



Honored by Experts. Honored to Serve.

Faculty and Student Guide

July 2009 – July 2010

**Department of Organization
and
Staff Development
Suite 100
2500 West Utopia Road
Phoenix, 85027**

The John C. Lincoln Health Network exists because our founders could not sit idle when they saw the dignity and potential of others threatened by illness or social circumstance. They worked to improve conditions.

Mission

Our mission is to assist each person entrusted to our care to enjoy the fullest gift of health possible and to work with others to build a community where a helping hand is available for our most vulnerable members.

Vision

Our vision is to set the national standard of excellence in patient care and in service to the community, as judged by experts, and to deliver both with an unparalleled level of human compassion, as sensed by those we serve. We summarize this vision in the phrase:

“Honored by Experts. Honored to Serve.”

Values

Our values are the 5 Pillars on which our work is based:



Our Mission, Vision and Values are all rooted in the belief that helping others is an enriching experience worthy of our best efforts.

THE JOHN C. LINCOLN HEALTH NETWORK DIFFERENCE

An important element of John C. Lincoln Health Network's (JCLHN) mission is helping each person who is entrusted to our care enjoy the fullest gift of health possible and to help build a community where a helping hand is available for our most vulnerable members. We truly want to make a difference in the quality of life of those we serve. In order to achieve this impact, it is important for each person working for and with JCLHN to understand our key beliefs and goals.

Quality

Our commitment is to not only provide services of excellent quality but also to exceed the expectations of those we serve. Our goal is to continually improve what we do. We strive to be the standard by which organizations are judged.

People

We want this to be a great place to work for employees, doctors and volunteers. We actively seek involvement. We celebrate and reward individual and team contributions. We work together to create an environment that encourages the development of each person's full potential. We believe in enjoying our work and our co-workers.

Growth

We value growth because it enables us to positively impact more lives -- with our services and as an employer. We believe well-managed growth is essential to our financial health and comes from anticipating community needs and developing new ways of meeting them. We find growth energizing because it requires our creativity, innovation and integrity and because growth is tangible evidence that we are the hospitals of choice that people trust at the most critical times of their lives.

Community

We contribute to our community as good citizens- individually and as an organization. We pride ourselves in being a good neighbor who provides a documented community benefit.

Finance

We value financial performance and healthy financial positions as a means of achieving our mission.

Welcome to John C. Linclon Health Network (JCLHN)! You are part of the growing number of students and faculty from all healthcare disciplines who come to JCLHN from around the state and in fact the nation. Each year, JCLHN, along with colleges and universities, work together to provide the best learning experiences for our students. Based on the wonderful student evaluations of JCLHN preceptors and feedback from our staff, we know we have a successful program.

The Faculty and Student Guide has been developed to assist both instructors and students in having an optimal clinical experience while adhering to the JCLHN policies. As a leader in the industry, we are invested in students and their success. Students are our future both as care providers and possible JCLHN employees. If you have additional questions or require clarification, please do not hesitate to contact Organization & Staff Development. We welcome another academic year and look forward to assisting in the learning experience.

Organization and Staff Development

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The office of Organization and Staff Development is located in the Network Support Services Center at 2500 West Utopia Road, Phoenix AZ 85027. The office fax number is 623-434-6247. Each OSD staff member also has an e-mail address that you can send information to. The format of the email address is firstname.lastname@jcl.com.

Process for scheduling clinical rotation for students:

The revised Faculty and Student Guide is available every July. The Guide contains MASH, CERF, and the Student Responsibility Statement. Students and clinical faculty must complete MASH one time from July to July. JCLHN employees who are students or faculty are not exempt. Students and clinical faculty are subject to all JCL policies and procedures.

Schools must request clinical placement for student through OSD by e-mail unless they are part of the Maricopa Co-operative Clinical Planning System.

All nursing preceptorships and clinical externships related to other disciplines must be requested through OSD.

OSD will provide the faculty and student guidebook to school Directors and Clinical Co-coordinators who must provide it to their students. OSD will provide schools with a rotation grid which indicates how many students are to be placed on which unit.

A completed CERF must be provided to OSD for all rotations at least one week before the rotation.

A calendar must be sent for all rotations (who is where when) at least 2 weeks before rotations.

OSD must be notified of any changes in the calendar prior to changes in the student's rotations.

All students must complete MASH and Student Responsibility Form found within this booklet.

These must be kept in the student file at the school.

All results of drug testing and background checks must be kept at the school in the student file.

FACULTY AND STUDENT GUIDELINES

Added or changed items in the Faculty and Student Guide this year:

Process for scheduling clinical rotation

MASH

The names of codes called within the hospitals

Student parking

Available JCL classes

Advance Directives

The following requirements are based on the contract JCLHN has with your facility and/or on current policy and procedure:

1. Each university/college which brings students to JCLHN must have a contract with JCLHN. The contract usually includes North Mountain and Deer Valley campuses and the JCLHN physician practices.
2. All student placements are arranged through the OSD Department.
3. The school must be able to provide proof of on-site faculty and student compliance with the following standards by submitting a completed Clinical Experience Requirements Form prior to each clinical rotation. Medical students are exempt from completing this form but must submit required paperwork to OSD. All schools must provide a calendar of student rotation which shows which student is where on which date.
4. At NM, nursing students who choose a patient to work with the day before a clinical rotation, must complete 2 JCLHN RN Student Nurse Assignment cards. One card should be placed on the patient's chart and the other with the charge nurse.

Mandatory Requirements

Clinical Program faculty and students shall be required to comply with the health standards applied to hospital employees. Pre-Clinical requirements for immunizations/TB screening/substance abuse testing and background checks for Clinical Program faculty and students shall be in keeping with the policies applicable for employees.

This includes:

A) Proof of immunity by documentation of one of the following for each disease:

- | | |
|-----------|---|
| Measles | a) documentation of physician-diagnosed case
b) documentation of two live doses of vaccine on or after their first birthday
c) lab test indicating immunity
d) birth before 1957 |
| Rubella | a) documentation of one live dose on or after their first birthday
b) lab test indicating immunity
c) birth before 1957 |
| Mumps | a) documentation of physician-diagnosed case
b) documentation of one live dose on or after their first birthday
c) lab test indicating immunity or birth before 1957 |
| Varicella | a) verbal history of disease
b) lab test indicating immunity
c) 2 doses of varicella vaccine |

- B) TB screening would include 2-step TB testing via Mantoux method; given 1-3 weeks apart (only one needs to be given if they have documentation of negative TB skin test within last

year). If positive reaction (equal to or greater than 10mm INDURATION), chest x-ray is to be done with no evidence of active disease in order to begin clinical rotations. If history of positive reaction, no TB test is given but should have no current signs and symptoms of TB with documentation of negative chest x-ray within previous year. If there are current signs and symptoms of TB, a current negative chest x-ray prior to beginning clinical rotation will be needed.

