

Volunteer Training Manual

Patient Experience

Our goal at INTEGRIS Health is to provide a remarkable experience to our patients, customers, and visitors. One of the most effective ways to ensure a positive experience is to use a communication method called **AIDET**. AIDET stands for Acknowledgement, Introduce, Duration, Explanation, and Thank You. We also try to “manage up” our colleagues and the organization any time we have the opportunity. Let’s look at each component of AIDET more closely.

- **Acknowledgement** – Acknowledge the person’s presence early and respectfully greet them, making them feel welcomed. First step is to make eye contact, then smile. Read body language and adjust our interactions based on what you see (Are they scared? Do they look lost?, etc.). Be aware of your body language and tone of voice. Be mindful of how you are perceived by others. Be courteous and respectful at all times.
- **Introduce**—Share your name and role during introduction. Introduce yourself as a volunteer.
- Managing up means speaking highly of others. Introductions are terrific opportunities to “manage up” our staff, other volunteers, and the organization. For example, if you are introducing a patient to another volunteer you might say, “This is Tom, and he is one of the nicest people I know. He loves showing people around, so he will be happy to escort you to the surgery department.” Managing up helps plant the seed of expectations that the next team member is going to provide remarkable care.
- **Duration** – Tell patient, families, and customers the expected duration of the test, task, phone call hold time, or wait time. Be honest and give updates regarding delays.
- **Explanation** – Explain what you will be doing and why. Use common, non-technical language that anyone can understand.
- **Thank you** – Show appreciation at every opportunity you are able. Examples: Thank you for your patience (if people experience a delay). Thank you for coming in today (gift shop). Thank you for choosing INTEGRIS Health as your healthcare provider (everyone).

Presentation is another important influencer of the patient experience. Presentation encompasses how our environment looks and feels. Are our buildings clean, clutter-free, quiet, and welcoming? Everyone is responsible for ensuring a healing environment. Please help us keep our waiting rooms, common areas, parking lots and patient care areas clean and tidy. Pick up any trash. Contact housekeeping for spills and extensive cleaning needs.

HCAHPS - Hospital Consumer Assessment of Healthcare Providers and Systems (Patient Satisfaction Ratings)

What is HCAHPS?

- Sponsored by Centers for Medicare and Medicaid Services (CMS), “HCAHPS is a tool to be used for public reporting of major areas of hospital performance to support consumer choice.”
- For the CMS sample requirements, the survey will only include inpatients at general acute care hospitals (excludes pediatrics, psych, rehabilitation, hospice, and skilled nursing facility patients).
- The HCAHPS survey is sent to all acute inpatients. This will give more robust data when drilling down to the individual nursing unit level. A minimum of 300 (for large hospitals) and 100 (for small hospitals) returned surveys are needed for submission to CMS per year.

Why is HCAHPS important to INTEGRIS Health?

- HCAHPS are critical for continuous improvement of how care is delivered to our patients.
- HCAHPS survey scores are reported publicly on the Department of Health and Human Services website. As patients become more knowledgeable in researching hospitals, their selection of a hospital may be impacted by the results they see.

Our Values

iCare (Integrity, Compassion, Accountability, Respect and Excellence)—Our values not only reflect how we treat our patients; they also motivate how we relate to each other.

Values

- **Integrity.** We are honest and consistently adhere to the highest standards of ethical and professional behavior.
- **Compassion.** We are kind and suspend judgement to appreciate other's perspectives and situations.
- **Accountability.** We take ownership for our actions and outcomes.
- **Respect.** We embrace diversity and inclusion, and value others.
- **Excellence.** We seek to continuously improve, leading to exceptional outcomes.

Extraordinary Customer Service

- Each volunteer who directly or indirectly interacts with customers is responsible for customer service.
- Dissatisfied customers will degrade the organization by telling between 8-10 people about their bad experience.
- Even though customers are worried about their loved ones, they do notice when a volunteer is in a bad mood.
- Each volunteer influences whether a customer returns to the organization.
- The customer is the boss.
- Customers can hear you smile over the phone.
- How you perform your duties affects customer satisfaction.

INTEGRIS Health Continuous Improvement and the INTEGRIS Health Way *Pursuit of the IDEAL: Right Thing, Right Time, Right Person, and Right Way*

Continuous improvement strives to reduce waste and optimize the performance of processes, people, and infrastructures. Traditionally, the effort toward adding value was to work longer, harder, and faster to throw people, equipment, or technology at the problem. Continuous Improvement is a consistent, system-wide approach to quality improvement. **Observation is CRITICAL to Improvement!**

Observation is the only way to:

- See what is really happening
- See from the customer's perspective
- Expose hidden costs
- Quantify waste in the way the work is done
- Understand the root causes of problems
- Create a continuous improvement culture

Observation is a process of going to the work area, watching/studying people and processes, and documenting exactly how work is performed rather than how we think it is done or how it should be done.

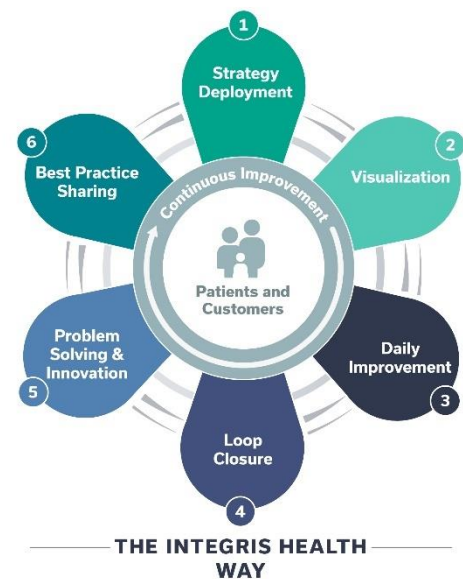
The Structure for Continuous Improvement

Visualization

How do we know we are successful? It can be seen in Huddle Boards, leading measures, lagging measures, indicators, 5S, process signals, process maps, and performance aggregator.

Daily Improvement

What are we doing today to be successful? Systems include idea boards, idea tracker, implemented idea target, idea celebration, and dedicated idea generation time.



Loop Closure – How do we create and sustain a culture of improvement? We close the loop through key Return to Green plans, process standard work, daily shift huddles, daily tiered escalation huddles, strategy review, worksite reviews and one-on-one coaching.

Improvement Culture

How do we create and sustain a culture of improvement? A culture of improvement can be created and sustained through courage, discipline, teamwork, commitment to sustain, high reliability, standard processes, and continuous learning.

As a caregiver whose work utilizes and reflects the processes we have in place at INTEGRIS Health, you are in a unique position to recognize opportunities for improvement. Your suggestions and ideas for making Continuous Improvement happen at INTEGRIS Health are valuable.

Your role is to:

- Relay your observations and ideas you have for making continuous improvement happen at INTEGRIS Health
- Make recommendations to improve our processes, patient care, and general service to our customers
- Indicate your willingness to participate in improvement activities and events.



The image shows a yellow 'Idea Sheet' form. At the top, it says 'Idea Sheet'. Below that, there are fields for 'Idea Submitter: _____ Dept: _____', 'Submission Date: _____', and 'Completed Date: _____'. There are two lines for 'Problem: _____' and two lines for 'Idea: _____'. At the bottom, there are checkboxes for 'Safety', 'Quality', 'Experience', 'Access', 'Stewardship', and 'Engaged Caregivers'. Below the checkboxes are fields for 'Approved: _____' and 'Assigned To: _____'.

5S WORKPLACE ORGANIZATION – What is 5S?

5S an acronym for an organizational program in which there are five steps, each beginning with the letter S. The goal of a 5S is to organize and clean all workplaces. A neat, clean organized facility has higher productivity, produces fewer errors and defects, meets schedules and deadlines better and provides a safer place to work

The 5S Acronym

- When you designate clearly or **SORT** the needed items as well and the UNNEEDED items, you eliminate waste by getting rid of unneeded items:
- By organizing and labeling the location for items that are needed in the area and ensure they are in the correct place, you afford easy and immediate access – we call that **STRAIGHTEN/Set in Order:**
- **SHINE** is the act of cleaning the workplace and equipment as well as readying for use. The key point is that maintaining cleanliness should be part of the daily work, not an occasional activity initiated when things get too messy.
- When you develop cleaning methods, you **STANDARDIZE** cleanliness or the work of sorting, straightening, and shining. Over time, the methodology leads to new habits.
- Review the workplace regularly by maintaining established procedures. The result is **SUSTAIN**.

Infection Control and Prevention is a group of guidelines used to stop the spread of infection. Stopping the spread of germs and preventing the growth of new infections is the duty of all INTEGRIS Health caregivers.

Important Terms:

- Airborne Infection Isolation Room (AIIR)—A private room set up for negative air pressure that is used to isolate patients with airborne diseases.
- Aseptic technique—Method of doing something that reduces risk of infection; may be called "sterile" technique in certain situations.
- Hand hygiene—Cleaning your hands with soap and water or with alcohol-based rubs to prevent the spread of germs or bacteria.
- Immune system—A system of cells, tissues, and organs that help the body fight infections.
- Isolation—Precautions to keep patients separated when they have spreadable infections.
- Safety Precautions—Steps created to protect healthcare workers from bacteria
- Transmission—The spreading of something from one person or object to another.

Infection Control Programs

An infection control program is made of policies and procedures to help decrease infections. The Infection Control Team teaches caregivers, patients, and visitors about the risks of infections. Your role in the infection control program is to stay educated about infections, and to follow infection policy and procedures.

Preventing the Spread of Infection

Transmission Methods

There are three infection transmission methods: **Contact, Droplet and Airborne.**

Transmission-Based Precautions are steps to keep everyone safe while working. They help stop the spread of germs from person to person. The precautions you use for a patient will be based on the method of transmission (how the germs travel). Germs travel by direct contact (skin to skin) or indirect contact (touching patient items). Droplets are released into the air when a person coughs, sneezes, or talks. They travel a short distance, then fall on surfaces. People breathe them in (if close) or touch the surfaces. Tiny particles are released into the air by coughing, sneezing, or talking. They travel in the air for long distances and can be inhaled by other people.

