Orientation Program for Nursing Students and Instructors

950 West Wooster Street
Bowling Green, OH. 43402
419-354-8900

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Introduction - Directions

Welcome to Wood County Hospital!

It is great to have students in our facility. We hope during your affiliation with us, we will be able to give you many opportunities for learning.

To meet our patient's needs safely and effectively, all Wood County Hospital personnel, administrative staff, and students are required to participate in orientation and periodic education founded on regulatory requirements from agencies such as The Joint Commission, Ohio Department of Health, and OSHA among others. Topics reviewed include environment of safety, quality initiatives, infection prevention, and confidentiality.

Directions

To ensure you can participate in your planned learning experience at Wood County Hospital:

Read this document in its entirety

Print & sign the attestation form

- **Provide the signed copy to your school program director or to your clinical instructor prior to the start of the clinical/precepting experience.**

If you have questions or concerns after completion of this program or during your experience at Wood County Hospital, please contact:

Nursing Professional Development Practitioners

- Marlene Jett MSN, RN, NPD-BC jettm@woodcountyhospital.org or
- Julie Shank MSN, RN shankj@woodcountyhospital.org

Wood County Hospital – Mission, Vision, & Values

MISSION

The Wood County Hospital Board of Trustees, Employees, Medical Staff and Volunteers are dedicated to providing the highest quality preventative, restorative, educational, and rehabilitative healthcare services to all. In fulfilling our mission, we shall strive to:

- Provide the highest quality care;
- Maintain an environment attractive to retain qualified healthcare personnel;
- Identify, initiate and provide innovative services in response to the healthcare needs of the region;
- Cultivate a proactive approach to the provision of safe, effective care;
- Identify and implement business practices that promote the stability and viability of Wood County Hospital;
- Foster a spirit of cooperation among area providers.

Vision

Wood County Hospital will serve as the core provider for medical, surgical and preventive services in Wood and Henry counties. In achieving this status, Wood County Hospital will operate in the top quartile for outcomes; and at a competitive cost compared to other providers. Wood County Hospital will collaborate with other providers to assure care is appropriate, coordinated, and cost effective.

Values

Collaboration, Integrity, Respect, Compassion, Loyalty, Excellence

Accreditations

Wood County Hospital is fully accredited by The Joint Commission

Wood County Hospital has achieved Stage 6 of the HIMSS Analytics Electronic Medical Record (EMR) Adoption Model.

This distinction honors our organizational accomplishments to implement technology solutions that have the ability to improve patient safety and quality of care.

Wood County Hospital is also working on achieving Stage 7 of HIMSS Analytics Electronic Medical record (EMR) Adoption Model.

Wood County Hospital has been recognized

- By the Chartis Center as a top 100 Rural and Community Hospital in the US (2022, 2025)
- As a Top 100 Hospital by Forbes (2022)
- With a 5-Star Quality Rating System from the Centers for Medicare & Medicaid Services (2023)
- Wood County Hospital been recognized by the Women's Choice Award as one of America's Best Hospitals for Orthopedics and America's Best Hospitals for Outpatient Experience for 2026—a distinction that places the hospital among a select group of top-performing hospitals nationwide.

Accreditations cont.

The **Center for Weight Loss Surgery** is accredited by the Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program.

The Maurer Family Cancer Care Center is accredited by the Commission on Cancer, a Quality Program of the American College of Surgeons (ACS).

Wood County Hospital, **Vascular Diagnostics Center** accreditation by the Intersocietal Commission for the Accreditation of Vascular Laboratories (ICAVL).

Wood County Hospital **Blood Gas Laboratory,** Accreditation Committee of the College of American Pathologists (CAP).

The **Sleep Disorders Center** is accredited by the American Academy of Sleep Medicine (AASM).

Wood County Hospital is accredited by the Ohio State Medical Association for four years as a **provider of continuing medical education for physicians**.

Wood County Hospital's **Main Laboratory** has been awarded accreditation by the Accreditation Committee of the College of American Pathologists (CAP) based on results of an on-site inspection. The main Laboratory is one of more than 7,000 CAP-accredited facilities worldwide.

Commitment to Safety

Emergency Codes & Situations

Commitment to Safety – Emergency Codes

All Emergency Codes are called by dialing #3333

CODE ADAM: Infant or child abduction. Secure all exits and check your area. Position a staff member at each exit adjacent to your department. Report suspicious sightings to House Supervisor. Keep maximum confidentiality.

CODE BLACK: Bomb threat. Look for suspicious packages or people in areas where they shouldn't be. Report any suspicious findings to the call center.

CODE BLUE: Cardiac/Respiratory arrest. First responder initiates CPR, team members assigned daily by House Supervisor, ED RN is team leader and ED Physician is lead provider.

Commitment to Safety – Emergency Codes

All Emergency Codes are called by dialing #3333

CODE BROWN: Missing adult patient. Secure all exits and check your area. Position a staff member at each exit adjacent to your department. Report suspicious sightings to shift supervisor. Keep maximum confidentiality.

CODE SILVER: Person on campus using or displaying a weapon. Activate the closest Panic Button or call 9-911. Stay away from the area and evacuate patients.

CODE ORANGE: Hazardous Material Incident Response. Notify House Supervisor immediately.

RAIN

R= Recognize

A= Avoid the area

I = Isolate the area

N= Notify the appropriate support.

Commitment to Safety – Emergency Codes

All Emergency Codes are called by dialing #3333

CODE PINK: Pediatric cardiopulmonary arrest.

CODE SCARLET: Transfusion Alert – Provider declares that a patient has met Massive Transfusion criteria. Code Blue Team and phlebotomist respond

CODE RED: Activate fire plan. With activation give location. **In case of fire, do not use elevators**

- **R** **RESCUE** the patient or any person in immediate danger**.**
- **A** **ALARM** - pull the alarm**.**
- **C** **CONTAIN** the fire by closing the doors**.**
- **E** **EXTINGUISH** the fire if it is small

Pull stations are located throughout the building.

