it comply w/ NMHS policy?
 - Is it consistent with our Mission, Vision, and Values?
 - Could it harm patients, employees, MD's, and/or visitors?
 - Am I being fair and honest?
- If you know it's wrong, ***Don't Do It!***
- If you're not sure... ***Ask Before You Act!***

Hypothetical #1

You are walking down the hallway and notice a piece of paper. What do you do?

- Answer: Pick it up and throw it away

What if the piece of paper contains PHI?

- Answer: Shred it.....

Hypothetical #2

An employee or student provides high quality patient care. At the end of the shift, the employee or student documents care hurriedly.

What are the risks?

- Quality patient care & Continuum of care – right documentation on the right patient
- Professional liability – missing documentation
- Compliance – providing one level of care and documenting a different level of care
- Financial – reimbursement for documentation

Hypothetical #3

An employee documents care that was either not provided or not consistent with quality patient care.

What are the risks?

- Quality patient care & Continuum of care – right documentation on the right patient
- Professional liability – missing documentation
- Compliance – providing one level of care and documenting a different level of care
- Financial – reimbursement for documentation

Reporting Compliance Issues

- **NMHS Compliance Hotline - (888) 246-2808** (may leave anonymous tips)
- Chief Compliance Officer - 377-4148
- General Counsel/Privacy Officer - 377-4229
- Employment Services - 377-3062
- Compliance Liaison – Community Hospitals & Clinics
- Supervisor
- Instructor or preceptor

Thank You!

Welcome to North Mississippi Health Services. We look forward to working with you during your student experience with us!

When you exit this presentation, complete the Student Orientation Quiz. There is no need to print a certificate, your score will be recorded.