Infection Control Program

Using infection safety precautions is a part of your role in the Infection Control Program. Think about the activities you do in your job and ask yourself these questions: Are you at risk for exposure to germs? How many times a day do you touch a doorknob, a phone, or a computer? How many times a day do you wash your hands or use Alcohol-Based Hand Rubs? If one person forgets to use a precaution such as using hand hygiene, it could affect many people. Germs could pass to others from touching a dirty doorknob.

Contact Precautions: Wear the needed PPE when entering the isolation room. If transport is needed, disinfect any item the patient touches (e.g., wheelchair). Use equipment that can be thrown away or assigned to the patient. Clean and disinfect the room and all equipment (e.g., light switches, monitors, bedrails).

Droplet Precautions: Have the patient wear a mask in the room. Wear a mask and other needed PPE for your job when entering the isolation room. If transport is needed, have the patient wear a mask, and disinfect any item they touch.

Airborne Precautions: Have the patient wear a mask in the Airborne Infection Isolation Room (AIIR), and keep the door closed. Put on an N95 or higher-level respirator (specialized masks) before entering the room. If transport is needed, have the patient wear a surgical mask. Any caregivers who are at high risk for the infection should not enter the room.

Precautions posters should be posted outside the patient room, with the type of precautions and instructions ***Per policy, volunteers do not enter isolation rooms.***

Standard Precautions

The Centers for Disease Control and Prevention (CDC) have created a set of guidelines called Standard Precautions. Standard Precautions are the minimum infection prevention practices that apply to all patient care, regardless of suspected or confirmed infection status of the patient, in any setting where health care is delivered. Standard Precautions include hand hygiene.

Hand Hygiene

Hand hygiene is the best way to prevent the spread of infection, germs, and pathogens. Follow these simple steps when washing your hands with soap and water:

- Wet your hands with water
- Wash hands with soap for 20 seconds, rubbing hands forcefully to build up a lather, paying attention to all areas of your hands and fingers
- Rinse hands and fingers off with clean water
- Dry hands off completely with a clean towel
- Use the towel to turn off the water

Always wash your hands with soap and water:

- When clearly soiled
- Before eating
- After using the restroom
- After contact with a patient with a positive diagnosis or suspected illness
- After contact with blood or Other Potentially Infectious Materials (OPIM)

The CDC currently recommends Alcohol-Based Hand Rubs (ABHR) for routine hand hygiene. Follow these steps when using ABHR:

- Put the alcohol rub in your hands
- Rub your hands together, covering all areas of your hands and fingers until they feel dry.

When using an alcohol rub, use enough to wet all surfaces of the hands thoroughly for at least 20 seconds. Alcohol-based rubs should contain at least 60% alcohol.

Perform hand hygiene with Alcohol Based hand Rub (ABHR) immediately before:

- Direct contact with a patient and the patient's areas
- Eating, or touching your face

Perform hand hygiene with ABHR immediately after:

- Contact with a patient's blood, body fluids, mucous membranes (eyes, nose, or mouth), or open skin areas
- Contact with objects, including devices in patient areas
- Removing your gloves
- Arriving to work
- Using the restroom
- Shaking hands with someone

Personal Protective Equipment

INTEGRIS Health has a Personal Protective Equipment (PPE) program in place, along with policies and procedures to help you pick the correct PPE to use in your job. The most important part of hand hygiene is how you wash your hands whether you use soap and water or ABHR. There should be multiple places available for caregivers to clean their hands.

Wear gloves when you might have contact with: Blood or OPIM, or dirty equipment used by the patient. Gowns protect the skin on your arms and legs and prevent your clothes from being exposed to blood and OPIM. Use protective eyewear, a mask, or a face shield to cover the mucous membranes or your eyes, nose, mouth, and any open areas on your face. This protects you from splashes or sprays of blood or body. Use an N95 respirator when you enter the room of a person with a suspected or confirmed airborne disease.

If your PPE becomes torn or damaged while wearing it: Remove the PPE and place it in the correct trash container. Wash the affected area with soap and water. Replace the PPE. Tell your leader right away if you think you might have been exposed.

Removing PPE: Before you leave the work area, remove all PPE, even if you think the PPE is not dirty.

All PPE is considered not clean on the outside. Do not touch the outside areas to remove them. After carefully removing the used PPE, place it in the correct container for trash or cleaning. Perform hand hygiene after PPE removal.

Cleaning

Routine cleaning with hospital approved disinfectant is recommended for work surfaces and patient or resident care areas. Examples are light switches, doorknobs, bed rails, IV poles, remote controls, equipment on walls, desks, countertops, and keyboards. Always wash your hands after you clean.

Disinfecting and sterilizing are processes to clean medical equipment. Disinfecting involves soaking and scrubbing items in an approved solution to destroy viruses and bacteria. Sterilizing destroys all viruses and spores that are tiny bacteria. Sterilization requires specific training and education.

Handle Laundry and Cloth Materials Safely

When working with dirty cloth materials: Wear gloves. Do not rinse or sort items in patient or resident care areas. Bag or close items in containers that will not leak. Label containers following OSHA's standard. Do not touch the eyes, mouth, or any part of the body where a scratch or abrasion has broken the skin. Do not touch or eat food until hands have been thoroughly washed. Perform hand hygiene after contact with dirty linen. Handle laundry and cloth materials following your facility's policy.

Respiratory Hygiene/Cough Etiquette

Respiratory hygiene and cough etiquette is a standard used for staff, patients, and visitors that helps prevent the spread of bacteria and viruses. Covering your nose and mouth with a tissue that you can throw away after you sneeze, cough, wipe or blow your nose can decrease the spread of bacteria. If you do not have a tissue, cough or sneeze into your elbow, not your hands. Anyone with a virus or illness should wear a mask. Always wash your hands after coughing or sneezing!

Healthcare Associated Infections

Sometimes germs are transmitted to a patient even if an infection control plan is in place.

Infections that develop on or after the third day of a hospital stay are HAIs. HAIs are most often spread by contact transmission, meaning the germs are passed to a patient through touch. The germs could come from visitors, caregivers, or another patient. Continue to do your part in preventing HAIs. All caregivers can:

- Wear PPE
- Handle waste correctly
- Stay home when sick
- Use hand hygiene often
- Keep patient areas clean

Patient and Visitor Information

As non-clinical caregiver, you may at some point, become a patient or a visitor. The information below will help you know how to help stop HAIs.

Patients should: Use hand hygiene often. Put personal items in a drawer or closet. Ask for a clean pillowcase or blanket if it falls on the floor. Remove slippers or socks before putting their feet on the bed.

Caregivers and visitors should: use hand hygiene before they enter and leave the room. Use the public restroom, not the one in the patient's room. Avoid sitting on the patient's bed or touching equipment. Stay home if they are sick.

In the health care setting, you may come in contact with blood and body fluids from patients. Some pathogens (bacteria and viruses) that cause disease may be in these fluids. You may have a higher risk of getting an infection. This module will review Bloodborne Pathogens found in the blood and body fluids and how they spread.

Bloodborne Pathogens

Bloodborne pathogens are viruses or bacteria that are in human blood. These pathogens may also be in other fluids in your body. Those other fluids are called Other Potentially Infectious Materials (OPIM). OPIM includes saliva from mouth; fluid from penis or vagina; fluid from lungs, brain, stomach, head, or spine; fluid from the uterus when a woman is pregnant; any fluid from a patient that has blood in it; or any other fluid from a patient. It's not always clear if a body fluid also has blood in it. Treat all body fluids as if they could be unsafe.

How do pathogens spread in the workplace?

Pathogens can spread through infected blood or OPIM if you get stuck by a needle or other sharp object. Healthy, closed skin is the best shield against pathogens. A cut or rash on the body puts you at risk.

Most Common Pathogens Found in the Blood

The three most common viruses found in the blood are the following: Hepatitis B virus, Hepatitis C and Human immunodeficiency virus (HIV). There are many more pathogens that may be in the blood and OPIM.

Risks of Exposure

When a worker has contact with blood, pathogens are not always spread. The Occupational Safety and Health Administration (OSHA) Bloodborne Pathogens Standard helps INTEGRIS Health create our exposure control plan. This plan is for all caregivers and outlines possible exposures in each job and what type of personal protective equipment (PPE) you need. Here are some parts of the exposure control plan:

Some best practices to prevent exposure include:

Washing your hands or using alcohol rubs before and after touching surfaces, doors, and items of the people you encounter.

Keeping food and drinks out of work areas.

Wearing appropriate Personal Protective Equipment (PPE). PPE includes masks, face shields, gowns, gloves, eyewear, shoe covers, and other items worn to protect a caregiver.

If you are exposed to blood or OPIM, remember these steps of WIN:

- **Wash** the area right away with soap and water. If mucous membranes are affected, flush well with water. Flush eyes with clean water, saline, or sterile liquid.
- **Identify** the source person of the exposure.
- **Notify** your supervisor. Quick action can decrease the risk of infection after exposure.

Every day as a volunteer you will come into contact with many different types of germs. Many of these germs are normal skin flora which your body needs to fight off infection. However, there are germs present in the healthcare area that can cause illness. ***Per policy, volunteers do not enter isolations rooms.

Electrical Safety

We are so used to using electricity, we can sometimes forget how dangerous it can be. To help protect yourself and patients, place electrical equipment **away from patients**, keep **floors dry**, especially in patient areas. Do not touch patients and electrical equipment **at the same time**. Only use extension cords approved by Clinical Engineering, Facilities, or IT.

Do not use electrical equipment if:

- Liquid has spilled on the equipment
- The floor is wet, and you are standing on a wet area
- Your hands are wet
- It is near flammable gases, vapors, or liquid to which it may react

Breaker boxes should be accessible at all times. DO NOT BLOCK electrical panels and breaker boxes

Keep yourself and your patients safe around electrical equipment. Before using any electrical equipment, learn how to use it properly, and check it for any damage. If it has a locked tag on it, do not use it and do not remove the tag. Report broken or damaged equipment right away. INTEGRIS Health caregivers report hazards by calling Integrated Support Services at (405) 951-2255 or according to your facility's protocol. Sequester all supplies/medical equipment involved in an event for the appropriate personnel to review.

