



**LSU**Health

INTERIM LSU PUBLIC HOSPITAL

# ILH Key Elements

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# Welcome to ILH!



This presentation will give you some basic information, as well as introduce you to the Key Elements of our hospital orientation.

Please print out an answer sheet and complete it as you go through the presentation.

# ILH Core Values



- **Customer Focused**
- **Healing Environment**
- **Accountability**
- **Respect & Integrity**
- **Innovation**
- **Teamwork**
- **Yes We Can**

You are expected to demonstrate these every day!

# Appearance Standards



- All physicians, students, contract workers, volunteers, and vendors shall present a neat and clean appearance, and dress in a manner appropriate for a healthcare environment
- No denim, shorts, or revealing clothing
- Everyone must wear an official ID badge while on the premises
- You may have a specific dress code

# Customer Service



We have two kinds of customers:

- Internal (employees/coworkers, vendors, students, faculty, etc)
- External (patients and their families)
- Treat both with the same level of courtesy and respect

**Providing excellent customer service is a choice;**

Choose excellence every time!

# Universal Service Expectations



1. Introduce yourself and your purpose.
2. Be courteous and respectful.
3. Make sure the customer knows how to reach you.
4. Answer calls for help immediately and provide solutions/help quickly.
5. Communicate with patients/families in a way they can understand. Do not use medical terminology. Interpreter Services are available, if needed.

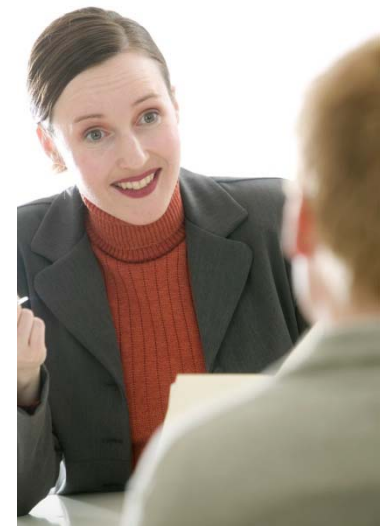
# Patients' Rights



- Follow all the National Patient Safety Goals
- Rights include being treated with respect, pain management, healthcare advocacy, population-specific care, having information explained in understandable ways.
- Responsibilities include providing an accurate medical history and following hospital rules
- A Patient Advocate is available if needed

# Personal Etiquette

- Things to do:
  - ▣ pay attention and listen
  - ▣ monitor your volume and tone of voice
  - ▣ let people finish sentences
  - ▣ be aware of your body language & facial expressions
  - ▣ make eye contact with the customer.





# Personal Etiquette

- Things to avoid
  - Taking the last of something without replacing it
  - Gossip and complaining
  - Body language that says you don't care
  - Humor that could offend or demean anyone



# Sexual Harassment



- Everyone has the right to a work environment free from sexual harassment.
- It can come from anyone: employee, volunteer, supervisor, vendor, student, faculty, etc.
- Sexual harassment is never acceptable.

## **If someone harasses you:**

1. Say “no” and tell them to stop
2. Notify the unit manager, and your instructor, immediately

# Communication Skills



- Communication can mean different things to different people.
- Nonverbal communication may be a stronger message than the words you use.
- Be aware of culture differences
- Always use language the person understands.
- Listen as much as you speak and be patient.
- Check with the person regularly to see that they understand you.

# Health Literacy



- The ability to understand and act upon health information
- Poor health literacy results in patient dissatisfaction, poor health outcomes, and higher costs due to noncompliance with instructions, resulting in repeat visits and more severe symptoms.
- Affects people of every age, culture, socioeconomic and educational levels

# Standards of Health Literacy



- Listen
- Treat patients and families with respect
- Explain information in ways the patient understands
- Welcome and encourage any and all questions
- Ask patients to repeat back or explain the instructions you have given them.
- Explain all treatments and medicines before giving them
- Give patients the information they will need to take care of themselves at home

# Helping Patients Who Don't Speak English



Always use the Cyracom “blue phone”, when communicating with patients and their families

# Dealing with Difficult Customers



- Anticipate peoples' needs and try to prevent problems before they occur
- Apologize for any difficulties
- Remain calm and listen; don't interrupt
- Try to solve the situation before it escalates to an unsafe one
- Know when and how to obtain assistance for the customer, when you are unable to help or answer their question. Consult the Patient Advocate, if needed.