- C) Eleven Panel Urine Drug Screen must be completed with Negative results, with assistance in interpretation by a Medical Review Officer as necessary. The drug screen must include the following drugs:

- Amphetamines (will also break down into Methamphetamines, if present)
- Barbiturates
- Benzodiazepines
- Cannabinoids
- Cocaine metabolite
- Methadone
- Methaqualone
- Opiates
- Oxycodone
- Phencyclidine
- Propoxyphene

- D) Clinical Program faculty (on-site) and students shall be required to comply with the Mandatory Annual Safety and Health Requirements (MASH) and complete the training yearly. All students and faculty assigned to JCLHN are required to obtain a Criminal Background Check. Results of all testing will be kept at the educational institution.

Students who do not comply with JCLHN policy in all above requirements will not utilize JCLHN for clinical rotations. Acquisition of any of the above listed testing will not be the responsibility of JCLHN.

- E) The Clinical Program has the responsibility of advising the students of their obligations toward JCLHN, the Clinical Program, and all patients in the clinical education process. *The students must sign the Student Responsibility Statement which is found in this booklet and is also included in the contract. Please give each student a copy to sign.* One signed copy must be kept in the student file. The Student Responsibility Statement needs to be signed only once and the student will be held to it for all clinical experiences in JCLHN.

- F) Students must report to instructor any acquired communicable disease and known exposure to communicable disease. Student/instructor may not work while ill or when an open, draining lesion is present on the hands, face, neck or arms.

- G) Students and clinical faculty will complete appropriate safety training by completing the 2009-2010 Mandatory Annual Safety and Health (MASH) information and test which are found in this booklet. The information will be reviewed, completed, and self-corrected by students and faculty prior to the clinical experience. The completed test will be kept in the student's / faculty's file on the university/college campus.

- H) Current Basic Life Support certification (minimum requirement) must be maintained for all students and on-site faculty providing patient care.
- I) Students will uphold JCLHN's unwavering commitment to patient/client confidentiality (Health Insurance Portability and Accountability Act regulations) and customer service.
- J) Orientation for the faculty will be scheduled through OSD. All first time on site faculty are to complete an orientation prior to bringing students to any JCLHN facility. Please call OSD to arrange an orientation.

Parking

Please have North Mountain (NM) students park in the parking lot on the South side of the Emergency Department in employee parking spaces. Students may also park in the in the Mitchell Lot (fenced - in area east of 3rd St), or the lot north of Cowden Center, or on the streets. Students at Deer Valley (DV) should park in the parking garage. The gate code is 789. Students at either facility during non-daylight hours should ask security to accompany them to their cars. All students must display a parking card on their dashboard. The card, created by the school, will state that the car belongs to a student, the name of the school, and the dates of the rotation at JCLHN. The card should be large enough for security to see easily.

Conference Rooms

Conference room availability at both NM and DV is extremely limited. Instructors should book the rooms as soon as they know they will have a clinical group at either facility. Conference rooms for students at NM are scheduled through the Cowden Center. Please come to the Cowden front desk for assistance or call 602-879-6300. Rooms can be arranged at DV by calling 623-879-6100 extension 5445.

Point of Care Testing

Clinical Laboratory Improvement Act (CLIA) mandates that individuals performing finger stick blood glucose testing be initially certified, and recertified at 6 months and recertified every twelve months thereafter. Faculty should arrange for this education through the Lab at extension 1955 at NM and extension 5589 at DV at least 2 weeks prior to the student's clinical experience. Students require an operator ID and will receive that during this education.

Cafeteria

The cafeterias and coffee shops are open for breakfast, lunch and dinner. Times of operation are posted at the entrances. Students and faculty receive meals at a discounted rate when they are on a clinical rotation.

Variations

Students involved in a medication error, patient, or safety issue must complete the appropriate documentation and notify their instructor. The instructor or designee must inform OSD and the director of the unit of the occurrence immediately after the incident.

Inservices/Classes

Students and faculty can register to attend some JCLHN educational offerings. Students and faculty may attend BCLS, ACLS, EKG or PALS classes as long as they pay the fee for the class. Students and/or faculty must make the payment at the time of registration. Fees are non-refundable unless they cancel within 48 hours prior to start of class. Students who are JCLHN employees need to pay fees particular to JCL employees. Registration is through the Cowden

Center front desk. A deposit is required (may be a check or credit card) at the time of registration. This deposit will be returned when student attends class. Some workshops may require a registration fee. Compliance with dress code is required at these offerings.

Dress Code

The specific department dress code will be followed. **This includes pre-clinical visits for patient selection.** All students are to comply with the following hospital-wide guidelines at all times.

- Appropriate to unit/department
- Clothing clean, neat, and in good repair
- Denim, shorts, thong sandals are *not* permitted
- Uniforms according to department director
- Clothing must be free of pictures, slogans, or advertisement
- Jewelry limited; no facial jewelry
- No perfumes, colognes or perfumed after shave in patient areas
- No acrylic/artificial finger nails
- Hair maintained off shoulders
- Name badge to be worn to indicate student status
- Hospital-provided scrubs are **ONLY** provided on an individual basis for personnel working in the following areas: OR, OPS, CSR, Cardiac Cath Lab, and Endoscopy

JCLHN staff will dismiss any student from the clinical experience who is not in compliance with dress code. This includes pre-clinical visits.

M.A.S.H. (MANDATORY ANNUAL SAFETY AND HEALTH)

JCLHN is committed to keeping our environment safe for our patients, residents, clients, staff, volunteers, students, and visitors. Each year we ask you to review the key principles from some of the network's most important policies. We also include a quick self-test and a key. This year's topics include Hospital Accreditation, Life Safety, Ethics, Compliance, Security, Hazardous Materials, Hospital Incident Command System (HICS) Infection Prevention, Age Specific Care, HIPAA, and Advance Directives.

Please read the following. Complete the questions and correct your answers (See Appendix). The corrected document should be kept in the student file on campus. **Please do not return it to OSD.**

Hospital Accreditation

North Mountain

- The Arizona Department of Health Services (ADHS) is a state agency that ensures healthcare facilities are safe, clean, and providing quality care for patients and their families.
- The ADHS inspects John C. Lincoln Hospital – North Mountain and the network physician practices.
- ADHS conducts annual unannounced inspections.
- The inspection evaluates standards for how we provide quality care, the physical environment, and how we provide services to our patients and customers.
- Because the inspections are unannounced, areas and departments must be ready for inspection at a moment's notice!