Most equipment in the healthcare setting is electric. This means there is a risk of electrical shock from medical equipment. Electrical shock can cause burns, muscle spasms, respiratory arrest or even death.

To prevent electrical accidents in your facility. Remove and report electrical equipment from service if it malfunctions, shows signs of damage, shows signs of unusual heating, produces a burning smell when used, or shocks staff or a patient. Use electrical equipment safely. Learn how to use equipment before using it. Do not use damaged equipment. Do not use equipment on which liquid has been spilled. Do not operate electrical equipment with wet hands or when standing in water. Do not stack anything on or behind electrical equipment. Turn electrical equipment off before plugging in or unplugging. Maintain, test, and inspect equipment frequently. All medical equipment should be

inspected and tested on a regular schedule. Use cords and outlets properly. Do not use outlets or cords with exposed wiring. Report damaged outlets or cords. A hot outlet can be an indication of unsafe wiring. Unplug cords from the outlet and report the hazard. Do not bend, stretch for kink power cords. Do not jerk cords from outlets or pull at the plug. Do not staple, tack, or nail power cords to wall or floors. Use tape if necessary. Do not rest equipment on power cords. Use only power cords with three-prong plugs. Never use adapters, two-prong plugs, or broken three-prong plugs.

Think Safety - Always Check

- Frayed cords
- Cracked hoses
- Grounded plugs
- Cracked cases
- Safety sticker for current inspection

Fire Safety

When you hear the fire alarm in your facility, you may not know if it is a drill or real fire emergency, but it is important to respond as you were trained. All fires, no matter how minor, should result in immediate action. Knowing how to respond to a fire is critical for all caregivers. It is very likely that according to codes and regulations, you have a fire extinguisher in the area where you work. Would you know how to use a fire extinguisher if a fire started in your area?

In the event of a fire, be sure to pull the alert station **in the same area as the fire** so the Fire Department will respond to the correct area. Prepare to evacuate individuals to an unaffected smoke/fire compartment. Smoke compartments in a building are separated by fire doors that automatically close upon activation of the alarm. The purpose of having smoke compartments is to facilitate the horizontal relocation of the occupants to an area separated from the fire area by smoke barriers, allowing time and space for extinguishing the fire without fully evacuating the building. To identify your building's smoke compartments, call your facility director or building manager. **Fire extinguishers** fight fires by removing sides of the fire triangle. They do this by releasing materials that **cool the burning fuel** and **remove oxygen from the fire**. These materials include water, carbon dioxide, and dry chemical powder.

Which Extinguisher to Use

Various kinds of fire extinguisher materials fight different types of fires. Each fire extinguisher has a label to show which types of fires it can extinguish. A fire extinguisher with **ABC** on it can extinguish any of the 3 types of fires:

A: Extinguishes fires involving ordinary combustibles like wood, paper, fabric, rubber, and most plastics

B: Extinguishes flammable liquids and gases like gasoline, oils, paint and compressed anesthetic gases

C: Extinguishes fires involving electrical equipment

R.A.C.E. to help you remember what to do in the event of a fire:

R - Remove/Rescue: Rescue all patients who are near the fire.

A - Alarm/Alert: Pull the alarm, get help, or call the Fire Department.

C - Confine/Contain: Close all doors to the room where the fire is burning.

E - Extinguish/Evacuate: If you are trained and are sure it is safe to do so, try to put out the fire with a fire extinguisher. Otherwise, evacuate to your designated meeting location.

P.A.S.S. (Pull, Aim, Squeeze, Sweep) to help you remember how to use a fire extinguisher:

P – Pull the pin

A – Aim at the base of the fire

S – Squeeze the handle

S – Sweep side to side

INTEGRIS Health must:

- Place fire extinguishers in appropriate locations
- Provide appropriate types of fire extinguishers
- Train staff on how to select and use fire extinguishers

You must:

- Know where to find the nearest fire extinguisher
- Know which types of fire extinguishers are available in your facility
- Follow guidelines for choosing a fire extinguisher for a particular type of fire
- Know how to use a fire extinguisher

When responding to a fire emergency:

Do:

- **Tell patients and visitors that your facility is responding to the emergency.**
- **Remove materials such as oxygen, flammable liquids, or other gases, if possible.**
- **Shut off or unplug unnecessary electrical equipment.**

Do NOT:

- **Pick up a burning item and run with it to remove it from the area quickly.**
- **Attempt to put out a fire that is too large or out of control.**
- **Endanger your safety.**

INTEGRIS Health Tobacco Free Policy Highlight

Prevention is the best defense against fire. To help prevent fires related to the common cause of smoking, follow the INTEGRIS Health Tobacco Free policy (SYS-ADM-111). The use of all tobacco products and/or nicotine delivery devices are **prohibited within and on all INTEGRIS Health owned properties**. Cigarettes, cigars, pipes, electronic cigarettes (e-cigarettes), and smokeless tobacco and nicotine products such as snuff, chewing tobacco, herbal or other dissolvable products are prohibited. Smoking near any of these is a serious safety threat:

- Combustible supplies
- Flammable liquids
- Gases or oxygen

To help prevent fires related to the common cause of electrical malfunction: To help prevent fires related to the common cause of equipment misuse, do not use any piece of equipment that you have not been trained to use. Remove damaged or faulty equipment from service. Submit malfunctioning equipment for repair. Inspect all equipment prior to use.

Chemical Safety

Some chemicals used in your facility may cause physical hazards and health hazards. These include cleaning products, disinfectants, and anesthetic gases. Chemicals can enter your body through your eyes, nose, skin, or mouth. You can protect yourself by using personal protective equipment including gloves, protective clothes, respirators, and goggles. **Every chemical in your facility that may be dangerous must have a label on the container or packaging and a Safety Data Sheet (SDS) available to employees. Labels and safety data sheets explain the dangers of chemicals, how to protect yourself when using them, and what to do if something goes wrong while using them. To keep yourself and others safe when working with chemicals, remember to read the label, review the SDS, and wear the correct PPE.**

MRI Safety

There is a large magnet in an MRI machine. This magnet is always ON. Like any magnet, it attracts certain metals, like keys, coins, and scissors. If any of these metals get too close to the machine, they can fly across the room toward the machine at a very high speed. You or a patient could get hurt. Be sure to learn more about the zones if you need to be anywhere near where MRIs are performed. To keep you, patients, and other caregivers safe, access to the MRI suite is

restricted. If you need to enter the MRI exam area, you will need to be screened first. An important part of the screening is to make sure you remove glasses, **hearing aids, hairpins, piercings, jewelry, items in pockets**, pens, paper clips, safety pins, keys or coins, **belt buckles, and any metal closures on clothing**.

Radiation Safety

Radiation can save lives. It can also be dangerous to both patients and caregivers. It is important that you know how to protect yourself against these dangers. If you are not trained to care for patients who are getting radiation treatment, do NOT enter patient rooms marked with a radiation warning sign. The best way to limit your exposure to radiation is Time, Distance and Shielding.

Back Safety

Preventing Musculoskeletal Disorders:

To help prevent back injuries caused by lifting and moving objects:

- Hold proper body alignment to object being lifted
- Lift with the knees and straight back
- Keep the item close to your body
- Take breaks and stretch
- Wear shoes that will not slip

Avoiding Slips, Trips and Falls

High instances of accidents: Health care workers have the highest rate of nonfatal slips, trips, and falls. Slips happen when there is not enough traction between your feet and the floor. Causes of slips include slippery floors, and items on floors like water, oil, and sand. Trips happen when the sole of your foot doesn't make full contact with the floor. Causes of trips include clutter, cracks or worn flooring, frayed or lifted mats or rugs, and cords. Falls can be caused by slippery, cluttered or worn walking surfaces. Not using equipment like ladders and scaffolding the right way can also lead to falls. When conditions are hazardous (icy sidewalks, wet floors) avoid slipping and falling by walking like a duck:

- Keep your feet flat and slightly spread apart
- Point your toes slightly outward
- Take slow short steps; keep you center of balance under you
- Make wide turns at corners
- Keep your arms at your sides. This gives additional balance. It also keeps your arms available for support if you fall.

Latex and Latex Reactions

Latex allergies can make life hard for some people. Some need to change their food choices, activities, and even their work. In some cases, a latex allergy can be life threatening.

Who is at Risk?

Instances of latex allergy in the general population are low, but healthcare workers still face risks due to the daily exposures at work. The more you are exposed to latex, the more sensitive you become, and the more strongly your immune system responds.

Causes of Latex Sensitivity

Parenteral exposure- when latex enters the blood through any way besides your mouth.

Swallowing food - prepared by someone wearing latex gloves.

Inhalation- breathing in latex dust from items like latex balloons.

Direct contact - when latex touches the skin or mucous membranes.

The best way to prevent any type of latex allergy reaction is to avoid exposure! Healthcare worker with a latex sensitivity can: inform their leader, use non-latex gloves only, avoid areas where coworkers use latex, wear a medical alert bracelet, and carry an injectable medicine (epinephrine), if prescribed.

Emergency Preparedness

A disaster can come in many forms. The best way to respond to a disaster is to have a written plan. This plan is often called the **Emergency Preparedness Plan**. **Having a plan allows everyone to prepare and know their role**. According to CMS, the purpose of the Emergency Plan (EP) is to ensure adequate planning for both natural and manmade disasters, and coordination with federal, state, tribal, regional, and local emergency preparedness systems. **The plan will align responses both inside and outside the facility.**

Emergency Codes

Code Yellow – External Disaster

Notification has been received of a disaster in the community with probable casualties to be received. All departments are alerted to be prepared to implement this plan. During this code volunteers are asked to continue duties unless otherwise directed. Volunteers on duty that day could be redirected to help with other areas.

Code White - Internal Disaster

Notification has been received of an internal disaster. All departments are alerted to be prepared to implement plan. Examples of internal disasters are the following: water loss, electrical loss, floods, steam loss, loss of heating or cooling. During this code volunteers are asked to continue duties unless otherwise directed. If you see a potential problem with any of the previous listed items, please report those immediately.

Code Orange - Haz-Mat Incident

A chemical disaster has happened outside of the hospital. The emergency department has been notified that they will be receiving a contaminated patient. During this code volunteers are asked to continue duties unless otherwise directed. If you are an emergency room volunteer, you may be asked to leave the department for your safety. Volunteers on duty that day could be redirected to help with other areas.

