



# General Orientation Module for Hospital Staff

# Welcome!

We are delighted to welcome you to Washington Adventist Hospital.

To ensure compliance with The Joint Commission (TJC) requirements, please thoroughly review the following information. Please direct any questions to Human Resources.

# Mission of Adventist Healthcare

- We demonstrate God's care by improving the health of people and communities through a ministry of physical, mental and spiritual healing.



# Values: R.I.S.E.S.

- **Respect:** We recognize the infinite worth of each individual and care for the whole person.
- **Integrity:** We are above reproach in all we do.
- **Service:** We provide compassionate and attentive care in a manner that inspires confidence.
- **Excellence:** We provide world class clinical outcomes in an environment that is safe for our patients and caregivers
- **Stewardship:** We take responsibility for the efficient and effective accomplishment of our mission.

# ID Badges and Parking

- ID badges must be visible and worn at all times while in the hospital. If parking on campus, staff must park in the designated employee lots. Failure to comply may result in denied access and the towing of your vehicle. Security staff is not authorized to make exceptions.



To obtain an ID badge form:  
Washington Adventist Hospital- Human Resources  
Lisner Building, 1st Floor  
301-891-5566

- Badges remain the property of WAH. Lost badges can be replaced for a fee. If you forget your ID badge, a temporary replacement must be obtained at the Security Office. Security Officers will not grant you access to any area of the hospital without a permanent or temporary ID badge.

# Policy on Professional Behavior

- It is expected that all hospital staff, patients, visitors, students, and contractors will be treated with respect.
- All hospital staff are required to maintain a working environment for everyone that is free of physical and verbal abuse, sexual harassment. As a result, physical and verbal abuse or sexual harassment of any member of the hospital staff, patients, students, visitors or anyone else on the hospital campus is prohibited.
- **Abusive behavior includes**, but is not limited to: attacks leveled at hospital employees or other medical staff members which are personal, irrelevant, or go beyond the bounds of professional comment.

# Policy on Professional Behavior

- **Sexual harassment** refers to unwelcome verbal or physical conduct of a sexual nature when submission to such conduct is made explicitly or implicitly a term or condition of an individual's employment or work retention or submission to our rejection of such conduct by an individual is used as the basis for an employment or work retention decision affecting that individual.
- **Sexual harassment** includes, but is not limited to: sexual advances; requests for sexual favors; the taking of any action that may affect any facet of an individual's employment (such as promotion, assignments, or compensation) on the basis of the individual's appearance; the display of sexually suggestive pictures or objects; foul or obscene language, jokes, or gestures; and any other offensive conduct or suggestive statements having a sexual connotation.
- **Physical and Verbal Abuse and Sexual Harassment** refer to conduct that has the purpose or effect of either unreasonably interfering with an individual's work performance or creating an intimidating, hostile or offensive working environment.

# Professional Dress Code

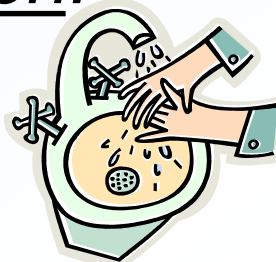
- It is expected that all hospital staff will exercise good judgment and dress appropriately for their positions. Hospital staff are expected to maintain cleanliness, good grooming and be dressed appropriately while on duty.
- By accepting a position at WAH, the hospital staff member agrees to uphold these standards. The guidelines have been established in order to promote safety, professionalism and to develop a sense of confidence in the quality of care we provide to patients.
- Supervisory personnel will ensure that appearance standards are understood and are enforced. In the event that appearance standards are not followed, the supervisor will direct the employee to clock out, leave his/her work area and return in appropriate attire. Failure to comply with personal appearance guidelines will result in disciplinary action.