Deer Valley

- The Healthcare Facilities Accreditation Program (HFAP) is the accreditation portion of the American Osteopathic Association (AOA).
- HFAP inspects and accredits John C. Lincoln Hospital - Deer Valley.
- They too want to ensure facilities are safe, clean, and providing quality care for patients and families.

Policies

Please be aware that policies are placed on the JCLHN Intranet Portal. The most current policies are on the JCLHN Intranet Portal and not in a binder. Policies are there to support and guide you. Remember to look for them whenever you might be unsure. Never proceed with a task if you are unclear.

Patient Identification

All patients receiving care will be identified by means of an armband showing name, birth date, age, barcode, medical record and account number. The best ways to identify a patient are by name and medical record number. The patient's barcode is used for any type of bedside testing. Arm bands **must** be checked prior to:

- Giving any medication
- Procedures and /or surgery
- Patient hand off
- Transporting
- New admission
- Specimen verification

In addition, patients may have a colored armband indicating a special situation. Four armbands all students and faculty should be aware of are:

Yellow – Fall risk

Yellow armband has been adopted as Fall Risk Alert designation with the words embossed/written on the wristband “Fall Risk”

Red – Allergy alert

Red armband has been adopted as Allergy Alert designation with the words embossed/printed on the wristband “Allergy”.

Purple - Do Not Resuscitate (DNR)

Purple has been adopted for those patients who have been designated as “Do Not Resuscitate”.

Pink - Infectious Disease

Pink armband has been adopted for those patients who have an infectious disease and/or a history of resistant organisms.

Ethics

Ethics are the rules we follow to assure that we:

- Show respect for patients and each other;
- Use high standards in all business decisions;
- Display good judgment;
- Are truthful in all business dealings;

- Avoid any behavior that could be interpreted as dishonest, deceptive or fraudulent.

The Bioethics Committee acts as an advisory body for ethical patient care issues. Anyone may request a consult from the committee if there is a question or concern about the decisions made in regard to a patient's care.

Compliance

JCLHN is committed to maintaining a work place that operates in compliance with federal and state laws and promotes high-quality patient care. Recognizing the importance of compliance as an integral part of John C. Lincoln's activities, we have established a compliance program specifically designed to promote compliance with laws and policies; to prevent problems; and to resolve compliance concerns internally.

The *Compliance Program for Business Practices* document supports JCLHN's efforts to assure that each employee, agent, and volunteer maintains the highest ethical standards and complies with the law.

The Deficit Reduction Act

Congress has for the first time mandated important compliance program requirements for hospitals that receive more than \$5 million per year in Medicaid payments. This came about as a result of the Deficit Reduction Act (DRA) that went in to effect on January 1, 2007.

JCLHN must ensure that all employees, volunteers, contractors and agents are educated regarding the federal and state false claims statutes and the role these laws play in preventing and detecting fraud, waste and abuse.

We all need to be aware of the federal False Claims Act (FCA) which carries harsh financial consequences for any person or entity who "knowingly" submits a false claim to a state Medicaid program. Here are some basic facts to explain what the False Claims Act is about:

What is a false claim?

- Billing for three hours of physical therapy when only a few minutes of therapy was actually provided;
- Submitting a claim for services or supplies that are not medically necessary or were not ordered by a patient's authorized provider; and
- Billing for the same item or service more than once.

In general, the FCA prevents providers from knowingly presenting a false or fraudulent claim for payment by the federal government, conspiring with others to get a false or fraudulent claim paid by the federal government, or knowingly using a false record or statement to conceal, avoid, or decrease a payment due to the federal government.

You are reminded to:

- Exercise good faith and honesty in everything you do.
- Observe all laws and regulations that govern what we do.

- When in doubt, ask questions. Contact one of the following resources available within JCLHN if you have any knowledge/concern regarding a potential false claim:
 - The Supervisor or Manager of the Department where you are completing a clinical rotation
 - Christina Galbo, Director of Compliance @ (602) 870-6060 (x1191);
 - If you would like to report a concern anonymously, call the confidential *John C. Lincoln Compliance Help Line* @ (602) 331-5888.

We believe that employees, students, volunteers, physicians and other agents should express concerns and opinions on an issue because their views are important. To that end, we encourage active communication without fear of retaliation or retribution.

JCLHN takes issues regarding false claims and fraud and abuse seriously. We encourage all employees, students, volunteers, contractors and agents of JCLHN to be aware of the laws regarding fraud, abuse and false claims, and to help us identify and resolve any issues immediately.

JCLHN culture directs us in our daily operations and assures our compliance with legal, regulatory and ethical standards of practice. Our culture is built upon our vision, mission and core values, and upon our commitment to the highest possible standards of excellence in practice which serves as a guide towards the prevention of fraudulent, abusive and unethical practices in our daily partnerships.

Confidentiality

Everything you see and hear regarding patients is considered confidential. Please remember to be mindful of your surroundings when discussing patient information pertinent to your job and refrain from discussing patient information when you leave the hospital. If a patient confides in you, only that information concerning their patient care needs be passed on to the nursing staff. Anything else is to be considered confidential. Keep it to yourself.

HIPAA

The Health Insurance Portability and Accountability Act (the “Privacy Rule”) was enacted in 1996. The Privacy Rule established, for the first time, a foundation of Federal protections for the privacy of protected health information. The federal government’s goal was to improve efficiency in healthcare delivery by standardizing electronic data exchange while protecting the confidentiality and security of patient health information.

The Privacy Rule requires healthcare providers to:

- Notify patients about their privacy rights and how their information can be used.
- Adopt and implement privacy policies and procedures.
- Train employees, agents, volunteers, and other members of the work force so that they understand the privacy policies and procedures.
- Designate an individual to be responsible for seeing that the privacy procedures and policies are adopted and followed.
- Secure patient records containing individually identifiable health information so that they are not readily available to those who do not need them.

Communicating confidential patient information inappropriately, carelessly, or negligently (e.g., casual discussion regarding a patient, discussion in public area, and/or unauthorized release of information while on or off campus) is a breach of confidentiality.

A breach of confidentiality is a serious violation covered by our Compliance Program and privacy-related policies. Violations will result in appropriate disciplinary review and action which may include termination of association with your role as an employee, student or volunteer.