# Quiz True or False?



1. I can treat coworkers differently than my patients
2. I'm not an ILH employee; I don't have to provide excellent customer service
3. It's ok to tell a patient "sorry, I don't know that"
4. I can ask a coworker or family member, to interpret for a patient who doesn't speak English



# Answers



1. No. Coworkers also (internal) customers. Provide them the same respect and helpfulness as you would your patients
2. No. Even though you are not employed by ILH, patients and families expect the same service from you. You are representing ILH to our patients.
3. You can't know everything; but you are expected to find the accurate information and then convey it to the person who needs it.
4. No; always use the Cyracom "blue phone"

# Telephone Etiquette



- Answer promptly; state name of department and your name
- Listen, show interest, take notes
- Transfer only when necessary; give the caller the number before you transfer them
- Convey messages quickly and accurately, repeat the message before hanging up with the customer

# Email etiquette



- Would a personal conversation be better?
- Re-read before sending
- Copy only the people you think need this information. Be careful about selecting “reply all”.
- Avoid multiple topics or lengthy messages, copying others as a form of coercion, using all caps or multiple exclamation marks!!!

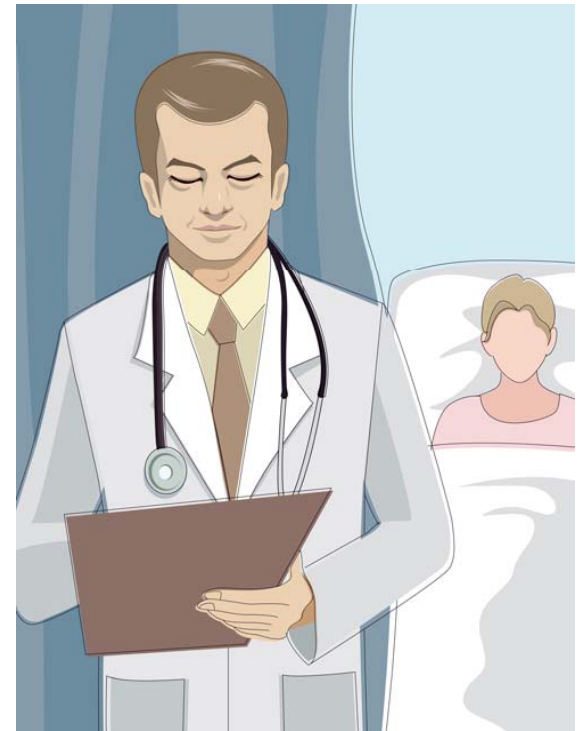
# Internet Use

- The ILH internet may not be used for any personal business, including during breaks or lunch.
- Internet usage is monitored and reported to leadership.
- The use of “social media”, when discussing patients or coworkers, is a breach of confidentiality.



# Ethics

- ❑ You are expected to do the right thing, at the right time, in the right place, for the right reason.
- ❑ The Ethics Committee provides an official forum for discussion of ethical concerns.
- ❑ You can reach an Ethics Committee member 24 hours a day, 7 days a week, by calling the hospital operator at 903-3000.



# Gift Policy



- **No Public Servant** (a public employee) shall solicit or accept, directly or indirectly, any thing of economic value as a gift or gratuity from any person who has or is seeking a business relationship with that person's agency.
- For more specific information, please read MCL Policy 0019

# Americans with Disabilities Act

- ILH provides reasonable accommodations to people with disabilities, when possible, and focuses on abilities rather on disabilities.



# Tobacco Free Environment

- ILH is a tobacco free facility, including all buildings and grounds owned by the hospital, with the exception of designated smoking areas on Gravier St. and across the street on Perdido St.
- Smoking Cessation Classes are offered to patients and employees – contact:

**Lucretia Young, MA, Cessation Specialist**

LSUHSC-School of Public Health, Tobacco Control Initiative(504)903-5059 or [lyoun2@lsuhsc.edu](mailto:lyoun2@lsuhsc.edu)



**SMOKE-FREE ZONE**

For your good health and for our healing environment this hospital and our clinics are tobacco free. Smoking is not allowed in and around this facility, including sidewalks.