# Infection Control

- **Hand Hygiene-** Is the single most effective way to prevent the spread of infection. Practice hand hygiene before and after patient care. ***Using gloves does not eliminate the need for rigorous hand hygiene.***
- **Hand washing-** with soap and water for 15 seconds is required when your hand are visibly soiled after caring for patients.
- ***Please review the attached AHC Hand Hygiene Policy and sign the Hand Hygiene attestation!***





# Fire Safety

- When a Fire Occurs:
  - **R-** Rescue any in immediate danger
  - **A-** Pull the alarm, call 4444
  - **C-** Confine, close all doors
  - **E-** Extinguish
- Steps for using a Fire Extinguisher:
  - **P-** Pull the Pin
  - **A-** Aim the extinguisher at the base of the fire
  - **S-** Squeeze the handle
  - **S-** Sweep

*Fire safety is everyone's responsibility*



# EMERGENCY CODE ALERTS

## Emergency Codes-Dial ext. 4444



**Code Blue “Adult”.....Cardiac Arrest – Adult  
> 35 kg or 12 years of age**



**Code Blue “Child” .....Cardiac Arrest – Child  
> 35 kg or between 1 to 12 years of age**



**Code Blue “Infant” .....Cardiac Arrest – Infant  
Birth to 1 year of age**



**Code Gold .....Bomb Threat**



**Code Gray .....Elopement**



**Code Green .....Combative Person**



**Code Orange .....Haz-Mat Spills or Release**



**Code Pink .....Infant or Child Abduction**



**Code Purple .....Security Only Response (call ext-5062)**



**Code Yellow .....Mass Casualty/ Disaster**



**Code Red .....Fire Emergency**



**Code White .....Tornado Warning**



**Code Stork .....Birth Outside of L&D**

**Code 4164 .....Hospital Alert**

**Code BAT .....Stroke Team**

**Code MET .....Medical Emergency Team**

**Rapid Response .....Rapid Response Team**

**Trauma .....Trauma Patient in the ED**

# Active Shooter Policy, AHC 1.25

- “Armed Person” or “Active Shooter” Policy
- Address violence prevention across AHC; assist patients, visitors and staff in being prepared to respond to potentially violent act.
- Three (3) key points to the policy:
  - Notify
  - Barricade
  - Remain Hidden

# If you see something, say something!

- Burnt out light
- Broken ceiling tile
- Suspicious person
- Spill on the floor



- **PLANT OPERATIONS: ext. 5648**
- **ENVIRONMENTAL SERVICES: ext. 5156**
- **SECURITY: ext. 5062**
- **SAFETY: ext. 5551**

# Cultural Diversity



## **Diversity** – A lesson in vocabulary & grammar

- *Diverse* – *Adjective* - composed of distinct or **unlike** elements or qualities
- *Diversity* – *Noun* - the condition of having or being composed of differing elements
- Diversity is Not... discarding personal beliefs, accepting everyone as “okay” or “accepted” at WAH
- Examples:
  - Baseball team, choir, school subjects, wardrobe, talent pool in an acute care hospital – good or bad?
  - Elements in a recipe for chocolate layer cake – good or bad?
  - Diverse monetary systems accepted in one economy – good or bad?

Diversity is only valuable when the included elements contribute positively to the environment in place

# Cultural Diversity

Why do we recognize & respect people who are diverse at WAH?

- Expanded ministry to patients & community
- Improved individual and organizational performance
- Enhanced customer service
- Improved organizational bottom line



# Organizational Integrity & HIPPA



# A Message From the President & CEO

- “Adventist HealthCare is committed to ethical business practices and compliance with applicable federal and state laws and regulations. As such, we have adopted an Organizational Integrity Program to help us meet our ethical and legal obligations. I am very excited about our Organizational Integrity Program and look forward to working with each of you on this critical area. Please join me in reaffirming Adventist HealthCare's ongoing commitment to organizational integrity.”



