

**GENERAL  
INFORMATION**

# **MISSION STATEMENT**

To provide quality healthcare and foster health and wellness.

# VISION STATEMENT

To be the preferred provider for high quality care, creating better health in our communities and recognized for excellence in all that we do.

# VALUES

- Behaviors and attitudes we should expect from everyone working in our health system
  - Patient First
  - Creativity
  - Respect
  - Accountability
  - Transparency
  - Collaboration

# EVIDENCE-BASED PRACTICE

- Evidence-Based Practice is providing the best individualized patient care based on the most current research.
- Steps include identifying a condition, letting research guide our treatments, and changing internal processes to improve outcomes.

# PATIENT HARM REPORTING

- Any adverse events, close calls or near misses that did or could cause harm, should be reported.
- This includes hazardous or unsafe conditions that increase the chance of an adverse event occurring.
- All reports are routed to the Director of Patient Safety using the Fixit Ticket Report System, within 24 hours.
- Always include the persons involved, time, place, all pertinent facts about what happened, and what actions were taken.
- Please contact your director if you need assistance with this.

1. Evidence Based Practice is providing the best individualized patient care based on the most current research.
  - a. True
  - b. False
  
2. If there is an incident causing patient harm, the Director of Patient Safety should be called within 24 hours.
  - a. True
  - b. False

## GENERAL INFORMATION



**EMPLOYEE /  
VOLUNTEER  
SAFETY**



# PREVENT BACK INJURY: BENDING

- Use correct posture and change positions frequently.
- Bend with knees and hips, and keep the back in the neutral position.
- Bend down on one knee, if necessary.
- Get as close to the object as possible.

# PREVENT BACK INJURY: LIFTING

- Get a firm footing, keeping your feet shoulder width apart.
- Lift using your hips and legs, not your back.
- Keep the load close to your body.
- Tighten your stomach muscles to support your back when you lift.
- Keep feet apart, knees bent, back in neutral position and chest forward.

# PREVENT BACK INJURY: PUSHING

- Push with both arms, keeping elbows bent.
- Tighten stomach muscles as you push.
- Stay close to the load, without leaning forward.
- Keep a straight back.

# PREVENT BACK INJURY: TURNING

- When you turn, turn with your whole body (pivoting). Do not twist your back.
- Use your arms and legs to do the work – not just your back.

# SAFETY DATA SHEETS

- A Safety Data Sheet (SDS) is an electronic document that provides information on the properties of hazardous chemicals and how they affect health and safety in the workplace.
- SDS sheets are located on RHINO, the intranet.
- SDS sheets were called MSDS sheets.

# PENDING VIOLENCE INDICATORS

- It's important to recognize early warning signs that a person's behavior is getting out of control.
- STAMP is a tool that helps you recognize that a person may become violent:
  - S – staring and eye contact
  - T – tone and volume of voice
  - A – anxiety or agitation
  - M – mumbling
  - P – pacing

# ELECTRICAL APPARATUS

- Causes of electrical accidents include:
  - Frayed cords
  - Unsafe use of electrical equipment
  - Unsafe work practices
- Any electrical apparatus brought into the hospital MUST be approved by the Maintenance Department (x5218) before use.

# MRI SAFETY

- All MRI departments are required to have clearly marked safety zones for safety.
- Only personnel that have been either trained, screened or are escorted are allowed into zones III and IV.
- The magnet is ALWAYS on. Even if the hospital loses power!



# MRI SAFETY (CONT.)

- Simple items such as pens, coins and scissors can become deadly as they fly through the air towards the magnet.
- Only transport patients using MRI safe wheelchairs or stretchers. These are located within the department and identified by the large white stenciled “MRI” lettering.
- Ask yourself, “Do I have any metal on?”