Thank you for not smoking 



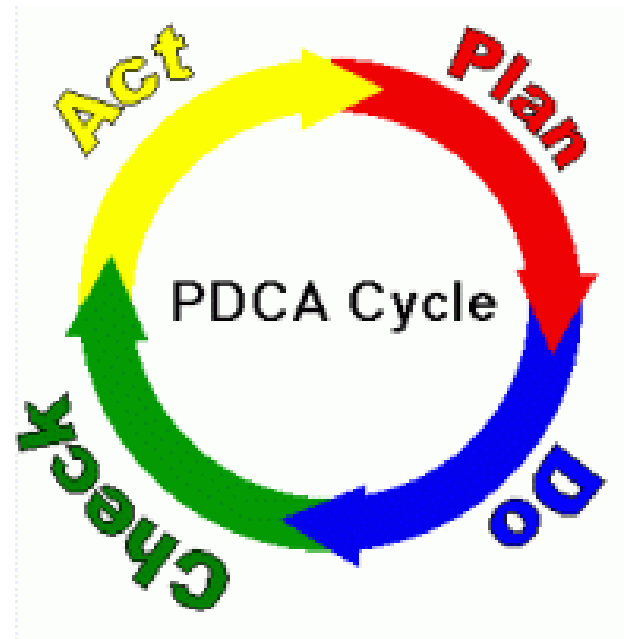
# ILH Drug Use Policy



- ▣ ILH is a drug- and alcohol-free workplace.
- ▣ Follow all drug-testing policies.

# ILH Performance Improvement Model

- *Plan*
- *Do*
- *Check*
- *Act*



- Everyone participates in performance improvement

# Incident Reporting



An incident is any occurrence that is not consistent with routine ILH operations, or has the potential to result in harm or loss, to an individual or property.

**All employees, volunteers, physicians, vendors, contractors, students, and faculty are responsible to report incidents. The manager of your area can assist you with this.**

# Safe Haven Law - Policy 0073

- ILH provides a **“safe haven”** for a parent who relinquishes the care of an infant to the state, providing the infant is
  - ▣ less than 30 days old
  - ▣ free from signs of abuse or neglect
  - ▣ left in the care of any employee at a designated emergency care facility.
  
- **The parent can remain anonymous and without threat of prosecution.**
  
- Take all relinquished infants to the ED.



# Abused or Neglected Patients



- Indicators for abuse and neglect are listed in MCL Policy 5065.
- It is mandatory to report suspected abuse or neglected in three populations:
  1. people of any age who have a disability
  2. people over age 60
  3. people under age 18
- Report your findings to Case Management-you may also have to report to agencies outside the hospital; Case Management can help you with this.

# Abused or Neglected Patients



You may also identify abuse or neglect in patients who are not in one of the three mandated populations

- Assess and document your findings
- Show compassion and respect
- Ask the patient if they would like you to report
- Offer them services (Case Management, outside agencies, police)
- Document your offer and the patient's response

## Quiz: True or False



5. I'm not a manager; I don't have to worry about performance improvement
  
6. I'm not an ILH employee; I don't have to worry about incident reports
  
7. If my patient is 70 and I suspect abuse, I have to make a report

# Answers



5. No; everyone participates in performance improvement
6. No; everyone who witnesses or is involved in an incident has a role to play . If you are not an employee, you will participate by providing information to the employee who is completing the report.
7. Yes, this is an example of a mandated report





# Safety

# Code Blue



## 1. Call for help

- Inside the hospital building, call 2-5000
- Outside the hospital building, call 911

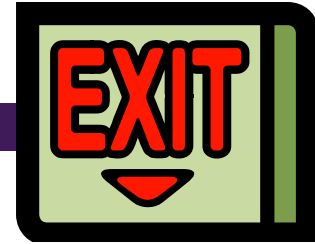
## 2. Begin the steps of BLS

# Rapid Response Team



- If you think anything is wrong with the patient, notify the doctor or nurse immediately.
- Inside the hospital, you can also call the Rapid Response Team - call 2-5000.
- If the patient continues to worsen, call for Code Blue, and begin the steps of BLS.