We use ABC extinguishers that will work on any type of fire.

Also remember when using fire extinguishers:

- **P** **Pull** the pin.
- **A** **Aim** at base of fire
- **S** **Squeeze** handle to eject chemicals
- **S** **Sweep** the fire

Commitment to Safety – Emergency Codes

All Emergency Codes are called by dialing #3333

CODE VIOLET: Unruly or out of control patient or visitor. Area needs immediate assistance. One to two staff members from each department are to respond.

CODE YELLOW: Activate Disaster Plan. See department specific plans for details. Students are usually asked to check with your instructor before doing anything. If coming into the building you may be turned away since not a Wood County Hospital employee.

Code Gray: Severe Weather/Thunderstorm/Tornado Watch or Warning.

Confirm type of weather emergency, if Tornado Warning:

- Move patients to center hall or center rooms away from windows.
- If patient cannot be moved, move bed close to inside wall, away from windows and cover patient with blankets and pillows.
- Keep room doors shut.

Commitment to Safety – Fire

- Rescue patients in immediate danger first!
- Evacuate to a safer area on the unit
- Do not prop doors open, check all doors for those left behind
- Move ambulatory patients first
- Non-ambulatory patients should be moved in most practical method given the situation

Commitment to Safety – Evacuation Types

1. **Horizontal Evacuation** - moving patients and personnel from any section of the building where danger exists from smoke, fire, or other dangers, to an area on the same floor.
2. **Vertical Evacuation** – moving patients down to a safe area below the fire – never use the elevators – use available evacuation equipment

Commitment to Safety – Evacuation Methods

Horizontal Moves: Move entire bed, cart, wheelchair

Vertical Moves: Stair Chair –

- Weight limit #500
- Patient must be able to transfer to chair and hold self upright.
- Use two persons to maneuver chair down stairs.

ParaSlyde (BaraSlyde) Sled –

- ParaSlyde weight limit #500
- BaraSlyde weight limit #800
- Place patient in sled by using log roll
- Strap patient in according to directions found on sled
- Use a minimum of 4 personnel to lower sled to floor

Commitment to Safety

National Patient Safety Goals (NPSGs)

Commitment to Safety – National Patient Safety Goals

By following The Joint Commission's National Patient Safety Goals Wood County Hospital shows our commitment to the safety of our patients.

Patient Identification -

- Before **any patient care and especially before drawing blood specimens, blood administration, medication administration, or start of a treatment or procedure** always identify your patient with at least 2 patient identifiers:
  - It is Wood County Hospital Policy to ask your patient to state their first and last name and birth date and verify this by comparing to armband, MAR, lab order, or other paperwork/EMR

Commitment to Safety – National Patient Safety Goals

Improve staff communication –

- Critical Test Reporting
  - Communicate correctly and timely – RNs must report critical values within 1 hour of original reporting.
  - The RN must:
    - Confirm who is calling
    - Confirm two patient identifiers (name and DOB)
    - Confirm name of test and result
    - READ BACK the patient name, critical test name and result
    - Notify responsible licensed caregiver within 1 hour unless results meet exclusion criteria

- Use tools such as SBAR when communicating with team members (physicians, providers, peers)
  - S- situation – briefly describe situation. Give succinct overview
  - B- background – briefly state pertinent history. What got us to this point?
  - A – assessment – summarize the facts. What do you think is going on?
  - R – recommendations – What are you asking for? What needs to happen next?

Commitment to Safety – National Patient Safety Goals

Use medications safely

- All medications should be labeled on or off a sterile field. This includes injectable meds in syringes or IV bags
- Care of patients taking anticoagulants for prophylaxis, stroke, or treatment
  - Examples include: Coumadin, Lovenox, Heparin, Lepiridan, Argatroban, Arixtra, Angiomax, & Pradaxa
  - Watch for side effects such as
    - Bleeding, excessive bruising, petechiae, hematoma, decreased Hgb, Hct, Plt counts, HIT, Hemorrhage
  - Teach patients about compliance with:
    - Drug regimen and follow-up lab if applicable
    - Discharge instructions applicable to medication prescribed
    - Dietary restrictions
    - Drug interactions

Alarm Safety

- Pay attention to alarms, know the equipment in your area and what your expectations/limitations are to using this equipment and any associated alarms.

Commitment to Safety – National Patient Safety Goals

Prevent Infection

- Use proven guidelines to reduce infections that are hard to treat
- Follow current CDC hand hygiene guidelines

Identify Patient Safety Risks

- All patients will be screened for risk of suicide or homicide
  - If you identify a patient at risk, immediately tell your nurse

Universal Protocol – Time Out

- Make sure the correct patient gets the correct surgery/invasive procedure on the correct location
- Team verbalizes before the start of a procedure the
  - Time
  - Patient name
  - Date of birth
  - Site if applicable
  - Procedure planned

Commitment to Safety

Medication Administration

Commitment to Safety – Medication Administration

Clinical instructors MUST be present when students are passing medications at the bedside – NO EXCEPTIONS – this is WCH POLICY –All medications are locked while not in use; access to automated medication cabinet is through your instructor only.

10 rights of medication administration

Before administration

- Right Patient
- Right Drug
- Right Dose
- Right Route
- Right Time
- Right to Education – what is med for, expectations, side effects, adverse reactions
- Right to Refuse – make sure patient understands rationale for med, is alert & oriented, and that ordering provider is aware
- Right Assessment – if giving Coumadin, what is the INR, Potassium? What is the patient's pain score, appropriate for ordered medication?