1. When lifting you should
  - a. Keep the load close to your body
  - b. Lift, turn and twist
  - c. Bend over and pull
2. MSDS has a new name; it is now SDS (Safety Data Sheets).
  - a. True
  - b. False
3. What are the signs that indicate a person may become violent?
  - a. Staring & eye contact
  - b. Tone & volume of voice
  - c. Anxiety or agitation
  - d. Mumbling
  - e. Pacing
  - f. All of the above
4. Any electrical apparatus brought into the hospital must be approved by the Maintenance Department before it is used.
  - a. True
  - b. False
5. MRI accidents are on the rise; therefore, understanding MRI safety is critical. The critical safety points include:
  - a. Knowledge that the magnet is ALWAYS on
  - b. Stop before entering MRI area and ask yourself do I have any metal on or in me
  - c. Do not enter MRI zones 3 or 4 unless you are screened or escorted
  - d. Understand that small items such as coins, pens, or scissors can become dangerous objects
  - e. All the above

## EMPLOYEE SAFETY





**PATIENT SAFETY**

# NATIONAL PATIENT SAFETY GOALS

- The National Patient Safety Goals for Hospital, Laboratory and Home Health Programs have been developed primarily to improve patient safety.

# PREVENTING PATIENT FALLS

- Identification of Patients at High Risk for Falls
- Yellow Wristband
- Yellow non Skid Footwear
- Fall Precaution sign on Door Frame
- Sign over Head of Bed
- If you see a patient – identified as high risk for falls – getting out of bed or walking without assistance, assist them safely to a chair or bed and notify a nursing assistant or nurse immediately.

# PATIENT ABUSE AND NEGLECT

- ALL hospital staff and volunteers are required to report all suspected child, disabled adult, or elderly abuse cases to the Department of Social Services Adult/Child Protective Services.
- If assistance is needed with the referral, contact the Case Management Department
- Patients have a right to a safe environment in the hospital.
- Any type of abuse of a patient is a breach of medical ethics and a violation of Randolph Health's policy on Professional Behavior and Standards. Certain violations of this policy can result in imprisonment.
- In order to protect our patients, criminal background checks are a part of the hiring process for Randolph Health volunteers and employees.

1. The main purpose of the National Patient Safety Goals is to improve patient safety.
  - a. True
  - b. False
2. Identification of patients at high risk for falls is:
  - a. Yellow wristband
  - b. Yellow non-skid footwear
  - c. Fall precaution sign on door frame
  - d. Sign over head of bed
  - e. All of the above

**PATIENT  
SAFETY**





**FIRE SAFETY**



# R.A.C.E. RESPONSE

- Rescue: Help patients, visitors and personnel to safety.
- Alarm:
  - Pull nearest alarm box.
  - Call x4444 and report “Fire Alarm – (Location and your name)”.
- Confine: Close doors and windows in area where fire is located.
- Extinguish: If safely possible, put out fire with extinguisher. Evacuate otherwise.

# WHEN FIRE ALARM SOUNDS...

- All corridor traffic must stop!!
- Keep ALL visitors/families in your area until “All Clear” sounds.
- Do NOT allow anyone to use elevator.
- Close any open doors. Fire doors will close automatically.

1. The four steps of the RACE fire response plan are Rescue, Alarm, Confine, and Extinguish.
  - a. True
  - b. False
2. The two steps involved in reporting a fire are to pull the nearest fire alarm and to call extension 4444 (report the area, event and your name).
  - a. True
  - b. False
3. When the fire alarms sound all corridor traffic must stop. This includes visitor/families.
  - a. True
  - b. False

## FIRE SAFETY





# **PATIENT RIGHTS**

# ADVANCE DIRECTIVES

- There are two (2) types of Advance Directives:
  - An Advance Directive Regarding A Natural Death, commonly called “Living Will”, and,
  - Health Care Power of Attorney.
- The following are NOT Advance Directives:
  - DNR: Do Not Resuscitate form
  - MOST: Medical Order for Scope of Treatment form from and signed by an MD, PA or NP, and patient or patient representative
  - Durable Power of Attorney
  - Last Will and Testament

# ADVANCED DIRECTIVES REVIEW

- The Spiritual Care staff is responsible for reviewing advance directives with interested patients from 9:00 – 4:00 weekdays.
- If a patient desires Advance Directives information, a referral is ordered.
- Chaplains respond to referrals within 24 hours of request.

# EMTALA

- EMTALA is the Emergency Medical Treatment and Active Labor Act.
- Any person requesting assistance for a potential emergency medical condition will receive a screening performed by a qualified provider, to determine whether an emergency exists.
- Persons with emergency medical conditions will be treated and their condition stabilized without regard of ability to pay for services.