Code Blue – Announcement followed by location of arrest

There is a cardiac or respiratory arrest. Please refrain from using the elevators for 5 minutes following the code. Please continue normal duties during this time unless otherwise directed.

Code 'C' – Communication Disruption

A communication disruption has occurred where phone or information services have been disrupted. This should not affect the volunteers the majority of the time, but it will affect staff. During this code, volunteers are asked to continue duties unless otherwise directed.

Dr. 'A'

Any available physician to location paged overhead

Code 10 – "Room or Location" Disruptive patient or visitor

Code Black - Severe Weather

Phase 1 is called when a watch for severe weather or high wind is a risk in the area. During phase 1 volunteers can continue their normal duties but are welcome to leave if they are more comfortable at home. When **phase 2** is called, there is a tornado or high winds within 10 miles of the facility moving this way. Patients and visitors will need to move away from exterior walls and windows. If any volunteers are still in the building during this time, they are asked to move to the interior of the building. As a reminder, the hospital is not a designated tornado shelter.

Code Pink

Missing infant/child alert. **Phase 1** – During this code, volunteers should watch for persons with suspicious packages, those in a hurry, or wearing bulky clothing. Staff should stand by all doors, especially on the first floors. They will ask

folks to hold tight until the code is called all clear. Phase 2 – Confirmed missing or unaccounted for child. Continue looking for suspicious persons, record anything unusual and report it to Security.

Code Red

Fire has been spotted or an alarm has gone off in a location. If a code is called in the area in which a volunteer is serving, please leave that area for your safety. If the code is called and is not in your area, please continue normal duties but avoid that area unless otherwise directed.

Structure

Healthcare providers are required to have an emergency preparedness plan by the **Centers for Medicare & Medicaid Services (CMS)**. Emergency preparedness programs serve as the basis of **emergency preparedness plans**. The requirements vary by type of provider. These requirements are found in the **State Operations Manual (SOM)**. The emergency preparedness details are found in Appendix Z of the SOM.

When developing an emergency plan, four essential elements are required.

Risk Assessment and Planning: The risk assessment should be based on an all-hazards approach, with a focus on a facility's location, capacities (bed).

Communication Plan: INTEGRIS Health has developed an emergency preparedness communication plan that is reviewed and updated every two years.

Policies and Procedures: INTEGRIS Health has developed and implemented policies and procedures based on emergency and communication plans.

Hazards: The plan is based on hazards. Hazards are included based on your location and the type of hazard likely to occur there. A hazard assessment identifies the risks.

Training and Testing: Training in the emergency preparedness policies and procedures are conducted for all new caregivers at orientation.

Emerging Infectious Diseases (EIDs)

EIDs can come in many forms. It could be a new illness such as COVID-19 or an illness caused by a known risk. The key is that the illness can affect the operations or continuity of care. Facilities should ensure their emergency preparedness programs are aligned with their state and local emergency plans/pandemic plans. Planning should include a process to evaluate the facility's needs based on the features of an EID that includes planning for: Increased need for PPE, transmission prevention through screening of individuals, and possible testing; admissions to inpatient facilities or transfers to long term care or home health care; facility adjustments such as barriers, an increased need for isolation rooms, social distancing, and interior traffic controls.

Caregiver Responsibilities

Disasters can affect daily work for healthcare providers. More people may be needed, and some services may not be available. **You may be given a different job or role during a disaster to get the work done.** Review your emergency preparedness plan or talk with your leader to learn what role you may fill.

To fulfill your role during a disaster, you should be trained. As part of the CMS requirement, INTEGRIS Health will conduct an exercise or drill. These drills help train caregivers in how to respond. Your leader may also plan for role-specific training to occur before or during a disaster. A written plan alone is not enough to ensure an effective response in a disaster situation. INTEGRIS Health caregivers should:

- **Know the INTEGRIS Health Emergency Code names and meanings** found on the back of caregiver identification badges and your department's response plan for each Code
- **Know the Disaster Staging Locations for your facility**, as designated in the Attachment to the Emergency Operations Plan

Terrorism/Bomb Threats

Bomb Threats

Most suspects who call in bomb threats are just trying to disrupt the organization. Most bomb threats are false, but the potential always exist for the threat to be real; therefore, action is required. INTEGRIS Health has three options when dealing with a bomb threat:

- monitor the situation
- evacuate
- search and evacuate, if warranted

If you get a threatening call – If available, start filling out the Bomb Threat Checklist. This form is located at every workstation. Gather as much information as possible and keep the person on the phone. Have a co-worker call security immediately and report a threatening phone call in progress.

If a search is required – The best search techniques require participation of caregivers who are very familiar with the area of the workstation. Note: NO CAREGIVER will be forced to search. The search is voluntary! Searchers should look for anything that appears out of the ordinary and suspicious. A bomb cannot be described! It can be packaged, disguised, or concealed in any type of container. Do not touch or handle objects that could contain a device. Searchers should ensure pagers, cell phones, and any other electronic devices are turned OFF! Searchers should never touch, handle, or disrupt any suspicious device. If a suspicious object is located, the searcher should contact security immediately. Again, searchers should NEVER touch, handle, or disrupt any suspicious device.

If a device is found – In the event a device is found or the specific information in the threat is confirmed, caregivers will be notified and given instructions.

Patient Rights and Responsibilities

When you know and respect your patients' rights and cultures, you focus on them as individuals. It opens discussion and lets patients have a choice in their care. Patients have the right to know their diagnosis, prognosis, and treatment options. Patients have the right to participate in decisions about their care, set the course of their treatment, and refuse treatment. They have the right to expect respectful care, which means valuing the patient's needs, desires, feelings, and ideas. Hospitals must respect the patient's cultural and personal values, beliefs, and preferences. They must also respect their right to privacy, their right to effective communication, and their right to pain management.

Patients have the right to:

- Exercise one's rights
- Participate in one's care
- Have a family member or doctor notified
- Privacy
- Confidentiality of patient records
- Receive visitors
- Receive care in a safe setting
- Complain and file a grievance.

During times of emergencies and specific threats (like COVID-19), visitation policies may change. Check with your leader for updates on INTEGRIS Health visitation policies during emergencies. Patients who know their rights feel safe and in control of their health choices. This increases patient satisfaction.

Abuse and Neglect

Recognizing Abuse

There are four types of abuse that caregivers have opportunities to identify: domestic abuse, child abuse, elder abuse, and human trafficking.

- Signs of domestic abuse: Discomfort when questioned, presence of a controlling partner, many injuries
- Signs of child abuse: Physical injuries including fractures, bruises and burns, Injuries to multiple body sites
- Signs of elder abuse: Dehydration, malnutrition, pressure injuries, Poor personal hygiene
- Signs of human trafficking: Multiple injuries in different stages of healing, sign of genital injury

Identify Victims of Human Trafficking

Many victims of human trafficking have access to health care services but rarely self-identify to medical professionals. Caregivers who notice red flags present in a patient can engage the patient in a safe, victim-centered conversation about

human trafficking. If you interact with a patient whom you suspect is a victim of human trafficking, contact the NHTRC (National Human Trafficking Resource Center) 1-888-373-7888 confidential, toll free, 24/7 and contact your leader.

When you suspect child abuse, what is your duty as a caregiver?

Caregivers have a duty to report suspected child abuse in two different situations:

Situation 1--When caregivers notice certain signs and symptoms in pediatric patients under their direct care and suspect abuse or neglect.

Situation 2—When an adult who is legally responsible for the care of a child suspects abuse or neglect and talks about it to a health care provider.

When you see **signs of abuse or neglect** report it to your leader **immediately**.

Cultural Competency

Cultural competency is the ability to provide care to patients with diverse values, beliefs, and behaviors, including the tailoring of health care delivery to meet the patients' social, cultural, and linguistic needs. A culturally competent health care system is one that:

- Acknowledges the importance of culture; incorporates the assessment of cross-cultural relations
- Recognizes the potential impact of cultural differences
- Expands cultural knowledge and adapts to meet culturally unique needs.

Ultimately, cultural competency is recognized as an essential means of reducing racial and ethnic disparities in health care.

Understanding Others

Cultural competence is the ability to provide care to members of different cultural groups. Patients come from many backgrounds. Giving care that is sensitive to culture builds trust. Non-clinical caregivers often interact with patients in the course of job duties. It is important for non-clinical caregivers to respect patients and other caregivers by learning about different cultures, values, worldviews, time orientation, and social structure. These affect how individuals see healthcare and how they practice healthy habits. Some elements of culture are:

Values

Worldview

Time orientation

Social structure

Communication – oral and written

Diet and nutrition

Asking questions about others' preferences will help you to interact with patients and caregivers in a culturally sensitive way.

All INTEGRIS Health locations have one or more qualified interpreter resources available 24/7/365. If you are unsure what resources are available or how to access them, contact your leader or INTEGRIS Health Language Services.

Patient Safety

Non-clinical INTEGRIS Health caregivers may have opportunities to interact with patients.

Adverse, Sentinel, and Serious Events

Patient care and safety is **not the same for every patient**. Delivering safe and quality care to patients of all ages is important. Regardless the age of our patients, they all need care in a safe and comfortable environment.

Patient safety events that end in harm or death are called **sentinel, adverse, or serious events**.

Reporting Safety Events

At INTEGRIS Health, all caregivers can report concerns about safety and quality of care to The Joint Commission (TJC) without being disciplined or punished as a result of reporting. A Patient Safety Event is an event, incident or condition

that could have resulted or did result in harm to a patient, and includes actual events that reached the patient, whether harm occurred or not.

- Near-Miss Events – Good Catches
- Never Events – Serious Reportable Events (SREs)
- Sentinel Events

Report all safety events to your manager or supervisor at INTEGRIS Health. They will need to complete a report on the RLDatix reporting system.

Sentinel Event or Serious Reportable Event: Serious reportable events (SREs) or sentinel events include but are not limited to:

- Surgery on the wrong patient, wrong part of the body, or wrong surgery
- Patient suicide or attempted suicide
- Medication mistake that requires additional treatment or monitoring
- Falls with injury
- Not reporting or following up on lab or test results

Sentinel events and SREs signal the need for **immediate attention and response**.