# Preventing Fires



- Follow all ILH safety rules and regulations
- Use electrical equipment safely
- Enforce the no-smoking policy
- Know the locations of fire alarm pull stations, fire extinguishers, and emergency exits in your work areas

# Code Red - Inside the Hospital

**In the immediate area of the fire: RACE**

**Rescue** persons in immediate danger

**Activate** the alarm; call 2-5000

**Close** doors

**Extinguish** or **Evacuate**



# Code Red—Inside the Hospital



**If you are in an area that is above, below, or adjacent to the fire, “defend in place”:**

Move patients into rooms

Close all doors and windows

Wait for further instructions

# Fire Extinguishers

ABC fire extinguishers may be used on any type of fire

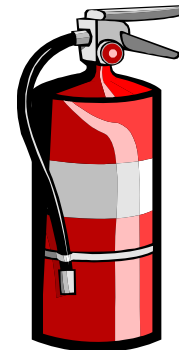
**To operate: PASS**

**P**ull the pin

**A**im the nozzle at the base of the fire

**S**queeze the handle

**S**weep from side to side

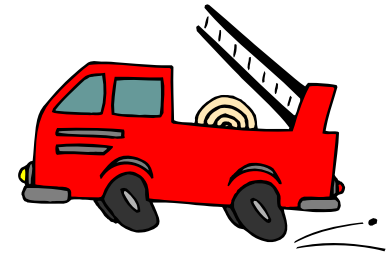


# Code Red—Outside the Hospital

**If you are in any building outside of the hospital  
(clinics, offices):**

Call 911

Evacuate immediately





# Electrical Safety

- Inspect all electrical equipment before use; do not use if damaged or wet.
- Plugs must have 3<sup>rd</sup> prong.
- Remove by pulling the plug, not the cord.
- In the event of power failure, use the red outlets for essential equipment, such as a ventilator.
- Only ILH electricians may open electrical panels and reset breakers.
- Only ILH-approved electrical equipment may be used.



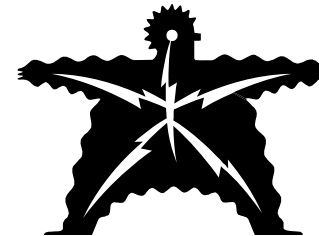
# Electrocution

**If you encounter someone being electrocuted:**

Disconnect the power source

Call for help

Begin the steps of BLS



# Quiz: True or False?



8. Only LH employees can call for the Rapid Response Team
  
9. If I see fire or smoke, I should run for help
  
10. An ABC fire extinguisher can be used on any type of fire

# Answers



8. Anyone call call for Rapid Response, including students, families, and visitors
  
9. No; the first step is to rescue anyone in immediate danger (R.A.C.E.)
  
10. Yes.

# Hospital Security



- Everyone is responsible for a safe environment.
- Everyone must wear an ID badge above the waist, and in plan view.
- Report any unusual or unsafe situation to Hospital Police (903-6337)
- Watch for and report any potential violence.

# Violence in the Workplace

- Violence can be verbal or physical.
- It is often preceded by warning signs.
- Domestic situations can result in violence at work - notify Hospital Police
- Call **Code White** for any potential or actual violent situations, 2-5000.



# Code Silver

- Someone with a weapon (gun or knife) in the facility
- Evacuate the area
- Call the operator (2-5000) and ask for code silver - give location and description of the person
- Police will take control of the situation



# Prisoner Care



- Treat prisoner patients with dignity and respect.
- Prisoners must wear a restraint device and law enforcement officers must be physically present at all times.
- Prisoners cannot have phone calls, messages, or visitors.
- Prisoner patients are given discharge instructions pertaining to their care, but are not given discharge date or follow up appointment information.