After administration

- Right Evaluation – did the medication work as intended, side effects, adverse reaction?
- Right Documentation

Commitment to safety – Medication Administration

- The eMAR must be used when getting medications out of the automated cabinet and at the bedside during administration
- Medications must be checked and confirmed with 2 patient identifiers using medication labels, patient name band, and eMAR ,
- Scanning the patient armband (while looking at it and confirming patient name and date of birth) and the medications are required. Reading and responding to alerts assist in avoiding errors.
- Think through appropriateness of medication ordered
  - Do you know what the medication is intended to do? Side effects? Is the calculation accurate? Are there look alike sound alike medications that could have been accidently ordered?

Commitment to Safety – Medication Administration

Adverse Drug Events (ADE) - *When do you report an ADE?*

- **A significant ADE is any unexpected, unintended, undesired, or excessive response to a drug that:**
  - Requires discontinuing the drug
  - Requires changing the drug therapy
  - Requires modifying the dose (except for minor dose adjustments)
  - Necessitates admission to the hospital
  - Prolongs stay in hospital/HCF
  - Necessitates supportive treatment
  - Significantly complicates diagnosis
  - Negatively effects prognosis
  - Results in temporary or permanent harm, disability, or death

When an ADE is observed, report to pharmacy through AED icon found in Cerner Tool Bar

Commitment to Safety – Antimicrobial Stewardship

- The goal is to optimize clinical outcomes while minimizing unintended consequences of antimicrobial use.
- Elements of the antimicrobial stewardship programs include
  - Reduce inappropriate antimicrobial use
  - Monitor and prevent bacterial resistance
  - Decrease time of appropriate antimicrobials
  - Provide direct, real-time feedback to providers
  - Optimize antimicrobial regimens
  - Education for patients/families and healthcare staff
  - Track antimicrobial usage

Commitment to Safety – Antimicrobial Stewardship

Nursing Role?

- As coordinators of care, nurses:
  - Are antibiotic first responders and central communicators
  - Are 24 hour monitors of patient status, safety, and response to antibiotic therapy
  - Assure that cultures are performed before starting antibiotics
  - Review medications as part of their routine duties and can prompt discussion of antibiotic treatment, indication, and durations
  - Use evidence-based infection prevention techniques to minimize antimicrobial resistance

Successful implementation of Antimicrobial Stewardship has many beneficial outcomes including:

- Decrease ICU and hospital length of stay
- Decrease time to appropriate antimicrobials agents
- Reduction in antibiotic related adverse events
- Decrease in antimicrobial resistance patterns
- Reduction in super-infections
- Decrease pharmacy department antimicrobial cost

Commitment to Safety

Management of Transfusion Reactions

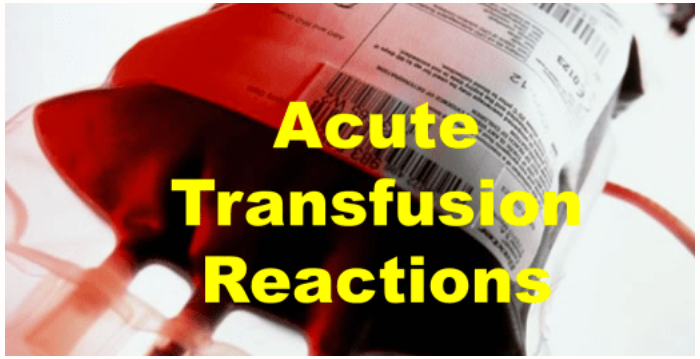
Blood Product Transfusion

- As a student, you may participate in the care of the patient receiving blood, but you must be aware of important patient care practices including:
  - The most critical time to observe for transfusion reaction is the first 15 min.
  - The RN must remain with the patient the first 15 min.
  - Reactions can occur during or after a transfusion.

Blood Transfusion Reaction

- Signs and symptoms of a transfusion reaction
  - Fever (temperature elevation of >1 C° or >2 F°)
  - Flushing
  - Pain at infusion site
  - Chest Pain
  - Hypotension
  - Tachycardia
  - Urticaria
  - Hematuria

- Alert the patient's RN if any sign or symptoms recognized



Commitment to Safety

The Environment of Care

Commitment to Safety - Customer Service

WOW –

Patient Experience

- Who, What, & Why?
- Who – am I?
- What – I am doing for you?
- Why – is it important to the patient and/or family

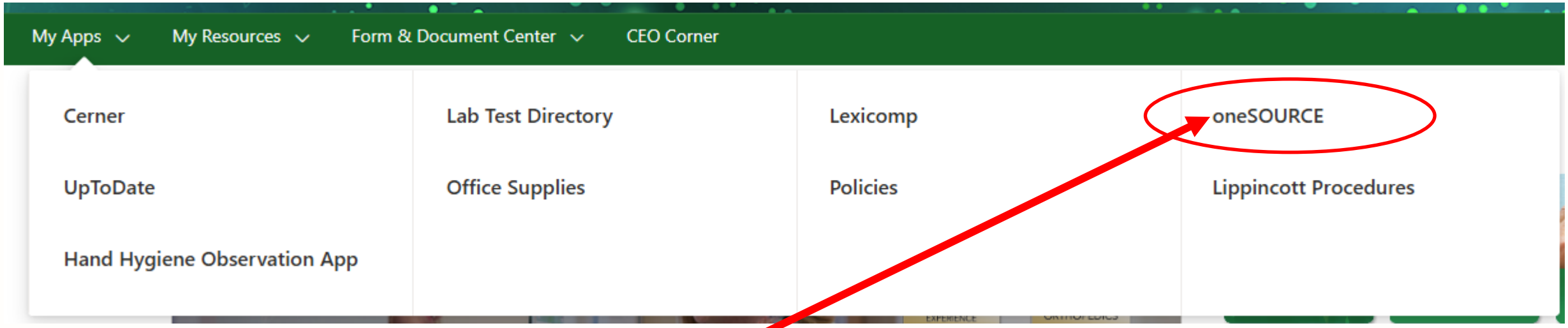
N.I.C.E.