The student and faculty role

- You are considered a member of the “workforce” as defined in the Privacy Rule.
- It is your job to help maintain privacy for patients and to protect the confidentiality of information. That includes, but is not limited to, the patient’s name, medical condition, emotional status, financial situation, or other personal information.
- Do not seek out information about patients unless the information is required for you to carry out your job / duties.
- Students and faculty may not use laptops or PDAs etc to copy any patient data or research any information.
- Comply with all privacy and information security policies.
- When you see or hear information in the course of doing your clinical experience, remember that the information is confidential and is not to be repeated or shared with others.
- Be mindful of your surroundings when discussing patient information pertinent to your clinical experience. Avoid discussing patients in public places (e.g., cafeteria, hallway, elevators, family waiting areas, reception desks, etc.).
- Recognize that an employee, family member, volunteer, friend, or neighbor receiving medical treatment in any facility is entitled to all the patient rights of privacy and confidentiality.
- Keep confidential papers, reports, and computer data in a secure place and outside of view by the general public.
- Name badges are required. Individuals without name badges should be stopped and asked who they are and how we can help them.
- Some students receive computer access. Computer passwords are personal. Protect them as you would your credit card.
- Information needed for school projects should be de-identified to protect health information and patient privacy. If you have questions, contact your instructor.
- Immediately report known or suspected violations of privacy-related policies to the Privacy Officer and information security breaches to the Information Security Officer.

JCLHN is committed to upholding these standards of excellence, and we remain diligent in our efforts to be compliant with all legal, regulatory and ethical standards.

HICS

The Hospital Incident Command System (HICS) is a system put in place to respond to an act of bioterrorism or bombing. HICS was put into place because:

- During a disaster, there is confusion and panic
- HICS helps us stay organized and focused

What do I do?

- In any emergency, it is important you stay calm
- Leaders wear colored vests so you know who is in charge
- The leaders wearing color-coded vests have Job Action Sheets so they know what needs to be done
- Follow instructions the leaders and your supervisors give you

Infection Prevention

Hand Hygiene

The most important factor in preventing infections in the hospital [nosocomial infections] is proper hand washing and/or hand disinfection. Hand hygiene practice is monitored in both hospitals. Cleanse your hands before and after physical contact with a patient in a patient care or clinical area. Cleanse your hands if you have touched surfaces that may have been contaminated. Always wash/disinfect your hands before applying and after removing gloves.

Hand Hygiene Procedure Using Hand Sanitizer

- Apply 1 pump of product. Too much is not better or more effective.
- Distribute product to all surfaces of your hands, including nail beds, using friction.
- Rub hands dry, and do not use paper towels.
- **The alcohol hand sanitizer is not effective when caring for patients with C-difficile or anthrax. Use soap and water.**

As a general practice, it is important to wash your hands with soap and water frequently during your shift.

Hand Hygiene Using Hand Washing Procedure [15 seconds]

- Remove paper towel from the dispenser to have paper towel available.
- Turn on the faucets and wet your hands. Keep hands lower than your elbows & apply hand washing soap.
- Wash vigorously for at least 10-15 seconds, use friction, and pay attention to fingertips & nails.
- Rinse well, keeping hands in downward position [lower than your elbows]
- Use paper towels to dry hands.
- Turn off the faucets with the paper towel to help you avoid contamination.
- Discard paper towels in proper trash receptacle.

Artificial Nails

- Artificial nails and long natural nails harbor more bacteria than short, clean, natural nails.
- JCLHN does not permit clinicians to wear artificial nails.

Standard Precautions

Standard precautions are a consistent approach to handling blood, body fluids, and non-intact skin. It is also a consistent approach to handling contaminated/used medical equipment. This method prevents the spread of blood-borne pathogens [example: hepatitis B, HIV] to health care workers and prevents the spread of pathogens between patients.

Health care workers are required to wear personal protective equipment to prevent contact with blood, body fluids, and non intact skin. The use of particular personal protective equipment is based on the task which is about to be performed and the likelihood of body-fluid contact. The decision to use personal protective equipment is dictated by the task.

Do not handle “sharps” (needles or blades). Contact nursing staff if you find a loose needle

Personal Protective Equipment

The equipment which needs to be worn is based on how the identified germs are transmitted, or passed on to others or yourself

Airborne: germs float in the air, for as much as a mile away in some cases! Since they ride along on the air and go a long way, the patient will need a negative pressure room, and staff wear a special mask or respirator.

Contact: for germs spread by touching something dirty (without gloves), or something that could get on your clothes. Gown and gloves must be put on before going into patient’s room; equipment is used only with that patient (such as stethoscope, vital sign machine).

Droplet: germs are coughed or sneezed out; you must be close (within 3 feet) to breathe in the germs. You must wear masks (surgical or duck bill) to prevent breathing in germs that the patient coughs or sneezes. In some cases, we may need a “combination” of two different kinds of transmission based precautions.

For example: a patient with MRSA pneumonia, or a patient who is coughing and doesn’t use tissues, throws tissues on floor, or doesn’t wash hands, will have Contact/Droplet precaution sign.

All coughing patients should be offered tissues and instructed to cover their mouth and nose while sneezing and/or coughing.

Generally, personal protective equipment is worn in patient rooms, laboratories, and procedure rooms. It is not worn in hallways and public areas. It is JCLHN policy that volunteers do not enter patient rooms with isolation signs.

Gloves

Clean exam gloves shall be worn when touching blood, body fluids, the eyes, nose, mouth, or moist skin surfaces, and used/dirty equipment.

Gowns

Clean, fluid-resistant gowns will be worn during tasks that generate splashes or sprays of body fluids [example: whenever skin beyond the hands, or clothing, could have contact with body fluids].

Masks

A clean mask will be worn during tasks in which the care giver may come in contact with and or breathe in contaminated droplets. The mask will not be worn outside the patient room. The type of mask to be worn will be dependant on the task and the patient’s disease process.

Face Shield

A face shield will be worn to protect the mucous membranes [eyes, nose, and mouth] of the healthcare worker during tasks that may generate splashes or sprays of body fluids.

TB Control Plan

Tuberculosis (TB) is a disease that is transmitted by air. Breathing in the germ can infect you. Under OSHA guidelines, JCLHN has a plan to prevent spread of TB. It includes the following:

- Patients with known or suspected TB are placed in rooms with special ventilation that requires the door be shut and signed posted to alert you of need for special mask.
- Visitors wear a duckbill mask for protection when in the patient room.
- Patients with TB wear the duckbill mask when they need to leave the room.
- Patients are instructed to cover their mouth and nose when coughing and properly dispose of tissues.