# Prisoner Care



**If you have any problems with prisoners or law enforcement officers, call Hospital Police at 2-6337.**

**For any prisoner-related violence:**

Call Code Gold 2-5000

# Hazardous Materials



- A **Material Safety Data Sheet (MSDS)** is a document that gives safety information about chemicals and substances (risks, storage, handling, disposal, etc.)
- Every chemical in your work area has an MSDS; these are available online or in the MSDS yellow binder.
- Follow all instructions given in the MSDS
- Use appropriate personal protective equipment

**If there is a chemical or radioactive spill, evacuate the area and call Code Orange: 2-5000.**

# Code Pink



If an infant or child is missing **call Code Pink, 2-5000.**

- ❑ go to the nearest hospital exit.
- ❑ watch for anyone leaving the hospital with an infant or child.
- ❑ do not attempt to detain the person.
- ❑ Observe their appearance, vehicle, and direction of travel, and report any details to the hospital police

# Internal Disaster

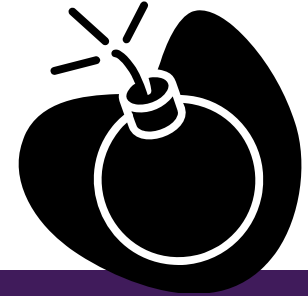


Disruption of services that could damage the facility, or threaten the health and safety of patients, visitors or employees


**1. Call Code Brown 2-5000**

**2. Follow the instructions of hospital leadership**

# Bomb Threat/Code Black



- If you receive a call, pay attention to any details
- Tell the caller that the hospital is occupied and this could result in injuries and death
- **Call 2-5000 and tell the operator “bomb threat report”**
- Give the operator the details of the call
- Remain calm; notify your coworkers
- Do NOT notify patients or families
- Follow the instructions of hospital leadership



**You can call 2-5000 for any  
emergency.**

# Quiz: True or False?



- 1 1. Prisoner patients have no right to any healthcare information
- 1 2. I can find information on how to handle chemicals safely 24/7
- 1 3. I can call 2-5000 for any emergency

# Answers



- 1 1. False. They have the right to know about their own health and treatment plan. However, they cannot be given any information about discharge date/time, or followup care appointments
- 1 2. Yes. You can look up any chemical information in the Material Safety Data Sheets
- 1 3. Yes. However, if you are located outside the ILH building, you will call 911 for Code Red or Code Blue



# Preventing Falls



- Everyone is responsible for preventing injuries in the workplace.
- Keep walkways clear, dry, and well-lit.
- Pay attention to your work, wear proper clothes and shoes, and follow safe work practices.
- Keep yourself free from injury.
- When you see a hazardous situation, request repairs or environmental services immediately; your manager can help you do this.

# Preventing Patient Falls



## **ILH's fall prevention initiative is called RAGTIME**

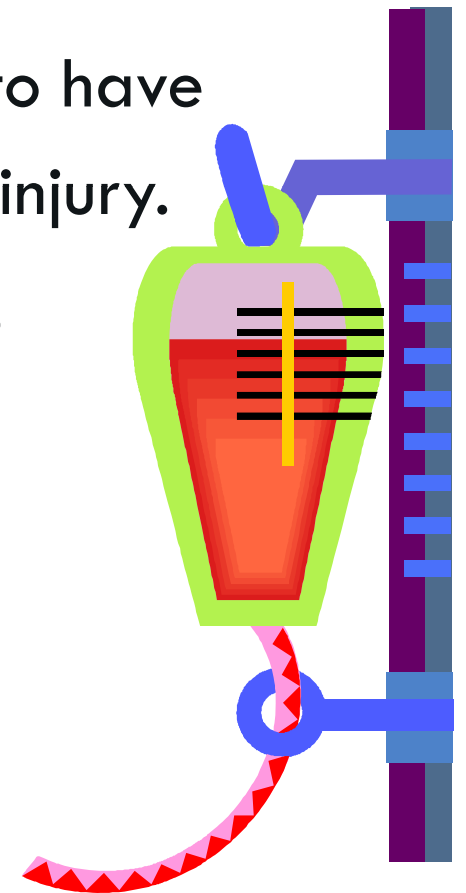
- Identify patients at high risk for falling
- Take immediate precautions
- Notify the department nursing supervisor
- Implement a plan to prevent falls
- Everyone who cares for patient is notified and will work to keep patient from falling

# Safe Medical Device Act

Federal law that says the FDA must be informed of any medical product causing, or suspected to have caused, a serious illness, injury, or potential injury.