Preventing Patient Falls

Patients who are more at risk for falls may need assistance. If you see a patient or visitor who needs help, get a clinical caregiver to assist them.

Informed Consent and Advance Directives

Informed consent is both a moral and legal process. The healthcare provider doing a procedure or treatment should explain the risks, benefits, treatment choices, and likely outcomes. The patient needs to have enough information to make an informed choice.

Roles and Duties

The physician, Licensed Practitioner (LP), nurse, and patient all have roles and duties in the process of informed consent. The physician or LP should give details about the treatment in a language and way the patient can understand. The nurse serves as the witness that the patient or their representative is of legal age and competent, has been given the details by the physician or LP, and signs the form in front of them. The patient or their representative should give consent without pressure from others, and ask questions until they understand.

Advance Care Planning Documents

Individuals have a right to make medical decisions even when they can no longer communicate. Advance Care Planning documents are legal documents that help protect this right. In Oklahoma there are several types of advance care planning documents:

- **Oklahoma Advance Directive and Living Will** – An Advance Directive and Living Will provides instructions for medical treatment if a patient is unable to communicate AND is terminally ill (dying within 6 months), persistently unconscious, or in an end-stage condition (physically and mentally incapacitated). It also allows a person to designate a health care proxy – a legal representative to make most medical decisions once a person has lost capacity to do so. Only competent adults can create an advance directive. The advance directive is only activated when two physicians document in the medical record that a patient is incapacitated and in one of the three conditions listed in the document.
- **Health Care Power of Attorney – A Health Care Power of Attorney (POA)** appoints a person to make medical decisions on behalf of a person if they become incapacitated (although some persons choose for the POA to become immediately effective). It only requires one physician to activate.
- **Do Not Resuscitate (DNR) Consent & Order** – A DNR communicates to health care workers a person's preference to allow natural death – they do not consent to resuscitation attempts in the event their heart stops or they stop breathing. Once a legal DNR consent form is signed by a patient or their legal representative, it remains their code status unless revoked. A physician may designate a person as DNR if that person does not

have a legal representative, but there is clear and convincing evidence the patient would not have wanted resuscitation attempts. Or, the physician can deem the attempts to resuscitate would prove futile to prevent the patient's death and order DNR.

- **Physician Orders for Life Sustaining Treatment (POLST)** – A POLST is a physician's order that documents and directs a patient's medical treatment preferences when faced with life-limiting illnesses and irreversible conditions. It must be signed by the patient (or representative) and the physician.

Advance Care Planning Documents: Your Role

To help support the patient's right to make health care choices:

- Offer information about advance directives to all adult patients
- Help patients who wish to complete an advance directive
- Treat all patients fairly and equally, regardless of advance care planning status

Caregivers must respect the decisions in a patient's advance directive. They must scan all advance care planning documents into the medical record and follow the directive after it has been activated.

Suicide Risks

Each year, suicide is a significant cause of death in the United States. According to the Centers for Disease Control and Prevention (CDC), suicide is the 10th leading cause of death overall in the United States. Inpatient suicide can happen in any care setting, not only in psychiatric facilities. Many people at risk never attempt suicide. Nevertheless, people who are at risk tend to go through periods of especially high risk. Caregivers must learn to recognize suicide risk factors and warning signs. This makes it possible to take steps to keep suicidal patients safe.

Risk Factors and Warning Signs

Certain identifiable factors increase the risk of suicide. Although it is difficult to predict which people might attempt suicide, healthcare providers who recognize suicide risk factors and warning signs may be able to take steps to keep suicidal patients safe. Proper assessment is very important.

Suicide Risk Factors

Psychiatric disorders: More than 90% of all suicide victims have at least one diagnosable and treatable psychological disorder.

- Personal factors and history: Personal factors and family history may be considered risk factors for suicide, for example previous suicide attempt(s), family history of suicide.
- Sociodemographic factors.
- Stressful life events and circumstances: Stressful life events that increase the risk of suicide include relationship loss (separation, divorce, widowhood or estrangement).
- Affective states and belief systems: Ongoing feelings of hopelessness, guilt, worthlessness, or inadequacy can increase the risk of suicide in addition to belief systems. Some people take their own lives without warning. However, most suicidal people give verbal or nonverbal signs.

Warning signs of suicidal thinking fall into three general categories:

Patterns of speech – Direct and Indirect: In some cases, suicidal patients are more direct. For example, a patient might talk about attempting suicide or often speak about death and dying.

Behavior – Difficulty eating or sleeping; loss of interest in hobbies, work, school, etc.; writing a will, putting affairs in order, or saying goodbye; giving away prized possessions; self-destructive and risk-taking behavior; decreased ability to function at work or socially; loss of interest in personal appearance; and loss of control including bursts of rage.

Expressed feelings – Certain feelings can be a sign that a patient is thinking of suicide. These include desperation, rage, anxiety, guilt, hopelessness, and a sense of abandonment.

Prevention of Inpatient Suicide

Caregivers at INTEGRIS Health are educated to recognize suicide risk factors and warning signs. Risk assessment procedures are regularly reviewed, revised, and optimized for each facility.

Environmental Risk Factors: Physical Environment Prevention Strategies

The Centers for Medicare and Medicaid Services (CMS) Conditions of Participation (CoP), "Patient Rights", establishes the rights of all patients to receive care in a safe setting. This is intended to protect a patient's emotional and physical safety. To help protect suicidal inpatients, facilities must modify and monitor the physical environment to prevent access to potentially harmful items. For example: Identify and replace all non-breakaway hardware. Weight-test all breakaway hardware. Hardware should not support the weight of the least heavy patient on the unit. Install showerheads, shower bars, and closet bars that do not provide good places for hanging. Inspect bedding, since this is the material used most often for hanging. Remove other materials that could be used for hanging. Keep items such as sharps, cleaning solvents, and utensils out of reach. Use Velcro® or snaps on patient clothing. Do not allow patients to have clothing with cords, ties, or belts.

Be aware of the following items and do not leave these items in a patient room:

String, rope, laces, cords (e.g., phone, electrical cords, ear buds, headphones, window blind cords, nurse call light, etc.); Extra bedding; Wire hangers; Jewelry; Sharp objects; Pens and pencils; Medication brought from home; Belts, nylon pantyhose, tights, leggings, socks, scarfs; Glass products (e.g., vases, bottles, lab tubes, make-up mirrors, etc.); Needles, unnecessary medical equipment, cords or tubing (e.g., IV tubing, oxygen tubing, EKG wires, etc.); Toiletry items (e.g., dental floss, aerosol spray cans, razors, etc.); Products containing alcohol/acetone.

When to complete an environmental check: Complete an environmental check after: Every shift; a procedure and patient returns to their room; a visitor leaves the room.

Non-clinical caregivers need to know that a purple patient gown indicates a patient is a suicide risk.

Some keys points:

- Inpatient suicide can happen in any care setting, not only in psychiatric facilities.
- The top two root causes of inpatient suicide are deficiencies in the physical environment and poor patient assessment.
- Risk factors for suicide include psychiatric disorders, personal factors and history, sociodemographic factors, stressful life events, and feelings and belief systems.
- Warning signs include patterns of speech, behavior, and expressed feelings.
- **The physical environment should be modified and monitored to keep potentially harmful items away from patients.** Patients at high risk for suicide should be observed continuously.
- Pacts and promises are not a substitute for monitoring suicidal patients and other safety measures.

Continuous Improvement

INTEGRIS Health is committed to a continuous improvement culture. Using the systems, subsystems and tools found in the INTEGRIS Health Way, our organization is able to align around what is important, identify gaps in performance quickly and implement solutions that are meaningful and sustainable. All caregivers participate in Daily Huddles and Tiered Escalation, Ideas for Daily Improvement, and Problem Solving to close any gaps in providing highly reliable safe and quality care.

The Code of Ethical Business Conduct (Code) and its resource guide applies to all caregivers and is intended to outline the standards of behavior and working relationships we are expected to uphold on a daily basis. All caregivers are expected to review the Code of Ethical Business Conduct and Resource Guide and sign an acknowledgement that they will adhere to its principles.

Our Culture of Ethics and Integrity

It is our commitment to our patients, communities, each other, and the organization to conduct our business with integrity and excellence. Every organization has its own unique culture. At INTEGRIS Health, our culture is defined first

and foremost by what we do - partnering with people to live healthier lives. How we do what we do is equally important, and it also defines our culture.

- We demonstrate our values in every interaction.
- We work as a team.
- We respect each other.
- We are diverse, inclusive, and engaged.
- We skillfully care for our patients, and we provide the same high-quality care to everyone, regardless of their circumstances.
- We are also defined by how others see us. Our patients, their families, researchers, business partners, neighbors, and other care providers trust that we will do what we say, always strive for the highest quality, and honor our commitments to our patients, our caregivers, and our community.

This is our culture. It is defined by what we do, how we do it and how others see us. It is a culture of ethics and accountability. Maintaining a culture of ethics is not always simple, and, for that reason, we have developed our Code of Ethics. It is intended to help us put our values into practice so we can maintain our culture of doing the right thing.

Who must follow the Code?

All caregivers and anyone acting on our behalf should conduct themselves in a manner consistent with our Code and applicable policies.

What are the responsibilities of all caregivers?

All of us have a role to play in protecting INTEGRIS Health's reputation; doing our part means that we have the following responsibilities:

- Be familiar with and follow the information contained in the Code, as well as the INTEGRIS Health policies, laws and regulations that apply to you and your job.
- Ask questions and report concerns.
- Remember that in your work role, you represent INTEGRIS Health to our patients and the public. Every interaction you have with others while performing your job impacts our reputation.
- Always act in a professional, honest, and ethical manner when acting on behalf of INTEGRIS Health.
- Work as a team and treat others respectfully. Support each other's work by being transparent, honest, and direct. Proactively seek to resolve problems.
- Cooperate and be truthful when responding to an investigation, inspection, or audit.
- Complete all required ethics and compliance training on time.
- Certify that you have read, understood, and follow the Code.