1. Advance Directives deprive a patient of comfort measures.
  - a. True
  - b. False
2. Who at Randolph Health is responsible for reviewing Advance Directives?
  - a. Any Randolph Health employee
  - b. Spiritual Care staff
  - c. Security personnel only
3. The MOST form requires the signature of –
  - a. MD, PA or NP
  - b. Patient or patient's legal representative.
  - c. All of the above.
4. 4. EMTALA applies to any person who walks in the emergency department and requests medical evaluation regardless if they can pay for services.
  - a. True
  - b. False

## PATIENT RIGHTS







**CULTURAL  
DIVERSITY**

# CULTURAL DIVERSITY VALUES

- Accepting and appreciating differences among people.
- Understanding our fellow volunteers and coworkers.
- Working together as a team.
- Acknowledging the strengths and weaknesses of each person.

# COMMUNICATION


- Depending on the culture, a person might favor or be offended by
  - Eye contact
  - Gestures
  - Certain tones and volume of your voice
  - Standing too close or too far away
- Watch and listen to the other person for clues and tailor your responses if possible.
- If you accidentally offend someone, apologize.
- It's impossible to know social customs of every culture but...

Everyone should be treated with fairness and respect!

1. Cultural diversity means:
  - a. To accept and appreciate different people
  - b. Understand our coworkers and work as a team
  - c. Acknowledge the strengths and weaknesses of each person
  - d. All of the above
2. Which of the following communication approaches does NOT differ across different cultures?
  - a. Loud tone of voice
  - b. Maintain eye contact
  - c. Treating others with fairness and respect
  - d. Gesturing

## CULTURAL DIVERSITY





**SEXUAL  
HARASSMENT**

# WHAT IS SEXUAL HARASSMENT?

- Sexual advances
- Requests for sexual favors
- Other sexual conduct
- Unwelcome actions that can:
  - affect job status
  - interfere with work performance
  - create a hostile work environment

# TYPE 1: QUID PRO QUO

- Conduct of harasser is unwelcome
- Harassment does not depend on gender
- Harasser does not need to be victim's direct supervisor
- Can be anyone who has a position of power
- Harasser does not need to follow through; it is simply threat alone
- A single sexual advance may be considered "Quid Pro Quo" harassment

# TYPE 2: HOSTILE WORK ENVIRONMENT

- Conduct of harasser is sexual in nature and unwelcome
- Harassment does not depend on gender
- Harasser can be anyone – supervisors, co-workers or non-employees
- Victim can be anyone affected, not just harassed person
- Victim does not need to prove any specific job-related losses



# TYPE 2: HOSTILE WORK ENVIRONMENT (EXAMPLES)

- Inviting co-worker out repeatedly after they have said “no”
- Leering at a co-worker in a sexual manner
- Telling or emailing lewd, sexual or explicit jokes or stories
- Talking about a co-worker’s body or clothing in a sexual way
- Unwelcome physical contact
- Hanging or emailing lewd, sexual or explicit pictures
- Talking about a co-worker in a sexist or sexually offensive way

# EMPLOYEE RESPONSIBILITY

- Review the sexual harassment policy
- Know what sexual harassment means
- Do not harass co-workers
- Complete the sexual harassment education module annually

# VICTIM RESPONSIBILITY

- Confront the harasser directly
- Tell the harasser their conduct is unwelcome and must stop
- File a complaint
- If harassment does not stop, report to their supervisor, director, or Human Resources

## NO Retaliation

Employers are prohibited from firing, demoting or causing difficulties for anyone who complains of harassment or who supports the complaints.

1. Sexual Harassment occurs when the conduct of the harasser is sexual in nature and unwelcome.
  - a. True
  - b. False
  
2. If you feel you have been harassed, it is your responsibility to confront the harasser, tell them their conduct is unwelcome and must stop, and file a complaint.
  - a. True
  - b. False

## SEXUAL HARASSMENT





**INFECTION  
PREVENTION**

# BREAKING THE CHAIN

- Elements of the Chain of Infection are:
  - Infectious Agent (organisms)
  - Source (reservoir)
  - Portal of Exit
  - Mode of Transmission
  - Portal of Entry
  - Susceptible Host
- The weakest link, and the easiest to break, is the Mode of Transmission.