**MDR- Medical Device Report 3500** is used to report:

- difficulty operating
- incorrect use
- adverse patient reactions/injury
- defective equipment



# Defective Equipment



When a device is defective or appears to be malfunctioning:

- Immediately remove it from the patient care area
- Clearly label it defective
- Complete the sticker (from CMS) and include the specifics of what you think is wrong
- Take the equipment down to CMS/Biomed for repair



# Infection Prevention and Control

# Infection Prevention and Control



- ❑ No eating or drinking in any patient care area
- ❑ Do not come to ILH if you are sick
- ❑ Perform hand hygiene
- ❑ ILH encourages flu vaccination
- ❑ Ask your healthcare provider about other immunizations; some may be mandatory.
- ❑ Use Standard Precautions with every single patient.
- ❑ Use personal protective equipment (PPE).

# Hand Hygiene



- Before and after patient contact
- After removing gloves and PPE
- Before preparing and giving food, medication, or handling any patient care supplies
- Soap and water: wash for 15 seconds
- Alcohol-based hand sanitizer may be used if no visible soiling; but not when *C. Difficile* is present; allow it to dry completely

# Respiratory Hygiene: Cough Etiquette

- Cover mouth and nose when coughing or sneezing
- Contain secretions in a tissue. Then dispose of in a touch less receptacle.
- Perform hand hygiene afterward.
- Mask all coughing patients.





# Blood borne Pathogens



- Treat all body fluids as if contaminated.
- Identify risks of exposure (your job duties); always use safe work practices.
- Use all safety devices as directed.
- Use PPE if exposure is possible.
- Never recap needles; dispose of in appropriate containers.
- When sharps bins are  $\frac{3}{4}$  full, call for replacement.

# Blood or Body Fluid Exposure



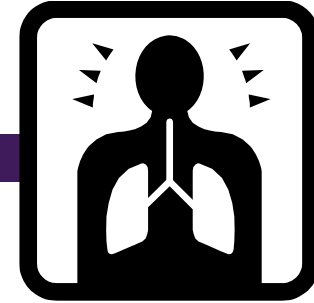
1. Act fast!
2. Wash exposed area with soap and water
3. Report exposure to the department manager
4. Go to the Staffing Office on 5West (W535) to pick up exposure packet, then...
5. Immediately report to the Urgent Care Clinic (or Emergency Department during off-hours)
6. Complete incident report. Department manager can help you with this.

# Tuberculosis (TB) Control Plan



- Complete TB screening (required).
- If you have any symptoms of TB, do not come to ILH; notify your healthcare provider immediately.
- **If you suspect TB symptoms in your patient:**
  1. Explain this to the patient
  2. Apply an N95 mask
  3. Notify your department manager
  4. Place patient in isolation room

# Symptoms of TB



- ❑ Cough that lasts over 2-3 weeks
- ❑ Chest pain with cough
- ❑ Fever, chills, night sweats
- ❑ Weight loss, poor appetite
- ❑ Fatigue, weakness
- ❑ Short of breath

# Quiz: True or False?



- 14. I only have to perform hand hygiene when the patient has infectious disease
  
- 15. PPE is worn only when the patient is in isolation
  
- 16. I'm not an ILH employee; if I get a blood/body fluid exposure, I only have to tell my instructor