- **N**- Name BadgeCollege ID to be worn at all times
  - DO NOT WEAR STUDENT ID's FROM AREA HOSPITALS!
- **I**- Introduce – yourself, your role, and the purpose you are in contact with the patient
- **C**- Check – check armband to verify patient identity – using 2 patient identifiers
- **E** – Explain procedures and or processes in an easy to understand manner

Commitment to Safety - Utilities

- If the electrical system fails the generator will go on within 15 seconds
  - Be sure all critical patient care equipment is plugged into red outlets
- Patient care equipment should be connected to the outlet closest to the patient
- Unplug and plug in all electrical equipment with the power switch in off position
- Never pull plugs from the wall by pulling on the cord.
  - If you notice a cord is frayed or hot, unplug and notify your instructor.

Commitment to Safety –



HAZARD COMMUNICATION

- **oneSOURCE=SDS (Safety Data Sheets)** contain information from manufacturers for safe use of chemicals. SDS may be viewed in The Pulse (hospital Intranet)

Commitment to Safety

Provide safe environment for all patients, families, staff and visitors

- Perform hand hygiene before and after each patient contact, after using the restroom, and before and after eating, coughing or sneezing, upon entering and upon exiting the hospital.
- Oxygen safety – always secure O_2 cylinders – if cylinder is tipped over the stem could be knocked off and cylinder becomes unguided missile
  - Do not lay oxygen tank on wheelchair or a bed
    - Temporary storage – mount on W/C or stretcher
    - Long term storage – in racks

Commitment to Safety

Patient Rights

Patients Rights

- End-of-Life Care
  - Patients have the right to receive treatments to manage symptoms and keep them comfortable at the end of life, known as palliative care
  - The goal of palliative care is to help patients maintain comfort and quality of life, regardless of whether their illness is curable. Based on preference, palliative care may be combined with treatments to provide quantity of life
- Choices
  - The patient has the right and should be encouraged to ask questions
  - The patient has the right to make decisions about their plan of care and recommended treatment
  - The patient has the right to have person of choice present during hospitalization, (unless presence compromises patients rights, safety, or health)
- Privacy
  - Patients have the right to privacy
    - Respect HIPAA and Confidentiality Rules
    - Knock before entering, ask permission before performing personal care activities.
    - Provide bodily coverage while providing all care

Patient Rights - Diversity

- Patients have the right to care, free of discrimination - healthcare providers will be considerate, respectful, & compassionate regardless of patients age, gender, race, nationality, religion, sexual orientation, gender identity or disability.
- Wood County Hospital has broad patient population including but not limited to race, national origin, physical ability, religion, and insurance status.
  - Some racial diversity consists of Caucasian/White, Black/African American, Hispanic/Latino, and Asian/Pacific Islander. Some languages include English, Spanish, Chinese, and Arabic. While others who are deaf use American Sign language.
  - Religious diversity include Catholicism, Baptist, Muslim and Judaism
- When you have a patient who is deaf or speaks another language, please discuss with hospital personnel and refer to the Language Line application

Patient Rights - Diversity

Wood County Hospital is committed to providing a work environment that is free of discrimination and unlawful harassment.

Actions, words, jokes, or comments based on an individual's sex, race, ethnicity, age, religion, or any other legally protected characteristic will not be tolerated.

Speak with the unit's supervisor if you want to report an incident of unlawful harassment. If he or she is unavailable or you feel more comfortable, you should immediately contact the Corporate Compliance anonymously @(877) 380-5437

- Retaliation is prohibited

Patient Rights – Abuse & Neglect

The patient has the right to protective services – if a healthcare provider identifies or is suspicious of child neglect, abuse, exploitation, or hazardous living conditions he or she will follow Ohio law and WCH policy related to reporting.

Suspicious physical signs & behaviors of Child Abuse and Neglect include:

- Unexplained cuts, burns, bruises, fractures
- Condition doesn't match explanation from caregiver
- Pain or bleeding with urination or defecation
- Fear of adults
- Secretive
- Inappropriate knowledge of sexual acts
- Lack of care, unbathed/dirty, extreme
- Nightmares and bedwetting
- Extreme hunger
- Depression
- Hostility
- Lack of concentration
- Eating disorders
- Self destructive or suicidal behavior

Patient Rights

The patient has the right to protective services – if a healthcare provider identifies or is suspicious of elderly neglect, abuse, exploitation, or hazardous living conditions he or she will follow Ohio law and WCH policy related to reporting.

Suspicious physical signs & behaviors of elderly or adults with developmental disabilities abuse and neglect include:

- Unexplained cuts, burns, bruises, fractures
- Signs of being restrained
- Bruises around breasts, inner thighs, or genitals
- Unexplained venereal disease
- Unexplained vaginal, penile, or anal bleeding
- Financial exploitation
  - Sudden close relationship with much younger person
  - The caregiver's only means of support is the patient
  - Caregiver restricts the elder's contact with community
- Bed sores
- Unbathed/dirty
- Nightmares and bedwetting
- Depression
- Non-communicative
- Dehydration/malnutrition
- Extreme hunger
- Caregiver belittles, threatens, or controls patient

Patient Rights

The patient has the right to protective services – if a healthcare provider identifies or is suspicious of domestic physical, verbal or sexual abuse he or she will follow Ohio law and WCH policy related to reporting.