# PATIENT PRECAUTIONS

- Standard Precautions are used for ALL patients to prevent infection.
- Transmission-Based Precautions are used to prevent the spread of other infectious or drug resistant organisms, and include:
  - Contact Precautions,
  - Droplet Precautions, and
  - Airborne Precautions.

# PRECAUTION ROOMS

- Volunteers should never enter rooms marked as precaution rooms.



1. Infection control focuses on breaking the chain of infection by focusing on which link?
  - a. Infectious agent
  - b. Source
  - c. Mode of transmission
  - d. Susceptible host
  
2. Which precaution applies to ALL patients?
  - a. Contact precautions
  - b. Airborne precautions
  - c. Standard precaution
  - d. Droplet precautions
  - e. Give medicine
  
3. Volunteers should NOT enter precaution rooms.
  - a. True
  - b. False

## INFECTION PREVENTION



**CORPORATE  
COMPLIANCE &  
HIPAA**

# PROTECTED HEALTH INFORMATION: ACCESS

- Protected Health Information (PHI) can only be accessed to:
  - Treat patients.
  - Obtain payment for treatment provided, or
  - Improve healthcare operations.

# PROTECTED HEALTH INFORMATION: TYPES

- Protected Health Information (PHI) is any and all information about a person's physical or mental health that could (1) identify them or (2) there is reason to believe the information could identify them.

Information could include:

- Demographics: name, address, phone, email, next of kin, birthdate, photograph
- Financial: employer, social security or medical record number, insurance
- Clinical: patient chart, patient bill, reason for visit, test results, procedure performed, diagnosis

# ETHICAL ISSUES

- An ethical issue occurs when
  - a choice becomes self-serving,
  - rather than serving the best interest of others,
  - and the choice results in a moral compromise.

# CONFLICTS OF INTEREST

- A conflict of interest arises when a secondary objective (i.e. influence to choose one alternative over another) could affect the performance of your organizational role.
- It may also include a financial gain incentive.
- A conflict of interest can be subtle and unrecognized by you or the affected individual.

# ...AND YOUR RESPONSIBILITIES

- Be aware and guard against potential conflicts.
- Disclose potential conflicts promptly using Form OW-ADM-003A – Conflict of Interest and Gift Disclosure Survey when a potential conflict occurs.
- Disclose using Form OW-ADM-003A – Conflict of Interest and Gift Disclosure Survey upon request, typically annually.

# COMPLIANCE: WHAT IS IT?

- A commitment to an ethical way of conducting business.
- A system for doing the right thing.



# COMPLIANCE ACCOUNTABILITY

- Board of Directors: sets the tone and delegates oversight
- FAIR (Finance, Audit, Investment & Retirement) Committee: responsible for effectiveness of program, receives reports, and approves plan
- Senior Management: provides overall direction and fosters a culture of compliance
- Department Directors: monitoring and training
- Employees, Volunteers & Contractors: complying with the law and standards

# COMPLIANCE REPORTING

- You are bound by federal and state laws and Randolph Health's policies to report any concerns of potential fraud or abuse.
- You can report anonymously to:
  - Supervisor,
  - Corporate Compliance Officer, or
  - Compliance Help Line at 336/633-7724.

# NO GIFTS PLEASE

- You must not gain personally from any transaction made to Randolph Health, including:
  - Kickbacks
  - Rebates
  - Money
  - Food
  - Entertainment
  - Tickets or travel
- Or any gift that exceeds \$10 per incident /\$100 accumulated annually.

# CORPORATE COMPLIANCE & HIPAA

1. For what reason(s) should I access protected health information?
  - a. Treating a patient
  - b. Obtaining payment for treatment
  - c. Improving health care operations
  - d. All of the above
  
2. What is PHI (protected health information)?
  - a. Demographic: name, address, phone/fax, email, next of kin, date of birth, photograph
  - b. Financial: employer, social security number, medical record number, insurance
  - c. Clinical: patient chart, patient bill, reason for visit, test results, surgery performed, diagnosis
  - d. All of the above
  
3. A Conflict of Interest
  - a. Arises when a secondary objective (i.e., influence to choose one alternative over another) could affect the performance of your organizational role
  - b. Often includes a potential for financial gain
  - c. Can be subtle and unrecognized by the affected individual
  - d. All of the above
  