Terry Forde  
President and CEO

# What is Organizational Integrity?

## COMPLIANCE

- Obeying the law
- Following rules
- Meeting standards



## ETHICS

- Business ethics
- Doing the right thing
- Having a value system

- Adventist Healthcare's **Mission & Values** form the core of our Organizational Integrity Program!

# What is Organizational Integrity?

## **Our Mission:**

- We demonstrate God's care by improving the health of people and communities through a ministry of *physical, mental* and *spiritual healing*.

# What is Organizational Integrity?

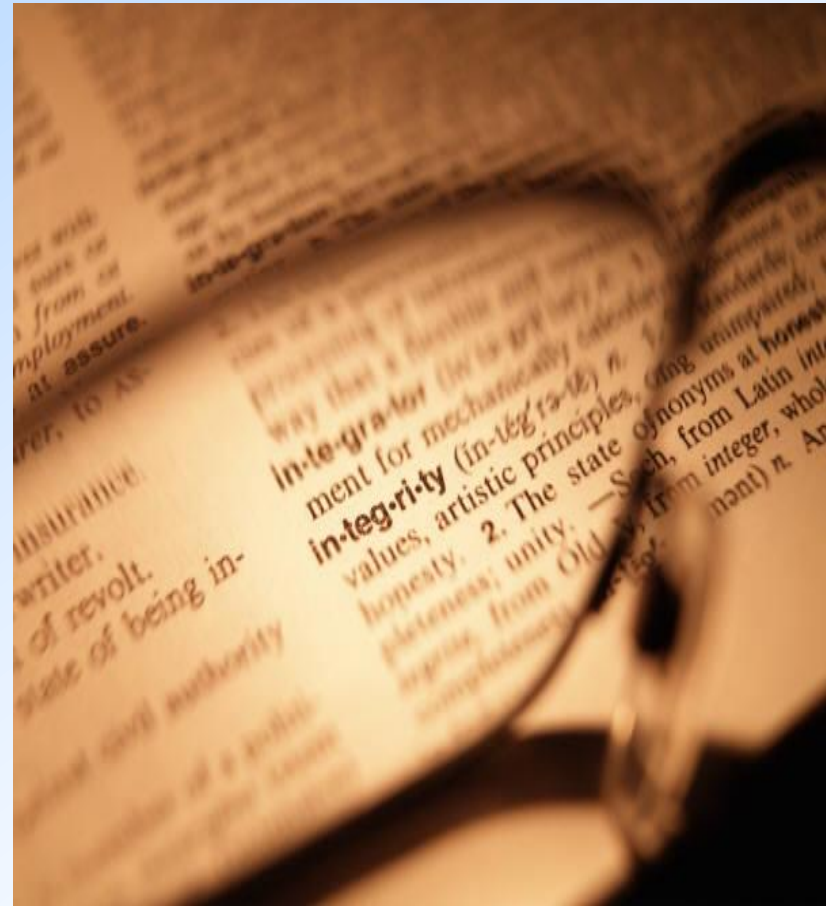
## Our Values:

- At Adventist HealthCare we use the RISES acronym to represent the **values** of our organization. We consider this an important component of our employee's responsibilities.
  - ✓ R = Respect
  - ✓ **I = Integrity**
  - ✓ S = Service
  - ✓ E = Excellence
  - ✓ S = Stewardship



# What is Organizational Integrity?

- *Integrity* is the cornerstone of our **mission & values**.
- Integrity means that we are **above reproach** in everything we do.
- It is not only *knowing the right thing* to do, but **doing the right thing**.



# Why is Organizational Integrity so Important?

- The federal government is focusing on fraud prevention, especially in healthcare institutions that receive Medicare/Medicaid payments. They are assessing large penalties for violations.



# Does Adventist Healthcare have Written Guidelines for Organizational Integrity?

- Yes! The Adventist HealthCare Code of Conduct, along with various other Integrity policies & procedures, form the basis of Adventist HealthCare's system-wide Organizational Integrity Program.
- They are available on the Adventist HealthCare Intranet at the [OIP Web Site](#).