Reporting Concerns

We can't fix problems we don't know about, so when you ask questions or report problems, you are helping us meet the highest levels of ethics and compliance. If you see or suspect a situation that may be a violation of our values, the Code, our policies, or the law, you have a responsibility to speak up. When you report concerns, you are protecting our patients, yourself, and your fellow caregivers as well as the reputation of INTEGRIS Health.

The Integrity Line is a confidential way to ask questions.

The Integrity Line is a confidential way to seek guidance.

The Integrity Line is a confidential way to report possible concerns.

The Integrity Line is answered by third-party ethics and compliance specialists.

You can choose to report anonymously. Unless you identify yourself, IH will not be able to determine who called. It is important to provide as many details as possible (who, what, when, where).

While we commit to creating an open, fair, and just culture, violation of this Code, our policies, laws or regulations can result in serious consequences for you individually, and for INTEGRIS Health. We investigate all reported violations, and if substantiated, any violations may result in disciplinary action up to and including termination of employment.

INTEGRIS Health has a no retaliation policy. We want everyone to be comfortable sharing concerns and asking questions without worry about retaliation.

How Do I Report a Concern?

Discuss the issue with someone in your Chain of Command.

Talk to Human Resources, Legal Services, or the Compliance Department.

Email Compliance at compliance@integrisok.com or Call the Integrity Line at 888-243-9597.

Expectations

As INTEGRIS Health caregivers, we are expected to know the rules that apply to our individual jobs and comply with all regulatory standards that apply to our business. Doing so ensures that claims submitted to the government, third-party payors and patients are accurate and meet federal health care program and contractual requirements as required. We comply with all federal health care program requirements including billing laws and regulations, and address inquiries quickly and honestly. We only bill for medically necessary services actually provided and assign codes that accurately reflect documentation in the medical record. We ensure there is appropriate documentation for all financial reports, claims submitted to payors and all external agencies. We respond promptly to any patient complaint or question regarding a bill. We monitor and audit INTEGRIS Health billing practices and correct billing errors prior to submitting a bill. If the bill has already been submitted, we correct the underlying problem and make appropriate refunds and/or disclosures. We never engage in unlawful or inappropriate practices that could result in a false claim being made. This may include misrepresenting a diagnosis to obtain payment or unbundling charges to enhance payment.

Patient Rights, Privacy and Security

Be aware every patient record you access in Epic is documented and monitored to make sure you are only accessing the records needed to do your job. Every record that is accessed is logged for date, time and how long you were in each record. We keep all records of your activity in the system indefinitely. Please remember to not access records of your family members, friends, neighbors, VIPs or fellow caregivers if you are not on the care team.”

Records Management

INTEGRIS Health has records management policies and procedures to ensure that our records are maintained, stored, and destroyed in compliance with federal and state laws.

Medical Conditions Requiring Immediate Attention

Stroke, Chest Pain, Hypoglycemia/Diabetes: How to Recognize and Respond

Signs and symptoms of a heart attack include chest pain, upper body discomfort, nausea, and shortness of breath.

What is a **heart attack**? A heart attack occurs when blood flow to part of the heart is blocked. Heart disease is the leading cause of death in the United States. The heart muscle supplied by the blocked artery begins to die. Damage to the heart muscle increases the longer an artery stays blocked.

What is **hypoglycemia**? Hypoglycemia occurs when low blood sugar less than 70 mg/dL. Signs and symptoms of low blood sugar include shaking or trembling, irritability, nervousness, anxiety, sweating, clammy, confusion, lightheadedness, dizziness, fast heartbeat, or hunger. If you notice any of these signs or symptoms, help the person sit or lie down. Call for help. If you are outside the hospital, call 911. If you are inside the hospital, you're your facility's emergency response number.

What is a **stroke**? A stroke is a brain attack that occurs when blood flow to an area of the brain is cut off. Warning signs of a stroke can be sudden onset of any one of the following:

B—Balance (loss of balance/coordination; inability to stand/walk)

E—Eyes (blurred/loss of vision in one or both eyes)

F—Face (one side of face droops when smiling)

A—Arms (one arm won't raise up, straighten, or has weakness)

S—Speech (sudden slurred, garbled or no speech)

T—Time to call 911 (If inside INTEGRIS Health hospitals call internal emergency number)

If you think it could be a stroke, no aspirin, water, food—nothing in mouth.

Implicit and Weight Bias

What is implicit bias? Implicit bias is also referred to as unconscious bias. Implicit biases are unconscious attitudes and stereotypes that can manifest in the health care system. Bias is repeated and reinforced so often that we don't even see it as bias. Forms of weight bias can occur in multiple forms and from different health professionals and can be expressed in subtle and overt ways. Forms include negative weight-biased assumptions, stereotypes, judgements, insensitive languages/jokes, medical equipment that is too small to be functional for obese patients, negative comments or facial expressions when obese patients are being weighed, waiting room chairs that are too small or not sturdy, and lack of education and health information due to disrespect. There are many other biases besides race and ethnicity that can affect our behaviors with patients, for example, disability, gender age, sexual orientation, and socioeconomic status. We can have bias for just about any reason. All of these can lead to poor patient outcomes when experienced in healthcare. Be aware of bias and try to keep conscious or unconscious biases from affecting the way we treat patients and each other.

Harassment

Harassment of an individual on any basis runs contrary to the values of INTEGRIS Health. Defining Harassment:

- Harassment refers to conduct of a socially unacceptable nature.
- It is behavior that is unwelcome, that is objectively and personally offensive, and that lowers morale and therefore interferes with work effectiveness.

The Newspaper Test: If in doubt, consider: Would I feel shame or embarrassment if the Daily Oklahoman ran a feature story on my conduct or statements?

The following are examples of conduct that may be considered harassment:

- Verbal conduct such as racial epithets, derogatory jokes or comments, sexual innuendoes, inappropriate language, threats, suggestive or insulting sounds, slurs, or unwanted sexual advances, invitations, or comments
- Non-verbal conduct such as derogatory and/or racially/sexually oriented cartoons, clothing, drawings, posters, photographs, or gestures
- Transmitting sexually suggestive, derogatory, or offensive materials via INTEGRIS Health computers or accessing such information on the Internet while at work
- Physical conduct such as assault, unwanted physical contact, coerced sexual conduct, touching, patting, or pinching
- Threats and demands to submit to sexual requests
- Retaliation for having reported or threatened to report harassment

Reporting Harassment: If you believe that you are, or someone else is, a victim of harassment, report it immediately.

- Report the conduct to the appropriate supervisor, Human Resources, a Security officer, any supervisor, any member of INTEGRIS Health administration
- If you are not satisfied with the response of the first person to whom you report, contact the VP of Human Resources; the Managing Director of Legal Services; or the CEO or COO of INTEGRIS Health

NO TOLERANCE: Harassing behavior is unacceptable. All allegations of harassment will be investigated. Evidence of harassment will result in discipline up to and including termination.

Integrity Line

INTEGRIS Health has established an Integrity Line for Affiliates to report instances of suspected fraud, abuse, policy violation, unethical behavior, or other compliance concerns. As an INTEGRIS Health Affiliate you have a responsibility to report such matters and may do so without fear that you will be disciplined or retaliated against for doing so. No action will be taken against anyone who in good faith reports information to the Integrity Line. We are responsible as an organization and as individuals to act in a legal and ethical manner. INTEGRIS Health Corporate Compliance Program will be successful only if you do your part.

HIPAA (Health Insurance Portability and Accountability Act)

INTEGRIS Health complies with all federal and state laws pertaining to patient privacy and security of health information. Patient medical information is confidential and should not be released without proper authorization as required by law and in accordance with INTEGRIS Health policies and procedures. Any concern regarding any of these issues should be immediately reported to the Department Director or the Chief Compliance & Privacy Officer or through the Integrity Line @ 405-951-2248 or 888-243-9597.

Volunteers bear personal liability for confidentiality violations. ALWAYS STOP and ask yourself, “Should I be sharing this patient information?”

- If it doesn't pertain to **TPO - Treatment, Payment, or Operations**, don't discuss it! Remember the sharing of patient information is only acceptable when discussing **Treatment, Payment, or Operations** pertaining to the patient.
- **Do NOT access** a patient's information unless needed for patient care or coding/billing purposes.
- When walking away from your computer, be sure to **exit out of any patient information screens**. Always make sure patient information is not visible to people who might walk by and see your computer screen.
- Think of patient information about fellow volunteers, neighbors, and acquaintances as **protected information**. Don't leave documents with patient information lying around where others might see. Keep charts or folders closed and turn reports or papers face down or cover with a “CONFIDENTIAL” sheet.
- Dispose of patient information by placing in appropriate shredding bins...never in an open wastebasket.
- **Watch those hallway and elevator conversations!** Don't discuss patient information where others not involved in the care of the patient can hear.
- Keep printers and fax machines in a secure location. Make sure you retrieve printed documents containing patient information promptly – don't leave them on the printer or fax.
- Avoid faxing patient information when possible.
- Never e-mail medical information outside INTEGRIS Health unless your e-mail is properly encrypted.
- Follow “minimum necessary” rule when releasing information.
- Obtain valid, patient-signed “Authorization” forms before releasing medical information for other than **treatment, payment, and healthcare operations**.
- Remember: **Confidential** or **Protected** patient health information (“PHI”) is any information that identifies the individual in any way and relates to their past, present, or future physical or mental health. This could include personal address, patient account number, telephone number, license plate number, etc. Wrongful disclosure of health information can carry fines and result in jail time.
- Patients can choose not to be listed on the public directory/census reports.
- It is not okay to scan the patient directory to look up a friend or family member. If a friend asks you to look up a patient to see how they are doing, you should explain that it is a violation of the patient's privacy for you to ask around or look at his records.
- Patient authorization is NOT required for routine use of protected health information (PHI) for treatment, payment, and healthcare operations.

- Patient authorization IS required for any uses or disclosures OTHER THAN treatment, payment, and other routine healthcare operations. Patients must receive a written Notice of Privacy Practices (NPP).
- NPP is provided to all patients who present for treatment or services.
- In an emergency, NPP is provided as soon as possible after emergency passes.
- NPP is posted at entry points and are available upon request by anyone at the place of service.
- INTEGRIS Health must make a good faith effort to obtain written acknowledgement from patient or authorized representative of receipt of NPP.
- Patients have the right to request restrictions on use and limit disclosure of their PHI for certain purposes.
- Patients have the right to inspect their medical records and request amendments, or corrections be made.
- Patients have the right to request and receive an Accounting of Disclosure of their PHI.