Suspicious physical signs & behaviors of Domestic Violence

- Discrepancy between injury and history given by patient
- Verbal admission of abuse
- Multiple injuries with differences in ages
- Disproportionate amount of time between injury and time medical treatment sought
- Injuries found on areas normally covered by clothing
- History of being accident prone
- Untreated old injuries
- Complaints of chronic pain
- Bizarre or inappropriate history
- Alcohol or drug abuse history in patient or spouse
- Previous suicide attempts
- Sexual assault or rape

Commitment to Safety – Pain Management

- Effective pain management is integral to the mission and values of Wood County Hospital and includes
- The best source for identifying pain is the patient's own words, body language, and/or physiological status
  - Non-verbal behaviors should not be used to negate a patient's complaint of pain
- Assessment of pain and interventions to relieve pain
  - Interventions include non-pharmacological and multi-modal pharmacological agents
  - Reassessments are expected after all interventions to determine effectiveness
  - Everyone can play a role in patient pain management

Commitment to Safety – Fall Prevention

- Nursing personnel perform fall risk assessments daily and with any transition of care.
- STARS is initiated across the hospital to minimize risk of patient falls
  - S – Supervise –
    - Each patient who is considered a fall risk will have a yellow star on the door frame.
    - If door is open all employees should glance in to make sure the patient is safe in their bed or chair.
  - T – Transfer & Toileting –
    - Use non-skid footwear
    - Exercise and ambulate as ordered, investigate PT referral
    - Anticipate toileting needs and offer every 2 hours

Commitment to Safety – Fall Prevention cont.

- A – Assistive Devices
  - Bed alarms, walkers, canes, wheelchairs, gait belts, patient lift equipment
  - Side rails, Geri Chairs
- R – Reach Call light?
  - Keep call light within reach at all times
  - Explain call light use & always remind the patients to use them.
- S – Safe Environment
  - Maintain bed in low position
  - Leave light on
  - Keep items such as water, phone, TV controls within their reach
  - Assure safe placement of drainage tubes, oxygen supplies, and compression boots.

Commitment to Safety – Pressure Injury Prevention

To determine patient risk and initiate methods to prevent skin injuries. Nursing personnel are required to perform a Standardized Pressure Injury Prevention Protocol (S-PIPP) that includes a comprehensive skin assessment and Braden risk score every shift, with any transition of care or significant change in condition. Skin alterations or wound are described in documentation and with photography.

Because S-PIPP is a required assessment by RNs, students will not have access to this documentation, including the Braden.

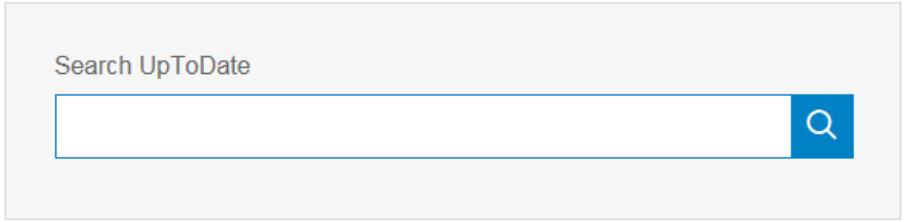
When needed nursing personnel are to consult with physicians and advocate for specialty consultation.

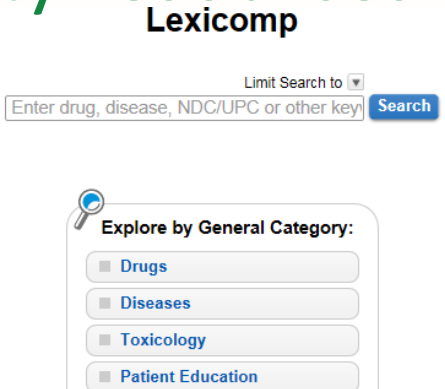
Commitment to Safety – Patient Education

- Patient educational needs are recognized at the time of admission and acted upon throughout their inpatient stay.
- Teaching will be in their preferred language and at an educational level appropriate to the individual patient.

Commitment to Safety – Patient Education

- Teaching materials available include: videos, handouts, brochures, verbal information, and demonstration. Staff have access to UpToDate® and Lexicomp® for specific disease processes or medication education.
- Care Coordinators will meet with patients, families and the health care team to guide hospitalization to discharge smoothly and efficiently. Community resources will be utilized as needed.





Commitment to Safety – Event Reporting

An incident report needs completed when an occurrence is not consistent with routine hospital operations, routine care of the patient, or there is significant deviation from hospital policy(ies) and/or procedure(s). Please use the Quick Link on the Pulse titled, ***Radar Prevention Platform***

- Complete when injury to self is sustained while on hospital premises.
- The person closest to the occurrence completes report as soon as possible, prior to leaving for day.
- If report pertains to a patient, documentation of occurrence must be charted in the medical record, however reference of event report completion must not be recorded.
- Reports must be timely, accurate and complete. Factual not opinion without blame.
- Reports are confidential
- Reporting is for process improvement and improved patient outcomes.
- **Persons are not subject to disciplinary actions except for intentional, malicious or repetitive substandard behaviors.**

Commitment to Safety – Corporate Compliance

If at any point you desire to report occurrences anonymously, please call the corporate compliance hotline (877) 380-5437

Commitment to Safety – No Smoking Campus

- Tobacco of any type is prohibited on the WCH campus
- Team members are encouraged to courteously remind visitors of the non-smoking campus
- If patients are found using tobacco products, please discuss with primary care RN

Commitment to Safety

Infection Prevention and Infection Control

Commitment to Safety: Infection Prevention

All healthcare professionals at WCH including students and instructors are required to maintain documentation of the following:

- Two documented MMR immunizations or titers showing immunity to MMR
- Td/Tdap – within 10 years
- Neg PPD OR Negative IGRA (QuantiFERON or T-Spot)
- Chicken Pox titer OR physician diagnosed chickenpox; if not immune, two documented Varivax vaccines
- Seasonal Influenza Vaccination when in hospital between October and March or documentation of declination.
- Hepatitis-B (3 dose series) or titer showing immunity is highly encouraged but not required

Students are expected to follow WCH policies related to standard precautions or a specific body fluid precautions.