# The Code of Conduct

- Adherence to the Code of Conduct is mandatory and a condition of your employment. By adhering to the Code of Conduct, you enable Adventist HealthCare to continue to fulfill its mission of delivering clinical and service excellence to our customers in a legal and ethical fashion.
- The Code of Conduct applies to everyone, including board members, officers, directors, managers, contractors, medical staff, as well as all employees.



# Reporting Possible Violations

## FIVE Ways To Report

- If you observe or suspect a problem it is your duty to report it.
- There are four ways to report a problem or concern.

# Reporting Possible Violations



## ➤ **METHOD 1:**

Most problems can be reported to your immediate Supervisor or a Human Resources representative.

# Reporting Possible Violations



➤ **METHOD 2:**

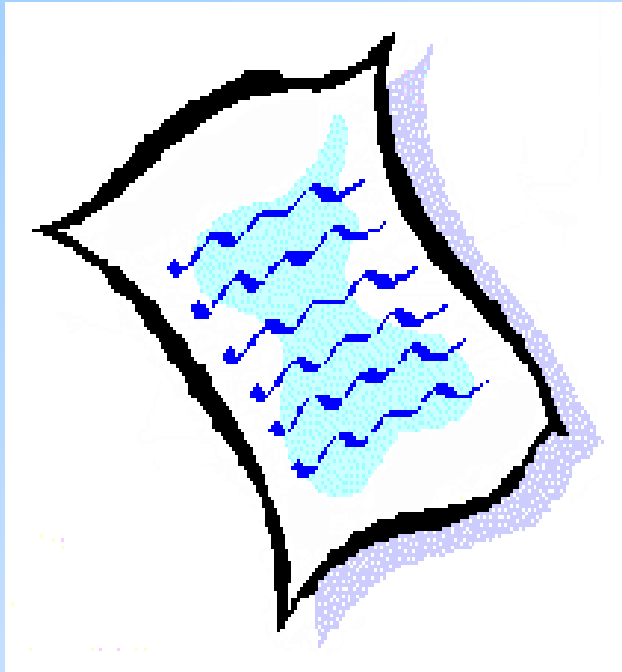
If you cannot or do not wish to go to your supervisor with this issue, then you can contact your **Local Integrity Officer, Christopher Briddell at 301-315-3371.**

# Reporting Possible Violations

- A listing of all AHC *Local Integrity Officers* is on AHC's **OIP Web Site**.
- Do you know who *YOUR* Local Integrity Officer is?



# Reporting Possible Violations



## ➤ **METHOD 3**

You may contact the Adventist HealthCare System Integrity Officer.

- The System Integrity Officer is Susan Glover, Senior Vice President, Chief Quality & Integrity Officer.