# Answers



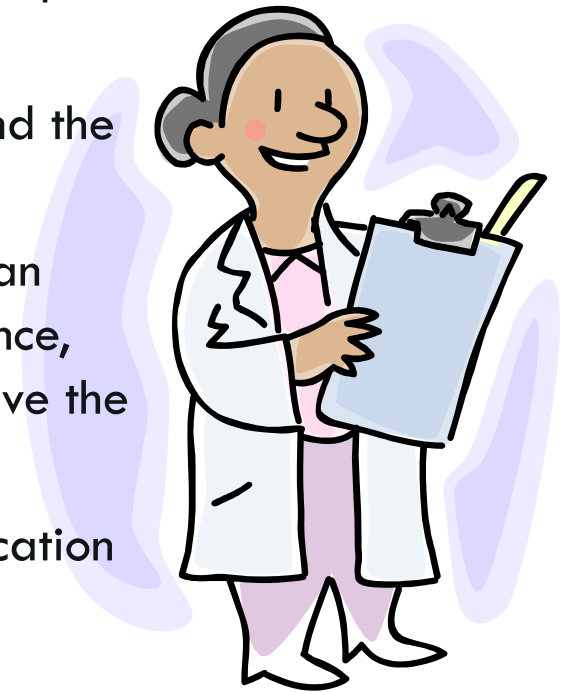
14. False; perform hand hygiene before and after any patient contact, handling patient care equipment, eating, drinking, or using the bathroom, etc.
15. No; PPE is worn anytime you suspect that you will be exposed to blood or body fluids
16. No; you will report to the department manager as well as to your instructor; you will follow ILH policy—the department manager will guide you through this process



# Corporate Compliance

# Responding to Visits by Regulatory, Licensing or Accrediting Agencies

- Welcome our guests appropriately and contact the hospital operator at 2-3000.
- Give the operator the name of the visiting agency and the location.
- Do not leave the visiting agency representative until an appropriate ILH representative (Regulatory Compliance, Quality Management, Administration) arrives to receive the visiting agency representative.
- The appropriate ILH personnel will verify the identification and nature of the visit with the visiting agency representative.





# Compliance Program



Ensures that all governmental, LSU-HCSD, and hospital policies are followed

## **Your role:**

- adhere to all rules, regulations, compliance policies, and the HCSD Code of Conduct
- Conduct all affairs with highest ethical standards
- Report any suspected violations

# Definitions



- **Fraud:** when a provider/supplier *knowingly and willfully* deceives the Medicare program
- **Abuse** is practices of providers, physicians, or suppliers, which are inconsistent with accepted sound practices
- **Federal False Claims Act:** anyone who *knowingly* presents the government with a false claim is liable for penalties

# EMTALA



Federal law that protects patients from financial discrimination

- Every patient must receive a medical screening, to determine if an emergency exists
- Cannot assess financial status before providing treatment
- Hospitals must report any possible violations
- Violations can result in fines or exclusion from Medicare reimbursement

# Protected Health Information (PHI)



HIPAA is a federal law designed to keep patients' health information confidential

- PHI is any information that can lead to the identity of a patient
- Includes names, addresses, dates, numbers (social security or medical record), and any health-related information
- Can be written, verbal, non-verbal, electronic, disks, etc.

# Protecting Health Information



- Treat all PHI as if it were your own
- Do not discuss patients in public places (hallways, cafeteria, elevators, etc), anywhere outside the workplace, or in “social media”.
- Do not leave information or records in areas where others can see them.
- Access information only when authorized, when you have a legitimate “need to know”.
- Keep your computer and passwords secure.

# “When in doubt, report”



## **If you suspect any violations:**

1. Ask your manager or supervisor
2. Ask the nursing services supervisor
3. Ask the compliance officer:

Becky Reeves 225-505-8560

- Your call will be confidential
- There will be no retaliation against anyone for raising concerns.

# Quiz: True or False?



17. I'm not an LH employee; I won't have to talk with regulatory visitors

18. I don't have a password; it's ok for an employee to let me use theirs for computer data entry

19. I can discuss my patient in "social media", as long as I'm away from the hospital

# Answers



17. False. You can tell the visitor that you are not an employee, but they may still ask you questions about the hospital. You will then offer to find an employee to help them.
18. False. You can only use your own password for the hospital's information systems. It is never acceptable to use someone else's login or password.
19. False; PHI is to be kept confidential. Use of "social media" to discuss patients is considered a breach of privacy.





Please give your completed quiz sheet to your instructor



# Thank You

Interim LSU Public Hospital

Department of Professional Development, Practice Excellence, and  
Clinical Affiliations

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