4. Ethical issues occur when a choice becomes self-serving and the choice results in a moral compromise.
  - a. True
  - b. False



## CORPORATE COMPLIANCE & HIPAA

5. My responsibilities regarding potential conflicts are:
  - a. Be aware and guard against potential conflicts.
  - b. Disclose potential conflicts using OW-ADM-003A – Conflict of Interest and Gift Disclosure Survey, promptly when a potential conflict occurs.
  - c. Disclose using OW-ADM-003A – Conflict of Interest and Gift Disclosure Survey, annually upon request.
  - d. All of the above
  
6. What is compliance?
  - a. A system for doing the right thing
  - b. A commitment to an ethical way of conducting business
  - c. Both A and B
  - d. None of the above
  
7. Who is responsible for compliance with laws and regulatory standards as well as organizational policies and procedures, and can receive criminal and/or civil penalties for submitting a false claim?
  - a. Board of Directors/FAIR Committee
  - b. Senior Management
  - c. Department Directors
  - d. Employees & Contractors
  - e. All of the above
  
8. If I become aware of potential fraud or abuse, I am bound by federal and state laws and the Organization's policies to report my concern.
  - a. True
  - b. False



## CORPORATE COMPLIANCE & HIPAA

9. I can report my concerns anonymously or confidentially to
- Corporate Compliance Officer
  - Compliance Help Line
  - 336-633-7724
  - All of the above
10. The Organization's staff must not gain personally from any transaction made on behalf of the Organization. This is including but not limited to kickbacks, rebates, or gifts of money, food, entertainment, tickets or travel, exceeding what amount(s)?
- \$10 per incident/\$100 accumulated annually
  - \$10 per incident/\$250 accumulated annually
  - \$25 per incident/\$100 accumulated annually
  - \$25 per incident/\$250 accumulated annually
  - None of the above
11. All staff are bound by federal law to report violations/non-compliance.
- True
  - False





**INDIVIDUALIZED  
CARE**

# AGE-SPECIFIC CHANGES

- Information that includes a general description of the social, psychological and physical changes that occur as a person ages.
- Understanding this information helps volunteers and employees care and deal with patients at different ages.



# CARING FOR CHILDREN

- Infants and toddlers should be kept with their parents or caregivers if at all possible.
- Keep the child's safety and comfort in mind.
- Develop trust through touch and comfort.
- Avoid loud voices and rapid movements as it may frighten the child.
- Incorporate play and avoid loud noises.

1. Understanding “age specific” changes that occur as a person ages will help employees to better care for patients at different levels.
  - a. True
  - b. False
  
2. Infants and toddlers should always be separated from their parents because parents are just too overbearing when their child is sick.
  - a. True
  - b. False

## INDIVIDUALIZED CARE



**VOLUNTEER-  
SPECIFIC**

# DRESSING APPROPRIATELY

- For safety reasons, Randolph Health volunteers should wear closed-toe shoes.
- “Appropriate dress” means no jeans or shorts.
- Volunteers should wear their Randolph Health lanyard with name badge whenever “on duty”.

# CONFIDENTIALITY

- Volunteers are held to the same high standards of confidentiality as other members of the Randolph Health medical and administrative staff.
- We are all bound by a legal and ethical obligation to protect the privacy of patients.

# SAFETY

- You should get assistance from a staff member when trying to lift a patient from a wheelchair.
- Volunteers should not enter a patient room if any of the following precautions are posted:
  - Contact
  - Droplet
  - Airborne
- The best way to control the transmission of bacteria and germs is to have proper hand hygiene!

1. Blue jeans or shorts are not proper attire for volunteering. For safety reasons, volunteers should wear close-toe shoes.
  - a. True
  - b. False
2. All volunteers are held to a high standard of confidentiality. We all have a legal and ethical obligation to protect the privacy of our patients.
  - a. True
  - b. False
3. Volunteers should not lift patients from a wheelchair. Get assistance from a staff member if patient lifting is required.
  - a. True
  - b. False
4. Volunteers should not enter a patient room with the following precaution notice posted: Contact, Droplet or Airborne
  - a. True
  - b. False
5. Hand hygiene is the best way to control the transmission of bacteria and germs in the hospital.
  - a. True
  - b. False

## VOLUNTEER SPECIFIC