You also participate in monitoring TB with your annual TB skin test.

Fire Safety

The safety of patients, employees, and volunteers is enhanced by the modern construction of the JCLHN buildings and by the safety systems in place:

- Smoke compartments
- Procedure to connect directly to Phoenix Fire Dept
- Fire Doors
- Routine Testing of Detectors and Alarms
- Smoke and Heat Detectors
- Sprinkler Systems

There are bell codes and alarm systems to identify the location of a fire (or a drill). An alarm will sound in the building in which the drill is occurring. In case of a fire (or a drill) see directions under Emergency Codes below. Environmental Services and Facilities Maintenance personnel at both hospitals report with extinguishers to the scene of the Code Red.

When a DRILL is called in your area, remember the following -- [think RACE]:

Rescue	Remove anyone in danger of flames or smoke
Alarm	Activated automatically; if alarm fails, call ext. 5555 & report location
Confine	Close all doors & windows
Extinguish/Evacuate	Put out the fire, and if ordered, leave the area

Should you need to use a fire extinguisher, remember **PASS** = **P**ull, **A**im, **S**queeze, **S**weep.

Students play an important role by serving as support to staff, by remaining alert to conditions in their environment, and by reporting any suspicious smells or odors to area supervisors.

If in an area other than the main hospitals, dial 911.

Evacuation Terms

Horizontal Evacuation

Leave your unit and walk into the adjoining unit where you will be safe behind the fire door and fire wall.

Vertical Evacuation

Leave your unit and the building, and walk down the stairs to reach the outdoors. Staff, patients, and volunteers will gather outdoors in a pre-determined location.

A drill remains in effect until the Operator announces that the drill is over, using the overhead paging system.

Emergency Codes:

Code Red= Fire (Smoke, or some indication of fire)

In the event of fire, always remain calm. **Do not** shout "FIRE!"

If the fire is in your department:

1. Dial 5555 to alert switchboard if in hospital or Treasure Trove -- other buildings, students or volunteers should notify staff.
2. Close all doors to confine fire and smoke.
3. Extinguish fire by using fire extinguisher, or internal fire hose.
4. Remember **Rescue**
Alert – pull the alarm
Confine-close all doors and windows
Extinguish or evacuate

All Personnel:

1. Reassure patients and visitors.
2. Don't use elevators until the "all clear" is announced.
3. If appropriate, report to a nursing station, and help as directed.

Code Yellow = Bomb Threat

If you

1. On termination of the phone call
 - a. Dial 5555
 - b. Advise the operator that you received a Code Yellow telephone call
 - c. Give your name and location
2. Remain at this location until told otherwise.
3. The Operator will notify administration.

When a Code Yellow is paged overhead:

1. Report to your assigned work area and assist in searching your work area.
2. Look for anything that is unusual.
3. DO NOT open or touch anything that is unusual.
4. Be sure to search all common areas, i.e., waiting rooms, and restrooms.
5. All available staff reports to the personnel pool.

When something unusual is found:

1. Secure the area around the unusual finding
2. Dial 5555--report the unusual finding
 - a. Description
 - b. Location
3. Remain in the area until released by Administrator on call/Nursing Supervisor

When nothing unusual is found:

1. Dial "O" and report the following:
 - a. That the search is complete
 - b. Which area was searched

Code Grey = Hostile Situation

Code Grey is called by Security. Code Grey indicates a hostile situation. This includes verbal confrontation or inappropriate physical contact. If you or co-workers are involved or witness this type of situation, call 5555 and ask for Security STAT. An officer will come to you. The situation can escalate into a hostile situation. If this happens, a Code Grey will be called by Security. When a Code Grey is announced, remain in your area and close all doors. Staff will be monitoring movement of people on and off the unit. Remain where you are until security can safely escort you or the Code Grey is cleared. Students in UNAFFECTED areas should remain on their unit and assist in closing all doors to the unit and station. Assist in monitoring traffic at the doors.

Code Silver = Hostile with a Weapon

Staff should be prepared to brief police officers on the details of the situation such as number of suspects, physical descriptions, number of hostages, location, weapons, and demands

Triage Internal = Internal Disaster

Triage Internal indicates that a disaster has occurred. "Triage Internal" are events inside the building that could require evacuation

When a Code "Triage Internal" is announced you will go to your work area

Depending on the type of event a supervisor may tell staff (and students) to go to the labor pool

Upon arrival, further instruction will be given

"Triage Internal" labor pool location will be announced overhead

Triage External=External Disaster

A "Triage External" is an event outside the building that may cause many patients to come to the hospitals.

When a Code "Triage External" is announced you will go to your work area.

Depending on the type of event the supervisor may tell you to go to the labor pool.

Upon arrival, further instruction will be given.

Decontamination Response

Chemical & Biohazard Decontamination

If an external disaster involves chemical exposure, patients must be triaged before entering the hospital.

Some will need to be decontaminated (harmful substances removed) before entering the emergency room.

Trained decontamination members from the hospital will provide decontamination and triage for the patients prior to entering the hospital.

Code “Blue” = Patient needs resuscitation

At NM call 5555, a Code “Blue” will be called overhead with the location

At Deer Valley call 5555, the overhead call will be either

“Code Blue Adult” with the location

“Code Blue Pediatrics” with the location

At North Mountain traumas are announced as a “Trauma 1” or “Trauma 2”

The Code Arrest Team then responds to the location

Code Pink = Infant Abduction

When a Code “Pink” is announced overhead you should check with your supervisor

You may be assigned to position yourself at a designated exit and watch for suspicious activity

Staff initiating code blanket will complete the Checklist Infant Abduction Quick Response

(Refer to policy E-310)

A Code “Orange = Hazardous Material Spill.

If a hazardous material (Hazmat) is spilled:

Remove yourself and others from the immediate area

Isolate the spill or fumes by closing fire doors

Notify hospital medical laboratory

NM 602-870-6060 ext 1237

DV 623-879-5500

You will need to tell laboratory personnel:

Your name and extension number

Location of spill

Type of hazardous material spilled

Follow the direction from the Hazmat Team Member

A Hazardous Chemical is any chemical which poses either a Health Hazard or Physical Hazard to humans or other living things.

Health Hazards are chemicals that have the potential to cause acute (sudden) or chronic (long term) health effects in exposed employees

Acute effects are symptoms that happen quickly after contact.