- PPE is available in all patient care areas. Other safety controls available include IV catheters with safety closure devices, safety needles and syringes, and needleless IV tubing.

If you experience a body fluid exposure while a student at WCH, notify Employee Health or the House Supervisor as soon as possible. WCH will investigate, provide follow up care, and counseling as needed for the incident.

Commitment to Safety – Infection Control

Purpose:

- The main purpose of infection control is to monitor and investigate infectious disease, potentially harmful exposures, and outbreaks of infection, especially those acquired within the hospital setting.
- Another important purpose is to prevent infections by identifying risks and instituting appropriate precautionary measures.

Commitment to Safety – Infection Control

How WCH monitors infections:

- First, infections that are bringing patients to WCH
  - Such as pneumonia, influenza, wound infections
- Second, infections that occur while patients are at WCH
  - Such as hospital acquired infections (e.g. MRSA, VRE, CLABSI, CAUTI) and surgical site infections
- Third, infections within our community and county
  - Such as food borne illnesses and reportable diseases
  - WCH works closely with our partners at the Wood County Health Department and Bowling Green State University to monitor the health of our county

Commitment to Safety – Hand Hygiene

Performing proper hand hygiene is the number one way to prevent the spread of infections

There are two methods to perform hand hygiene at WCH:

- Hand sanitizer (alcohol-based)
- Soap and water hand-washing

Commitment to Safety – Infection Control

Hand hygiene should be performed:

- Before and after your work shift
- Before and after performing any procedure
- Before and after contact with any patient or patient's environment (upon entry and exit)
- When moving from a potentially contaminated body site to a clean body site while providing care to the same patient
- After removing gloves or other personal protective equipment (PPE)
- After coughing, sneezing, or blowing your nose

Commitment to Safety – Infection Control

- Hand sanitizer cannot be used in the following circumstances. Hand-washing using soap and water must be performed.
  - Before eating, drinking, or handling food
  - After using the restroom
  - When caring for a patient with spore forming organism, such as *Clostridium difficile*
  - When hands are visibly soiled

- *C. difficile is transmitted via spores. QuikCare is a great disinfectant but doesn't break down soilage on the skin or spore forming organisms. For this reason, hand-washing with soap and water must be used when hands are soiled or caring for a patient infected with a spore-forming organism.*

Commitment to Safety – Infection Control

- Using water and an ample amount of hand soap, lather and scrub all surfaces of your hands for **at least 15-20 seconds.**
- Rinse hands in a downward motion (wrist to fingertips).
- Dry hands thoroughly with paper towels.
- Use a separate, clean paper towel to turn off the faucet.

Commitment to Safety – Infection Control

- Place your hand under the dispenser
- Pull until you have a golf ball sized amount of foam in your hand
- Spread the foam thoroughly over your hands, including between your fingers, under your nails, and under your rings
- Rub the hand sanitizer in until your hands are dry.

Commitment to Safety – Infection Control

Nails

- All employees, except Surgery scrub staff and Central Sterile staff may wear nail polish.
  - The nail polish must be in good condition with no chips or cracks, as these can serve as reservoirs for bacteria.
- WCH prohibits artificial nail use among any employees that handle food, supplies, and/or provide direct patient care.
  - Artificial nails are considered anything not natural, including gels, acrylics, gemstones, “press-on”, etc.

Commitment to Safety – Infection Control

Skin Problems:

- If you begin to have skin dryness or breakdown, please see Infection Control or Employee Health.
- They will provide you with high grade lotion.
- Do not bring in your own lotions, creams, etc. from home.
  - The smells may be offensive to patients and co-workers.
  - You may contaminate your lotion bottle with the germs you come into contact with and subsequently, take the contaminated bottle home with you.
- If you have wounds on your hands, they must be covered with fluid resistant Tegaderm to provide a barrier between your open skin and anything you would encounter throughout your work day.

Commitment to Safety -

OSHA & Bloodborne and Isolation Precautions

OSHA

- OSHA stands for the Occupational Safety and Health Administration.
- OSHA is a part of our federal government that works with employers to ensure employees are safe on the job site.

OSHA

- Each hospital unit and department has an OSHA manual that includes a listing of how to perform your job safely and the necessary equipment to use to keep you safe.
- WCH is accredited by OSHA in three ways.
  1. Work Practice Controls
  2. Engineering Controls
  3. Personal Protective Equipment

OSHA – Work Practice Controls

- Work practice controls reduce the likelihood of exposure to blood and body fluids by altering the manner in which a task is performed.
- For example:
  - Prohibiting the recapping of used needles

OSHA – Engineering Controls

- Engineering controls are utilized through the use of safer medical devices. This includes devices that are safer both for the patient and for the employee.
- For example:
  - Safety syringes
  - Safety IV catheter needles

OSHA – Personal Protective Equipment

- Personal protective equipment (PPE) is the specialized clothing or equipment to put a barrier between the employees and anything they may come into contact with, including bloodborne pathogens
- Examples:
  - Fluid Resistant Gowns
  - Gloves
  - Face Protection/Shields

OSHA – Personal Protective Equipment

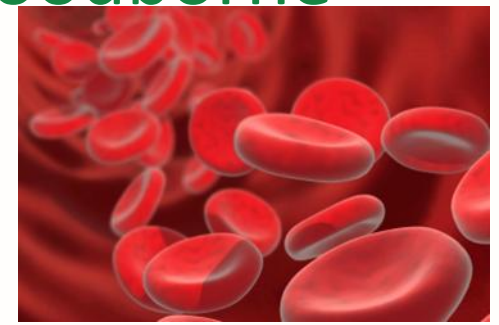
- Designated in the OSHA manual by task
  - X = PPE that is required to safely complete the task
  - R = PPE that is recommended for completion of the task