# Reporting Possible Violations



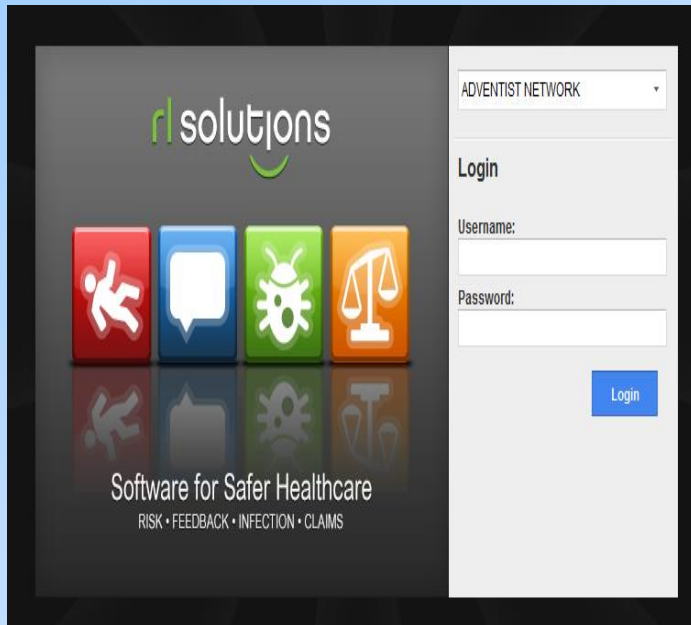
## ➤ **METHOD 4**

**A.** You may report your issue via the Integrity Hotline. The number is **(800) 814-1434**.

**B.** You may report electronically via the OIP Web Site

➤ You can remain anonymous if you wish.

# Reporting Possible Violations



## ➤ **METHOD 5:**

**A.** You may report your issue via RL Solutions, AHC's incident reporting system. The link to access RL Solutions is located on AHC's intranet.

- You can remain anonymous if you wish.

**B.** You may also report your issue via the OIP Web Site.

*HIPAA  
Privacy &  
Security*





# What is HIPPA?

- The **H**ealth **I**nsurance **P**ortability and **A**ccountability **A**ct of 1996 is a federal law that works to guarantee the *Privacy* and *Security* of a patient's *protected health information*.
- Employees should know how HIPAA applies to their work and their job functions.

# HIPPA Privacy

The **purpose** of the HIPAA Privacy Rule is to:

- Inform patients about how their health information is being used;
- Limit the release of **protected health information** (PHI);
- Give patients access to their own health records and the right to request changes or corrections; and
- Restrict the amount of protected health information that is used to the **minimum necessary**.

# HIPPA Security



The HIPAA Security Rule...

- Applies to protected health information in **electronic** format, or “ePHI”.
- Defines basic safeguards to protect ePHI from **unauthorized access, alteration, deletion, and transmission.**



# Using Patient Information

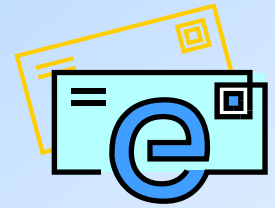
- Keeping patient information secure and private is the responsibility of each employee. **This means that employees may only look at patient information when it's necessary to do their job.**
- Employees who are not directly caring for a patient (or who are not processing that patient's billing information or other records) must NEVER look at a patient's medical record.
- Employees should keep in mind the following:
  - ✓ You cannot look up the medical records of your family, friends or co-workers;
  - ✓ You cannot look up your own medical records; and
  - ✓ AHC conducts monitoring to ensure that medical records are being appropriately accessed.

# Identity Theft Protection Program

- Employees should be “on the look-out” for signs that a patient’s identity has been stolen, or that someone is fraudulently using another person’s identity to receive healthcare services (or for other inappropriate purposes).
- **“Red Flags”** are suspicious activities, patterns, or “warning signs” that indicate an identity theft has occurred. Employees should be alert for the following red flags:
  - Address or name discrepancies;
  - Information presented by individual does not match information on file;
  - Suspicious documents presented;
  - Complaint from a patient or law enforcement;
  - Photo ID that does not match the patient;
  - Social security number is different than one used on a previous visit; and
  - Family or friends call the patient by a name different than what was provided by the patient at registration.
- Employee’s who believe identity theft has occurred should immediately contact their Supervisor and the Entity Chief Privacy Officer. Employees may also report identity theft by calling the toll-free **Integrity Hotline at 1-800-8141434**. In addition, employees may use the anonymous electronic reporting form located on the **OIP Web Site**.
- For more information, see the **Identity Theft Protection Handbook** on the OIP Web Site!