Information Security

Information Security protects against the unauthorized use of information, especially electronic data; to guard and protect information at INTEGRIS Health from outside threats; to protect INTEGRIS Health data—regardless of where it's stored; to ensure threats such as unauthorized access, use, disclosure, disruption, modification and/or destruction are never realized at INTEGRIS Health. Information Security is important at INTEGRIS Health. What is at stake: our reputation; the trust of our patients and their families; your personal information. **Every 39 seconds, another computer is hacked—affecting one in three Americans each year.**

Information Security Safety Myths

Myths—I'm safe. I don't visit unsecure websites. Security Software is the only protection I need. I'm not the typical target. I'll know if my information is compromised.

Truths—Anyone can have their information stolen. It's everyone's responsibility to take protective measures.

What is an E-mail Scam?

Spam is an undesired communication, often an email or call, that gets sent out in bulk. Spam wastes time and resources.

Phishing is a scam during which a user is tricked into revealing personal or confidential information.

How to Spot Phishing Emails

The most common phishing methods attempt to trick a user into clicking on an attachment or link in an email that leads to a web site and downloads malicious software. Phishing is a kind of social engineering. **If you weren't expecting an email, do not click on any links or attachments.**

Unofficial email domain/Wrong website domain. Do I recognize the sender's email address as someone I ordinarily communicate with? Is this email from someone outside of my organization and it's not related to my job responsibilities? Is this email from someone inside the organization, but is unusual or out of character? Does this email have an embedded link or attachment that was unsolicited?

Generic salutation. Was I copied on the email, and the rest of the people on the list it was copied to are people I don't know personally? Was the email sent to an unusual mix of people, sometimes people whose name starts with the same letter?

Out-of-date logos. Outdated logos or artwork that is just a bit different can be a clue that this email or link is a fraud.

Typos and misspelled words. Does the email have bad grammar or many spelling errors?

Use of fear tactics. Is the sender asking me to click on something to gain a reward or to avoid a negative consequence? Is there a veiled threat in the email to yourself or someone you may know? Do you have a gut feeling you shouldn't click?

Virus warning. Be aware of warnings that encourage you to "click here" to keep yourself safe. **Attachments &**

Hyperlinks. If you hover your mouse over the hyperlink, does it display a different link to an address than the link that is displayed? Is the hyperlink the only thing in the message, and there is no contextual explanation? Are there misspelled words in the hyperlink? Did the sender include an attachment that you were not expecting or does not make sense in relation to the email message? Is the attachment a dangerous file type? (.exe, .pdf and others?)

Time, Date, Subject. Was the email sent at an unusual time? Was the email sent outside of normal business hours? Does the email subject seem irrelevant or does not match the content of the email? Is this email a reply to something I never requested? The better you are at spotting suspicious emails, the better you'll be at preventing security risks.

INTEGRIS Health's Security Measures

INTEGRIS Health Information Security is working behind the scenes to protect both our company and our caregivers' information.

What is PHI? Under HIPAA, any information that can be used to identify a patient is considered Protected Health Information (PHI). What is ePHI? PHI in electronic form — such as a digital copy of a medical report. Anything related to health, treatment or billing that could identify a patient is PHI and if it is in electronic form, it is referred to as ePHI. What is PII (Personally Identifiable Information)? PII is any data that can be used to identify a specific individual. Social Security numbers, mailing or email address, and phone numbers have most commonly been considered PII, but it can include an IP address, login IDs, social media posts, or digital images.

All company and customer data belongs to INTEGRIS Health

Never share sensitive and/or confidential information, such as PHI, PII or caregiver information using electronic communication methods such as: blogging, email, instant messaging, social media, and texting. Protect confidential information by using cover sheets when working with PHI and PII and turning your monitor away from public areas. Review and sign the Information Access Agreement, which is an attachment to the Information Security Policy (SYS-IM-100). Contact ITS NOW for problems with INTEGRIS Health electronic devices from the Source page or by calling the ITS Service Desk. Keep ID badges visible while wearing them and secure when not in use.

Password Requirements at INTEGRIS Health

I will create passwords that are at least 12 characters in length. I will create different passwords for work accounts and personal accounts. I will memorize my passwords rather than writing them down. I will be responsible to protect my login information per SYSIM- 100 & 105. I will use a mix of uppercase and lowercase characters for my passwords. I will use a mix of special characters (e.g., punctuation marks). I will protect my username & passwords that authenticate me to INTEGRIS networks. I will NOT share my password with a colleague, supervisor, or ITS Help. I will NOT use easy to guess, commonly used passwords. I will NOT use the same passwords for personal accounts & INTEGRIS Health accounts. I will not leave my INTEGRIS Health devices unsecured. **I will not store passwords on desktops or laptops. I will not include all or part of my username, first or last name in my password. I will not use obvious PWs like my nickname, birthdate, pet name, sports team.**

Lock Your Computer Before Walking Away

Lock your work computer by pressing CTRL+ALT+DELETE, and then click Lock Computer in the Windows Security dialog box. If the keyboard you are using includes the Windows logo key, you can also use "Windows Key+L" shortcut to quickly lock your computer.

Sharing your account can result in disciplinary and legal action. The health care industry is highly regulated and the requirements for authorized access are clearly defined by INTEGRIS Health policies SYSIM- 100, SYS-IM 105 and SYS-IM-120.

Social Media

Posting PHI, PII or revealing any confidential INTEGRIS Health information violates INTEGRIS Health policy. **Never share PHI on social media.**

Information Security Policies

To access Information Security Policies, go to "The Source" page, select "Policies" then select "Information Management System Policies." See below for highlights of what these policies address. Caregivers are responsible for reviewing and following INTEGRIS Health policies.

SYS-IM-100 Information Security and Information Access Agreement

SYS-IM-102 Password Management Policy and Standard

- Passwords must be 12 characters in length
- Account lock-out must occur at 7 failed attempts or less
- Account lock-out duration must be 30 minutes or until an administrator can unlock the account
- Password history setting must be 5 passwords or less

SYS-IM-105 Portable Devices Policy

SYS-IM-106 Email Security

- Email messages are company property
- Email messages containing confidential and/or internal information must be encrypted

SYS-IM-152 Information Access Management

- Access Authorization and Authentication
- Separation of Duties and Role-based security
- Emergency Access

Workplace Violence Prevention

What is workplace violence?

INTEGRIS Health defines workplace violence as an action, whether verbal, physical, or written, which is intended to threaten, including implied threats, cause, or is capable of causing, death or serious bodily or psychological injury to oneself or others or damage to property. Workplace violence includes, but is not limited to:

- intimidation
- threats of violence
- destruction of property
- threats of suicide
- physical or psychological injury to a person
- domestic violence
- gang activity

Healthcare workers are at increased Risk for Violence in the Healthcare Setting

Violence can happen in any workplace. According to The Bureau of Labor Statistics (BLS) and The National Institute for Occupational Safety and Health (NIOSH):

- Each year, about 500 people are murdered while at work or on duty.
- Each year, 1.8 million people are victims of non-fatal workplace assaults.
- Healthcare workers are at increased risk for workplace violence.
- Over 50% of all non-fatal injuries occur in healthcare and social service organizations.
- The nonfatal injury rates are probably higher due to underreporting, as employees and institutions tend to report only the most severe incidents.

Occupational Safety and Health Administration (OSHA) reports that "From 2002 to 2013, incidents of serious workplace violence (those requiring days off for the injured worker to recuperate) were four times more common in healthcare than in private industry on average." INTEGRIS Health is not exempt from the increasing trend of violent occurrences in the healthcare setting. In fiscal year 2019, INTEGRIS

Health experienced over 1000 incidents of violence with 165 resulting in an assault on a caregiver.

Why are healthcare workers at an increased risk? In the healthcare setting, the primary cause of violence is stress.

Patients and their family members often feel frustrated, vulnerable, or out-of-control. All these feelings can lead to violence. According to the Bureau of Labor Statistics the source of healthcare worker injuries - 80% being caused by patients and 20% being caused by other sources (students, coworkers, etc.)

Note: Patients are responsible for most of the violence in the healthcare setting. Members of the general public can be violent, as well.

Analysis of patients involved in caregiver assaults at INTEGRIS Health reveals that the majority of assaults are related to patients who:

- are under an Emergency Order of Detainment
- have altered mental status
- have a medical condition such as sepsis, dementia, mental health diagnosis, which puts them at greater risk for combative or violent behavior

When & where is the greatest risk?

Healthcare workers who have the most direct patient contact are at highest risk of experiencing violence. Violent behaviors are most likely to occur when there is a great deal of patient contact, such as during:

- Mealtimes
- Visiting hours
- Patient transportation

Another important factor to remember: Patients are most likely to become violent when they feel frustrated, vulnerable, or out-of-control.

Examples of such situations include:

- A patient is denied services
- A patient is admitted involuntarily
- A staff member sets/enforces limits on the patient's eating, drinking, or smoking

WHERE IS THE GREATEST RISK?

Violence can occur anywhere in the hospital setting. Violence is most frequent in:

- Psychiatric wards
- Emergency departments (ED)
- Waiting rooms
- Geriatric units

Victims of violence may suffer:

- Minor physical injury
- Serious physical injury
- Temporary or permanent physical disability

Workplace violence also can affect:

- Temporary or long-term low morale
- High work-related stress

Remember: Stress is the reason for most hospital violence.

Additional risk factors for violence.

- Intoxicated patients or visitors
- Patients with a history of violence
- Patients with certain psychiatric diagnoses
- Patients with access to firearms
- Understaffing, especially during mealtimes and visiting hours
- Long waiting times
- Overcrowded, uncomfortable waiting rooms
- Working alone
- Poor building design, including poorly lit halls, rooms, parking lots, and other areas
- Poor hospital security

- Staff who are not trained to prevent and deal with possible violence
- Unlimited public access to the facility

Violence can lead to:

- High employee turnover
- Reduced trust in the organization

Prevention, Recognition, & Response

Have empathy for others. Trying to understand why a person might be feeling a certain way or expressing specific emotions makes it easier to respond appropriately. We are less likely to respond defensively if we can relate to those emotions.