Wood County Hospital
Bloodborne Pathogens Exposure Control Plan

Task	*Hand hygiene*	*gloves*	*gowns*	*face protection*
placing oxygen catheter or mask	X			
ostomy care	X	X	R	
oral care	X	X		
routine dressing change	X	X	R	
dressing change with large amount of drainage	X	X	X	
wound irrigation	X	X	X	X
burn dressing change	X	X	X	R
tracheostomy care	X	X	R	R
suture/staple removal	X	X		
wound packing	X	X		
I & D abscess	X	X	X	X
changing drainage collection device	X	X	R	R
placement of rectal tube	X	X		
assisting with invasive procedure: lumbar puncture, bone marrow, thoracentesis, paracentesis, liver biopsy inside sterile field	X	X	X	X
outside sterile field	X	X		
chest tube insertion or removal	X	X	R	R
blood glucose monitoring	X	X		
major vessel or arterial line insertion removal	X X	X X	X	X
cleaning soiled equipment (not processed by CS)	X	X		
CPR Ventilation *USE RESUSCITATION BAG Compressions	X X	X X	X	X
Disposal of closed suction container	X	X		
Care of vomiting patient	X	X	R	R
Emptying suction canister in hopper *or splash guard	X	X	X*	X*
Pelvic & Pap	X	X		
Bone marrow aspiration	X	X	X	X

OSHA – Bloodborne Pathogens

- Bloodborne pathogens are the micro-organisms that are present in human blood and body fluid. These pathogens can cause disease in humans. Caution should always be taken with blood, body fluid, non-intact skin, and mucous membranes to reduce the risk of exposure to bloodborne pathogens.
  - Examples: HIV, Hepatitis B, Hepatitis C



OSHA – Infectious Waste

- Infectious waste materials include:
  - Articles saturated with blood and/or body fluid, regardless of the size
  - All sharps
  - Designated lab wastes
- Infectious waste should be segregated from regular, solid waste at the point of generation (patient's room, lab, etc.)

OSHA - Infectious Waste

- Always dispose of infectious waste in the proper receptacle, not the regular trash can. The receptacle should be marked with a “BIOHAZARD – Infectious Waste” label.

OSHA - Blood and Body Fluid Exposure

- Based on the tasks they perform, healthcare workers may come into contact with blood or body fluid. Proper precautions must be taken to minimize the risk of exposure.
- However, blood and body fluid exposures do occur at times. It is important to be able to recognize what is considered an exposure and what to do if an exposure occurs.

OSHA - Blood and Body Fluid Exposure

- Potential blood and body fluid exposures include:
  - Needlestick with a contaminated needle
  - Needlestick with a needle of unknown origin
  - Splash of blood or body fluid to non-intact skin or a mucous membrane, including the mouth and eyes

OSHA - Blood and Body Fluid Exposure

- What should you do if an exposure occurs?
  - Go to the closest sink and wash the area of exposure for 10 minutes. If the exposure occurred in the eyes, use the closest eyewash station for 10 minutes.
  - Call Employee Health, Infection Control, or Nursing House Supervisor immediately. A representative from one of those departments will come to where you are and perform a risk assessment. If you know who you were exposed to, source testing will occur.
  - If needed, prophylactic medications and follow-up testing will be performed.

Commitment to Safety –

Isolation Precautions

ISOLATION PRECAUTIONS

There are four types of isolation precautions at WCH related to infections and communicable diseases, including:

- **Contact** – use green top Clorox Hydrogen Peroxide wipes to disinfect equipment
- **GI Contact Precautions**

  (C. diff & Candida auris infections)
  - PPE includes: Gowns & gloves
  - Soap and water to clean hands
  - Bleach wipes to disinfect equipment
- **Droplet**
  - PPE Includes mask, gown, gloves
  - use green top Clorox Hydrogen Peroxide wipes to disinfect equipment
- **Expanded Droplet**
  - PPE includes mask (N-95/PAPR if aerosolizing procedure) , gown, gloves
  - use green top Clorox Hydrogen Peroxide wipes to disinfect equipment
- **Airborne**
  - PPE includes Mask, gown, gloves, use N95 or PAPR
  - use green top Clorox Hydrogen Peroxide wipes to disinfect equipment

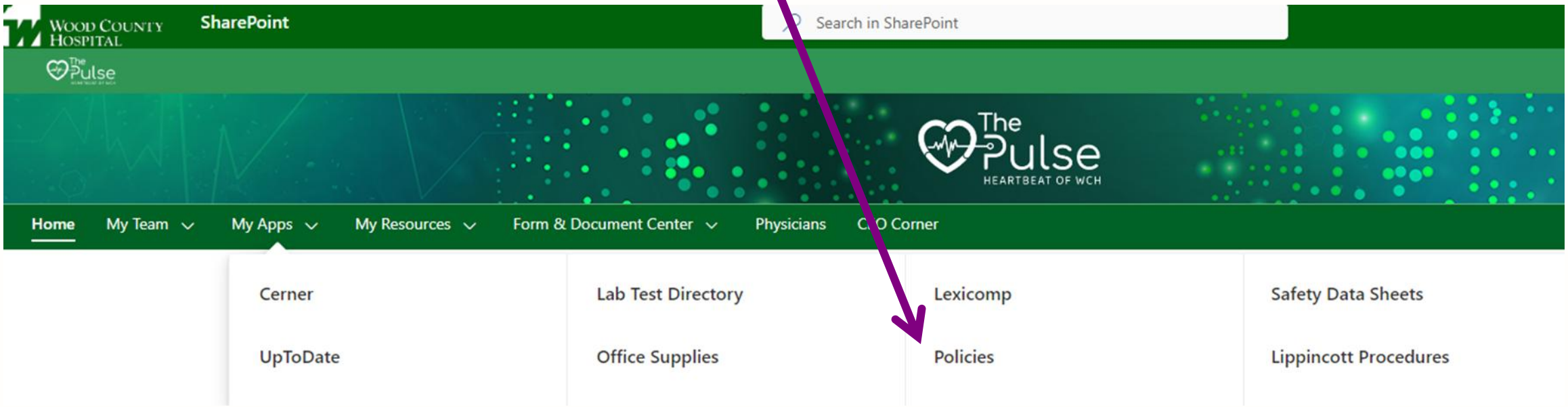
Wood County Hospital does NOT fit test students and does NOT accept fit testing completed by other organizations or schools. If patients require N95 or PAPR use, the student will not care for this patient.