# E-mail Encryption



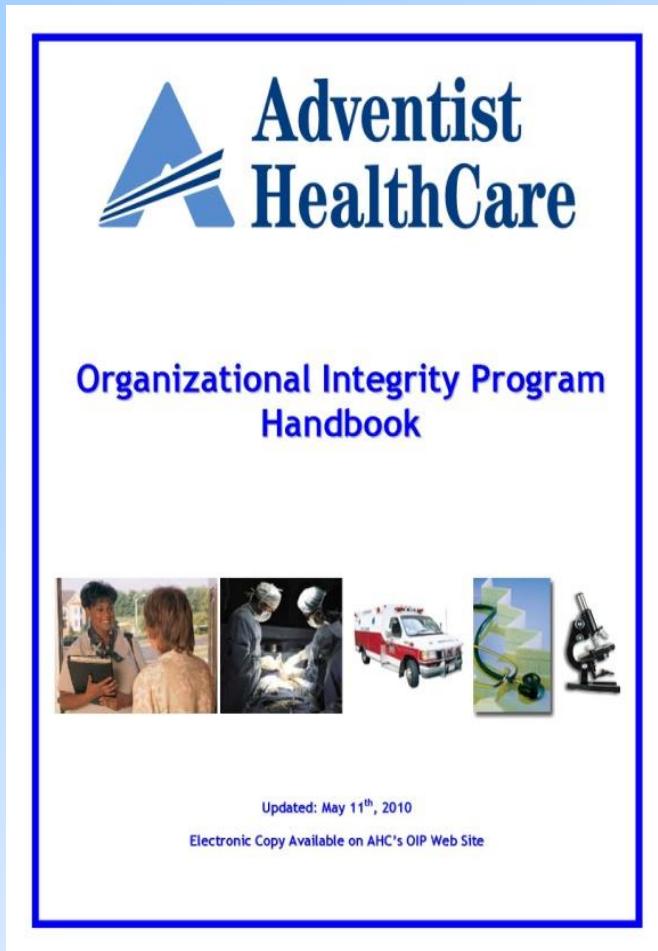
- In general, you should never send PHI or confidential information in an e-mail. If your job requires you to use e-mail to deliver PHI or confidential information, then the e-mail must be **encrypted**. Do NOT send PHI or confidential information in an e-mail UNLESS the e-mail is encrypted!
- Your Microsoft Outlook account has the capability to encrypt e-mails. To create an encrypted e-mail simply type **[secure]** anywhere in the subject line. The word “secure” must be enclosed in brackets. To repeat...to encrypt your e-mail, you **MUST** type the word “secure” in the subject line in brackets, for example...**[secure]**
- For more information, go to the OIP Intranet Site to watch an **e-mail encryption training video**, or download the e-mail encryption user manual.



# Reporting Possible Violations

- You can choose any of the five methods of reporting if you have any questions about HIPAA.
- You can also contact your Entity's **Local Integrity Officer, Christopher Briddell at 301-315-3371.**

# Integrity is all about...



- **Knowing the Right Thing to Do and Doing the Right Thing!**





# Questions?

**Please contact your supervisor.**

**Don't forget to turn in the acknowledgement forms  
& review questions to HR!**

**Click on 'take test' to complete the orientation and hand hygiene acknowledgements and take the quiz. Separate acknowledgements must be completed for Code of Ethics and Computer agreements (these are also assigned on MTS)**



## *Acknowledgement*

I \_\_\_\_\_ (*Name*) have read and reviewed the orientation information and all contents as it relates to orientation guidelines at Washington Adventist Hospital.

ID Badges

Sexual Harassment

Dress Code

Cultural Diversity

Infection Control and Hand Hygiene, Hand Hygiene Attestation

Emergency Code Alerts

Fire Safety

Active Shooter Policy AHC 1.25

HIPPA and Patient Privacy

Organizational Integrity Program

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Position: \_\_\_\_\_

Date: \_\_\_\_\_



### Hand Hygiene Compliance Attestation

\_\_\_\_\_, have read the *Hand Hygiene Compliance* policy. By signing below, I am stating that I understand the policy and procedure and will comply to ensure proper hand hygiene to prevent the transmission of bacteria, germs, and infections.

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Signature

Date