Symptoms may include:

- Dizziness
- Headache
- Vomiting
- Itching
- Coughing
- Runny nose
- Burning
- Dryness
- Diarrhea
- Redness

Hazardous materials can enter your body in 4 ways:

Inhalation:

Breathing in through nose or mouth (example ammonia)

Ingestion:

Through mouth by eating or drinking

Never have food in your work area or keep materials in an unlabeled container

Absorption:

Absorbed through the skin (example chemical burn from cleaning agents)

Injection:

Can enter the body by injection (example needle stick)

Just because a drug can be administered to a patient doesn't mean that it isn't hazardous. The most common hazardous drugs are antineoplastic drugs

You will find lots of helpful information on MSDS Online

- Chemical identity
- Manufacturer's contact information
- Physical data
- Fire & explosion information
- Reactivity data
- Spill clean up and disposal
- Health hazard information
- First aid
- Control measures
- Storage information

Safety

Safety in the work place is everyone's responsibility. Always maintain a safe work environment and always report any potential or actual hazardous condition to a staff supervisor.

Please observe the following rules:

- Never operate equipment until you have received instructions on its proper use.
- Never carry uncovered containers of liquid through the hall or in the stairwells.
- Never run in the halls.
- Always park unattended carts or wheelchairs against one wall; never leave them in the middle of a hallway. The goal is to have one entire side clear for evacuation.
- As a student, if you are injured, inform your instructor and the supervisor/charge nurse. A report is to be filled out immediately even if you chose not to seek medical treatment.

- All injuries, no matter how slight, must be reported and an incident report form must be filled out.
- Minor injuries may be examined in the Employee Health office. Go to the Emergency Room in case of serious injury or if the Employee Health office is closed. Students are financially responsible for treatment charges.

Mail Handling

Front line mail handlers in the mailroom for JCLHN will wear gloves as they sort and screen mail. Gloves and “duckbill” masks are optional for staff and volunteers opening mail in other areas and may be obtained from the stockroom.

Consider mail or packages with the following characteristics to be suspicious:

- Oily stains, discoloration, or odor (noted from a distance without sniffing)
- No return address
- Shows a city or state in the postmark that does not match the return address
- Strange or illogical correspondence or enclosure

Mail that contains an excessive combination of the following characteristics should be handled with caution:

- Handwritten or poorly typed address
- Incorrect title
- Title but no name
- Misspellings of common words
- Excessive postage on larger packages
- Marked with restrictive endorsements such as “Personal” or “Confidential”

Should an incident occur, place the item on a flat surface and DO NOT cover with anything. Evacuate the area. Wash your hands or exposed skin with soap and water. Immediately notify the supervisor and Hazardous Materials Team (in the hospital lab).

Do not do any of the following:

- Open suspicious mail or other items containing a suspicious substance.
- Carry item around to show others.
- Taste or sniff the suspicious package
- Track powder into other areas if shoes are contaminated (remove shoes).

Cell Phone Usage

Cell phones may be used during break only. Desk phones are to be used to contact instructors. Cell phones can be used by our customers in the hospital unless the patient care staff determines that a problem exists, or phone use is disturbing a patient. Staff retains the right to ask cell phone users to step outside the unit in such cases.

Security

The Security Department is available and open 24-hours a day, 365 days a year. *When You Need Help Immediately* dial **5555** from the nearest house telephone. If you need assistance from Security STAT, call **5555** and indicate it is STAT. There are also call boxes in the parking lots. Push the button in and then release it. This will connect you to security by radio.

- Be prepared to give location and situation.
- Even as you are being questioned by the switchboard, a security officer is already on his way to you.
- If possible, stay on the line until the security officer arrives at your location.

Harassment and Discrimination

It is the policy of JCLHN to maintain a work environment free from any form of harassment. This includes discrimination based on race, color, religion, national origin, gender, age, disability or veteran status. Everyone has the right to do his or her job in a harassment-free workplace. Harassment may occur between an employee and co-worker, an employee and supervisor, an employee and vendor, or a co-worker and patient, etc. (Co-worker is defined as employees, physicians, volunteers or other individuals i.e. students providing care of services within JCLHN.)

Harassment may include offensive language (verbal or non-verbal) including jokes, gestures or comments, epithets, slurs, negative stereotyping and comments that relate to race, color, religion, gender, national origin, age or disability; written material that is threatening and/or intimidating or shows aversion toward an individual or group because of race, color, religion, gender, national origin, age or disability. Harassment may also include non-verbal acts such as staring at a person's body, offensive gestures or motions, or written materials or physical act such as touching, hugging, grabbing or other unwanted or unwelcome physical contact.

Domestic Violence

JCLHN asks all patients if they feel safe from violence at home. Domestic violence is a problem throughout America. Someone is battered about every 9 seconds. Are you being abused? Does the person you love...

- Threaten to hurt you or your children?
- Say it's your fault you get hurt and promises it won't happen again, but it does?
- Put you down in public/keep you from seeing/talking to your family or friends?
- Throw you down, push, hit, choke, kick, or slap you?
- Force you to have unwanted sex?

Just one "yes" answer means you are being abused. Abuse is never OK and help is available.

The following are plans you can make for your safety:

- Do not allow yourself to be cornered in a room.
- Talk with your children about safe places to go and how to get help.
- Set up an emergency signal with a trusted neighbor.
- If someone threatens and follows you, find different ways to go places and tell your boss and friends.
- Hide an extra set of house and car keys outside in case you need to leave quickly.
- Take important papers such as birth certificates for you and your children, health insurance cards and medical records, deeds (house, car, property) or leases, checkbook and extra checks, social security or immigration papers, driver's license or photo ID, photos of injuries or property damage.

Shelter space is available. Call 602.263.8900 or 1.800.799.7739. For more information contact Arizona Coalition Against Domestic Violence at 602.279.2900 or 1.800.782.6400. If you receive information of abuse from your patient, notify the employee you are working with, the Director of the department, and your instructor.

Ergonomics

Ergonomics looks at your interaction with your workspace, tools and environment. Minimize your risk with the following:

- rotate and use a variety of work positions.
- reduce repetitive motion by sharing tasks with your co-workers. Try to be ambidextrous.
- maintain a neutral position.
- exercise daily to increase blood flow and strengthen muscles.
- manage your weight to stay at optimum health.
- use proper body mechanics when lifting.
- be aware of your workstation and suggest solutions for problems.
- when moving patients, never lift alone - work in teams.
- use assistive devices when available. Examples are Hoyer lifts, carts, dollies, and wheeled backpacks/briefcases.
- when picking up heavy objects, use a wide, balanced stance with one foot ahead of the other
- bend at the knees or hips.
- bring the load as close to your body as possible.
- If you have pain, numbness, muscle tenderness, or decreased movement contact your instructor. Early intervention can speed recovery.