Isolation Precautions

- Nurses initiate isolation precautions using the CDC recommendations based on the patient's history and symptoms.
- When isolation precautions are taken, a sign designating the type of isolation is placed on the door frame to alert anyone entering the patient's room. Also, a cart with isolation related supplies is placed near the patient's door.
- Once a patient is in isolation, specific criteria needs to be met to remove the isolation precautions.

Isolation Precautions

Policies are located through the Pulse – search *Standard and Transition based Isolation Precautions*



Standard Precautions

- Standard precautions are infection prevention practices that apply to all patients, regardless of diagnosis.
  - Treat all blood and body fluids from every person as potentially infectious.
  - Perform proper hand hygiene.
  - Take appropriate precautions to reduce your risk of exposure and protect yourself from potential exposures.

HIPAA Security Training

Health Insurance Portability Accountability Act

HIPAA – Outline

- Why HIPAA
- Protected Health Information (PHI)
- Disclosure
- Security and Privacy Incidents
- Policies
- Logins
- Physical Security

Why HIPAA?

- Mandated by Federal Regulation
  - Part of the Administrative Simplification Act of 1996
  - Privacy went into effect April 2003
  - Security went into effect April 2005
    - Security more concerned with electronic systems
- Standardizes Patient Confidentiality
  - Ensures that every health care facility maintains minimum protections of patient privacy

PHI – Protected Health Information

- Any information that can identify a current, previous or future patient
  - Common Examples:
    - Name, medical record number, Social Security Number, address
  - Less Common Examples:
    - Images, bio-identifiers, phone number, zip code, email address

Disclosure

- Inappropriate Disclosure
  - Release of PHI which is not authorized by the patient and not related to treatment, payment or operations.
- Appropriate Disclosure
  - Any activity related to TPO
    - Treatment – direct involvement in the care of the patient
    - Payment – any step in the billing process
    - Operations – any additional functions supporting patient care or billing such as computer systems support personnel

HIPAA Security and Privacy Incidents

- What is a HIPAA Security or Privacy incident?
  - Inappropriate disclosure of PHI
    - Example: discussing a patient's case with someone not involved in TPO
  - Inappropriate access of PHI
    - Example: someone not involved in a particular patient's TPO looking up that patient's lab results
  - Inappropriate attempted access of PHI
    - Example: using someone else's login
  - Any other compromise to PHI

Reporting an Incident

- Compliance Concern (877) 380-5437
- Inform Supervisor
- Complete an Event Report

Wood County Hospital HIPAA Policies

Policies related to HIPAA Violations are found in Policies on the Pulse; students are held to the same standards as employees

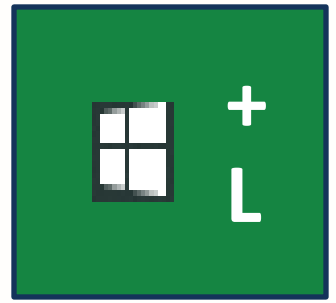
- Wood County Hospital disciplinary process
- Possible criminal or civil penalties

Logins

- Never Share Logins
- Why:
  - Against WCH Employee Computer Use Policy
  - Violates HIPAA Security Regulations
  - Accountability
    - You could be held accountable for someone else's
      - Mistakes
      - Misuse

Physical Security

- Protect PHI
  - Don’t leave PHI laying around
    - Turn over documents or cover them
    - Pickup printouts and faxes right away
  - Make sure PHI can’t easily be seen on your computer screen
    - Point display away from those who shouldn’t see it
    - Logout of clinical applications when you leave your computer
    - Use Windows L (on your keyboard) if you are walking away but returning this will allow you to fingerprint back in to your exact spot!
  - Question strangers
    - Ask if you can help them find a location to prevent them from wandering through places where they might see PHI



Social Media (Fb, Twitter, etc.)

- Do **NOT** post any reference to our patients and do **NOT** respond to postings about our patients.
- Even a posting that does not contain the patient's name may be considered a breach of our policies and subject you to discipline.

Guidelines for use of Personal Electronic Devices:

- Students and instructors are asked to refrain from carrying and using personal phones while in patient care areas.
- Tablets and laptops may be used to access reference material while in common spaces such as nurses station and break rooms, but never the patient room.
- Students and instructors are encouraged to use the hospital-provided computers to access reference material through Policy Manager, Lexicomp, UpToDate, and Cerner Educational Materials.

- As you work, always be alert for ways to improve the protection of patient privacy
- HIPAA Audit Log software is running on every system in the hospital and a report can be run showing PHI accessed by you so please do not break the rules or you will be visiting Human Resources

Thank you

Thank you for utilizing Wood County Hospital as part of your clinical and or precepting hours. We hope you have good learning experiences.

- As you move toward graduation and start your nursing careers, consider Wood County Hospital.
- We employ the following positions in most areas of the hospital:
  - Patient Care Techs (PCT) - STNA preferred but not required in all locations
  - Clinical Nurse Technician (CNT) - student nurses who are enrolled and have completed at least one semester of nursing school
  - CNT- Externs (CNT-E) - student nurses who have graduated and are waiting to take NCLEX
  - RNs – Newly licensed RNs are welcomed in many units
  - Please visit https://woodcountyhospital.org for current job offerings and listing of benefit package and sign on bonus (when available)