Age Related Care

The care and customer service to patients at JCLHN often requires consideration of the patient's age.

Infancy: Birth to 1 year

Infants from birth to 1 year have little understanding of their environment and do not have a concept of “object permanence.” An infant may be distracted with shiny or colorful objects during a procedure. Parents must always receive an explanation of what is going to occur. If possible, it is best to have parents present for any procedure, in order to offer comfort to the infant.

Toddler: 1 to 3 years

Because toddlers like to put objects in their mouths, make sure toys and other playthings are clean and do not have small parts or pieces which can be aspirated or swallowed. Crying may still occur more out of fear than pain. Toddlers may be very fearful of unfamiliar faces and cannot be sure that the parent will return if he/she leaves the room. Taking a few moments to talk to the child in a calm, friendly voice may help. Children will have little understanding of the situation, so details are best shared with the parents.

Preschool: 4 to 5 years

Preschoolers have begun to establish a fairly good understanding of their environment. A brief explanation of what is expected should be given to the child in words he/she can understand. Be honest with the child about what is to take place, but not so far in advance as to precipitate a build up of anticipatory fear. Toys and games can help to teach the child and reduce fear. During this age children usually want to please. Help the parent teach the child rules of safety.

School Age: 6 to 11 years

Children of this age follow instructions fairly well. Explain things in terms they can understand. Incorporate parents as you allow children to make some decisions for themselves. Build self-esteem. They like video games. Guide child in making healthy, safe, lifestyle choices.

Adolescence: 12 to 18 years

Many changes take place during this time, both physically and emotionally. Teenagers want to be in control of their environment and have a say in their plan of care. Always be truthful; don't discourage

talk of illness or even death. Privacy and body image are very important to the adolescent. Encourage open communication between parent(s) and peers. Treat them more as an adult than as a child.

Early Adulthood: 19 to 45 years

This is a time of moving from dependence on parents to an age of responsibility, self-sufficiency, of searching for and finding a place in society. Body reaches its peak. Encourage healthy and safe habits. The skeletal system continues to grow until about age 30. Muscular efficiency is at its max, but skin may begin to lose moisture. Health problems may begin to appear during this time. Recognize commitments to family, career and community.

Mid-Adulthood: 46 to 60 years

It is said that life begins at 40. Well, how about 50? Financially, these are usually the years of highest income. Couples must reestablish their relationship and adjust to becoming grandparents. The body is definitely changing, bone mass begins to decrease along with decreased muscle strength. Encourage plans for healthy, active retirement. Recognize the person's physical, mental, social abilities and contributions.

Late Adulthood: 61 to 79 years

Physical abilities naturally decline. Communication; this is a time to encourage acceptance of aging. Health is monitored more closely, not only physical, but also mental. Encourage social activity with peers, i.e., as a volunteer. Provide support for coping with impairments. Provide information, materials, etc., to make medication use, and home environment safer.

Senior: 80 years and older

While age often brings experience and wisdom, it also brings new challenges, complications and needs. One of the most important things we can do for the elderly is preservation of their dignity. Age is often accompanied by use of eyeglasses, hearing aides, dentures, walkers, wheelchairs, incontinence pads, or other devices required to function on a daily basis. Encourage independence; provide physical, mental, and social activities. Support end-of-life decisions by providing information and resources.

Advance Directives:

When a patient is not capable of making or communicating health care decisions, healthcare directives allow the patient to have control over such decisions either by designating someone to make medical decisions, or establishing guidelines for those decisions. The following documents are advance or health care directives: Living will, Health care power of attorney, Medical power of attorney, Mental health care power of attorney, Pre-hospital medical care directives. Patients are not required to have an advance or health care directive

JCLHN is required to ask upon admission if a patient has a directive or provide information about advance or health care directives if the patient requests. Consult Social Services (NM) or Admitting (DV) or refer to Provider (PND.) They can provide patients with requested information. If the patient does have directives, try to get a copy for the chart.

APPENDIX

Clinical Experience Form

Evaluation of Student Experience

Student Responsibility Statement

Mandatory Annual Safety and Health (MASH) Test

Clinical Experience Requirements Form

JCLHN is participating in the Maricopa Cooperative Clinical Planning System. Please use the most current Clinical Experience Requirements form available on the Maricopa web site (included in Appendix for your convenience). A rotation schedule for your students must be submitted with the Clinical Experience Requirements form. Please include the unit location of each student. Both forms should be completed and sent to Organization and Staff Development office one week before the beginning of a clinical experience.

Student Experience Evaluation

All students are required to fill out the evaluation form (included in Appendix). It is very helpful if the campus and unit are identified. Compliments to staff are passed on to Directors and to the identified staff. Thank you for participating in our journey toward excellence.

CLINICAL EXPERIENCE REQUIREMENTS FORM

Complete this form and email or fax to student coordinator 1 week prior to clinical. Attach clinical rotation schedule if applicable. Do not provide contactor student ID number

School:		Instructor (sign & date):	
Experience Dates:		Office Phone:	
Experience Type:		Cellular:	
Time or Shift:		Pager:	
Student Level:		E-Mail:	

	Student Name	
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

Students and Instructors have met the following requirements (Records are on file at the college/university):

Health Requirements

- Proof of Immunity or Immunization for Varicella, Rubella, Mumps, Measles
- Documentation of annual PPD or if positive negative chest x-ray since converting and no symptomatology
- Documentation Hepatitis series or antibody screen or signed declination statement
- Pre-clinical drug screening
- CPR (Health Care Provider)
- Criminal background check
- Confidentiality and Health Insurance Portability and Accountability Act (HIPAA)**
- HIPAA Training and signed Confidentiality agreement

Training/Education- Faculty and Student Guide

- OSHA Standards (Fire, Safety, Infection Control, Standard Precautions)
- Body Mechanics/Ergonomics
- Restraints, Prevention of Falls
- Age Specific care (G & D)
- Patient rights and patient safety

Agency Specific Orientation/Information

- Mission/Vision/Values/Philosophy
- Event Codes
- HIPAA

STUDENT RESPONSIBILITY STATEMENT

In order to meet the requirements of Section I.5 of the Agreement for Clinical Practicum and/or Internship/Externship Education, Students shall read the following and indicate their understanding by signing below. This Student Responsibility Statement is in addition to the course syllabus, and the student is responsible for being familiar with the content of both documents.

In consideration of the opportunity to enter into a clinical education/internship educational program, I agree to:

- A. Complete and be responsible for the cost of providing all health forms and certificates requested by John C. Lincoln Health Network.
- B. Provide liability coverage for myself for the term of the clinical/internship education assignment if my school does not provide it. I will be responsible for providing proof of coverage that I have obtained individually before my clinical rotation can start.
- C. Secure my own housing, if needed.
- D. Follow the policies, rules and regulations of John C. Lincoln Health Network, including those regarding confidentiality of protected health information or other confidential information pertaining to client and patient records.
- E. Conduct myself at all times, both at John C. Lincoln Health Network and outside normal business hours, in a personally and professionally ethical manner.
- F. Conform in my attire and appearance to the accepted standard of John C. Lincoln Health Network, and procure the appropriate and necessary attire required, if any, but not provided by John C. Lincoln Health Network.
- G. Provide my own transportation to and from John C. Lincoln Health Network and any reasonable special assignment by the faculty of John C. Lincoln Health Network. I will never transport patients.
- H. Conform to the agreed schedules between John C. Lincoln Health Network and the School, Each individual school will follow its own policies for make-up time, but such time must be approved by JCLHN.
- I. Notify John C. Lincoln Health Network and the Clinical Program Coordinators if I learn of or develop an injury or illness or condition that may require accommodations for my own personal safety or that of the persons around me during my clinical rotation and /or externship. Such accommodations must be approved by JCLHN and the School.
- J. Obtain prior written approval from John C. Lincoln Health Network and the Clinical Program before publishing or presenting any material relating to the clinical experience outside normal educational settings of the program.

Student Name: _____

(Please type or print)

Student Signature

Date

MANDATORY ANNUAL SAFETY AND HEALTH 2009

Name	Date
-------------	-------------

Please answer the following questions.

1. Match the following emergency codes:

___ Fire	A. Code triage
___ Disaster	B. Code red
___ Bomb Threat	C. Code pink
___ Infant Abduction	D. Code yellow
___ Patient needs resuscitation	E. Code blue
___ Hostile Situation	F. Code gray

2. True () False ()
When using a fire extinguisher, one must squeeze the handle before pulling the pin.

3. True () False ()
During a Code Yellow, if the search of your area reveals nothing unusual, you should call security and provide that information.

4. True () False ()
Students should wear personal protective equipment when giving patient care to a patient in contact precautions.

5. True () False ()
Annual TB skin test is required by OSHA.

6. True () False ()
During a code gray, staff in unaffected areas, should gather as directed in the lobby or ED.

7. True () False ()
The Code Arrest team will respond to Code Blue at both hospitals.

8. True () False ()
If you need security stat, call the operator and explain why you need security. The operator will decide if STAT is necessary or not.

9. True () False ()
Security is available 24 hours a day, 365 days a year and can be contacted immediately by dialing "5555."

10. True () False ()
The most common hazardous drugs are antineoplastic drugs

11. True () False ()
You can use a cell phone in the hospital at any time if it is digital and if it is not objected by nursing staff.
12. True () False ()
You may review information in any patient's medical record as long as you do not share the information.
13. True () False ()
If you are caring for a patient who is to be cared for with contact precautions, you should wear a gown, gloves, mask, and goggles when changing a heavily soiled dressing
14. Match the following age-related issues with the age group listed below by placing the appropriate number in front of the statement:
- _____ Although the body ages, the mind is often younger
 - _____ Children in this age often want very much to please
 - _____ Children in this age may respond to warm and friendly explanations
 - _____ Our bodies should be at their peak during these years
 - _____ Privacy and body image are of prime importance to this age group
 - _____ Children in this age group can be distracted with colorful objects
 - _____ Bone mass begins to decrease during this age phase
 - _____ The use of video games may take the child's mind off a situation
1. Infancy: Birth to 1 year
 2. Toddler: 1-3 years
 3. Preschool: 4-5 years
 4. School Age: 6-11 years
 5. Adolescence: 12-18 years
 6. Early Adulthood: 19-45 years
 7. Mid-Adulthood: 46-60 years
 8. Late Adulthood: 61-79 years
 9. Senior: 80 years and older
15. True () False ()
The Compliance Program helps JCLHN prevent, discover and correct problems in a timely manner.
16. True () False ()
Social workers are trained to help victims of domestic violence.

17. True () False ()
A yellow band on a patient's wrist denotes fall risk.
18. True () False ()
Purple patient bands denote DNR.
19. True () False ()
JCLHN current policies are found in binders in every department.
20. True () False ()
All students performing bedside glucose testing must recertify six months after the initial certification.
21. True () False ()
Help for domestic violence is not available for students.
22. True () False ()
All JCLHN policies apply to students doing clinical rotations within the network.

Please check and correct your answers with the following answer key.

1. **B** Fire
A External Disaster
D Internal Disaster (bomb)
C Infant Abduction
E Patient needs resuscitation
F Hostile Situation
2. **False.** Pull the pin, aim, and squeeze the handle
3. **True.** Let security know if you have found nothing unusual.
4. **True.** Personal Protective Equipment is essential in preventing the spread of disease. Use gloves, gowns, face shield, masks, or goggles as needed to protect yourself from exposure to body fluids.
5. **True.** The TB skin test is an essential monitor to control the spread of TB. This is an annual exam available to volunteers through Employee Health.
6. **False.** During code gray, staff will remain on their unit.
7. **True.** Code arrest team will respond to code blue in both hospitals.
8. **False.** If you need security stat, you should dial 5555 and indicate that you need them stat. An officer will come to you.
9. **True.** Security is available at all hours. Do not hesitate to use this team when you need assistance or an escort.
10. **True.** The common hazardous drugs are antineoplastic drugs.
11. **False.** Cell phones may be used only during break.
12. **False.** HIPAA laws limit your access to only the information you need to do your job and nothing more.
13. **True.** If you are caring for a patient in contact precautions, you must wear gown, gloves, mask and goggles when in contact with the patient.
14. **8** Late Adulthood
3 Preschool
2 Toddlers
6 Early Adulthood
5 Adolescence
1 Infants
7 Mid Adulthood
4 School Age

15. **True.** The Compliance program helps JCLHN prevent, discover and correct problems in a timely manner.
16. **True.** Social workers are trained to help victims of domestic violence.
17. **True.** Yellow identifies those who are at risk for falls
18. **True.** Purple bands denote DNR
19. **False.** Help is available for all victims of domestic violence
20. **True.** All students must comply with JCLHN'S policies.

Please return the corrected test to your instructor or school. Thank you