Understand how our attitude and behaviors influence others. Our attitudes and behaviors can directly affect the attitudes and behaviors of others. Be kind. Be compassionate. Establish rapport. These behaviors make escalation harder.

Effective Communication is key. Lack of communication can result in feelings of frustration and anxiety. These emotions can often lead to irritation and escalation.

Be situationally aware. Being aware of others around you and their behaviors can help you detect early signs of irritation. If the earlier signs of agitation or irritation are addressed, we can often prevent the situation from escalating.

Be aware of implicit bias. Treat all people as individuals and avoid stereotyping.

Remember: Patients often feel frustrated, vulnerable, and out-of-control.

Anyone can lose control and become violent. These feelings can easily intensify. As a result, the patient's hostile behavior is likely to intensify. Hostile behavior tends to intensify (or escalate) through three levels:

- Tension
- Disruptiveness
- Violence

Tension - Recognition of Tension

A tense person may express one of the following beliefs:

I am being threatened. –

A patient might use body language to express this belief. This can take one of two forms:

- Defensive body language: huddled, muscles tensed
- Aggressive body language: upright posture, moving forward, pacing, clenching teeth, clenching fists

I am being deprived. –

A patient might make statements that express this belief. For example:

- 'I've been waiting an hour. Three patients have gone in to see the doctor ahead of me!'
- 'My daughter is really sick. You people aren't doing a thing about it!'

My requests are being ignored. –

A patient might make statements that express this belief. For example:

- 'I told you, I don't need to see the doctor! I just need a prescription for penicillin!'
- 'My son can't wait any longer. I told you he needed to see the doctor right away!'

Response to Tension When a patient is tense:

Remain calm, quiet, rational, and professional. This response can help calm things down. Remember not to take tense behavior personally! In most cases, you are not responsible for the person's frustration. You are simply the target. Do not get into a power struggle.

Apologize. Use an apology to show sympathy. An apology can help calm the person down and can show that you understand the problem. It can also encourage cooperation. Consider an apology such as: 'I'm sorry you've had to wait so long. I know that's frustrating.'

Listen and ask questions. Show that you are interested and concerned by listening respectfully. Then ask follow-up questions. Again, this can help calm the situation. The person sees that he or she does not have to act even more aggressively to get your attention.

Summarize. You meet two goals when you sum up what you have heard the person say.

- First, you make sure that you have understood correctly.
- Second, you continue to show that you are interested and concerned. This continues to soothe the person's feelings of being ignored and deprived.
- Address the problem

Disruptiveness – Recognition of Disruptiveness

Timely recognition of tension and use of de-escalation techniques may prevent a person who is tense from becoming disruptive. If in this final step, state the problem. Ask the person to help you find a solution. You may need to bring in a supervisor or someone else who can help. Decide what you can do. Then let the person know. **Never promise more than you can do!**

If the tension is not addressed, a person may progress to **disruptive behaviors** such as:

- **May use rude language**
- **May make verbal threats**
- **Does not think rationally**
- **Will not calm down easily**

Responding to Disruptiveness When responding to disruptive behavior:

Stay calm and choose your words carefully. Stay calm to help calm the situation. Think about your choice of words.

Certain words and phrases are likely to make the person even angrier. These include:

- have to
- can't
- it's not our policy

Instead, use words and phrases such as:

- I will...
- will you...
- would you be willing...

When caregivers are disruptive, using universal skills including **ARCC** to deescalate is encouraged.

Ask a question

Request a change

Voice a Concern

Use your Chain of Command

Give clear instructions and set clear limits. Explain that you will not be able to help until the person stops certain behaviors (for example, swearing or making verbal threats). Be polite, but clear and firm. Continue to choose your words carefully.

Continue to show that you want to help. Listen. Ask questions. Summarize.

NEVER touch the person without their approval

Recognition of Violence

Even a gentle touch can feel like an attack to a person who is very upset. The person may respond violently. Keep your distance.

Signal for help. An open call to security may make things worse. You may need to signal for help without letting the person know. Do not hesitate to ask for help.

Violence is the most dangerous level of combative behavior.

The person may:

- Yell
- Scream
- Become physically violent
- Use a weapon

Response to Violence

If a person becomes violent:

- Do **NOT** confront the person.
- Do **NOT** try to stop the person physically.
- Get yourself and others to safety.
- Call security and/or the police.

Remember: Prevention of escalation is ideal. The levels of hostile behavior are tension, disruptiveness, and violence.

- Tense people are frustrated and highly sensitive. They feel threatened, deprived, or ignored. Respond to tension by staying calm, apologizing, listening, asking questions, summarizing, and addressing the problem.
- Disruptive people are verbally abusive, irrational, and difficult to calm down. Respond to disruptive behavior by staying calm, choosing your words carefully, setting clear limits, showing that you want to help, and secretly calling for security. Never touch a disruptive person.
- Violent people yell, scream, act physically violent, and may use weapons.

Respond to violence by getting yourself and others to safety.

Then call security or the police. Never try to stop a violent person physically.

INTEGRIS Health Workplace Violence Prevention Program

INTEGRIS Health strives to maintain a safe and healthy work environment. Safety is INTEGRIS Health's FIRST pillar of excellence. Our goal is to achieve zero harm to patients and caregivers. INTEGRIS Health continues to improve our Workplace Violence Prevention Program to promote caregiver safety and improve outcomes for our patients.

INTEGRIS Health Facility Signage

INTEGRIS Health provides facility signage to communicate behavior expectations to patients and visitors. Signage will be located in areas at higher risk for violent occurrences such as main lobbies and waiting rooms.

INTEGRIS Health caregivers will see visual indicators located in patient care settings identifying patients who are at increased risk for becoming violent.

Hospital or Mental Health Setting Patient Door Signage



**Visitors and Caregivers:
Do Not Enter. Check with Nurse.**

Nān Rilotok im Rikau ro:
Jab Dreloñ. Kebaak Nōōj ro mokta jen am dreloñ.

Visitantes y cuidadores:
No entre. Consulte con la enfermera antes de ingresar.

Khách Viếng Thăm và Người Chăm Sóc:
Không Được Vào. Kiểm tra với Y Tá trước khi vào.



What should you do if you see this sign?

Always check with nurse before entering the room. This patient could be at risk for becoming violent. Caregivers should take personal safety measures before entering patient room or interacting with the patient.

Ambulatory Door Signage

Door signs will be placed on rooms for patients who have been identified as a risk for violent behavior. Signs will be placed outside designated VP room on the doorknob. Patient family members must notify Clinical Support Staff before entering the room.

If a patient, visitor, or coworker begins to escalate, becomes disruptive, or becomes violent – call Public Safety immediately. Recognizing escalating situations and calling for help early may reduce the number of violent incidents and the risk of caregiver harm.

Reporting violent incidents within INTEGRIS Health

Any incident of Workplace Violence that occurs on INTEGRIS Health property involving caregivers, applicants for employment, patients, visitors, professional appointees, or other individuals who are not caregivers but who conduct business with INTEGRIS, must be reported.

How do you report a violence incident?

To report an incident of workplace violence, contact an INTEGRIS public safety officer so they can complete an incident report in RL Datix. **For those facilities that do not have 24-hour public safety officers available, call 911 for police if immediate assistance is needed.**

Threat Assessment Team

All threats and incidents are evaluated by Public Safety and Human Resources members and escalated to the Threat Assessment Team (TAT) as deemed appropriate for the situation. The TAT will evaluate the instances of workplace violence for risk and recommendations for next steps. The risk of assault can be minimized or ideally prevented if appropriate precautions are taken.

What if injury occurs as a result of a violent incident?

If injury does occur as a result of workplace violence, Caregiver Health must be notified. Refer to your leader for injury reporting procedure.

Caregivers must report any personal situation of conflict or violence that may impact their own safety or the safety of others in the workplace. This includes threats, domestic violence, or suicide. The confidentiality of reports and privacy of individuals will be respected to maximum extent possible.

Summary

INTEGRIS Health is committed to zero harm to patients and caregivers. Key components of INTEGRIS Health Workplace Violence Prevention Program:

- INTEGRIS Health Facility signage communicates behavioral expectations to patients and visitors.
- Be aware of visual indicators for patients at risk for violence including door signage and electronic health record flags.
- Call for help early to reduce the number of caregivers harmed as a result of workplace violence.
- Call Public Safety or 911 if immediate assistance is needed for a violent patient.
- Report incidents of violence to Public Safety and complete incident report using RL Datix.

Excerpts from the INTEGRIS Health Code of Conduct

This is your personal copy of INTEGRIS Health's Code of Conduct ("Code"). The Code has been prepared to give you a clear understanding of what is expected in the INTEGRIS work environment. It has been approved by the executive leadership of INTEGRIS Health, as well as the INTEGRIS Health Board of Directors, and represents a reaffirmation of our long-term commitment to compliance and quality services to our patients and the communities we serve.

The Code was designed to communicate: (1) the basic principles and standards of behavior expected in the INTEGRIS Health work environment,- (2) the commitment of INTEGRIS Health to comply with laws, regulations, standards of care and ethical business practices; and (3) the responsibility we all share for keeping INTEGRIS Health in compliance with all applicable laws, regulations, and policies. We pledge the full commitment of INTEGRIS Health to the principles set forth in the Code and to fully support our Compliance Program. We ask that each of you carefully read the Code and sign the compliance certification form at the back of this booklet. It is necessary to make many decisions every day, and making the right ones is not always easy. INTEGRIS Health sets forth basic expectations for personal and professional behavior in the workplace. These expectations are applicable to INTEGRIS Health employees, medical staff, allied health staff, board members, contractors, vendors and agents (hereinafter referred to as "Affiliate" or "Affiliates").

Patient Care

INTEGRIS Health is committed to delivering high-quality care, products, and services to its patients in a compassionate, respectful, and efficient manner. Patients will be treated with dignity and respect at all times. INTEGRIS Health will provide each patient with information regarding his or her rights and responsibilities and will endeavor to protect those rights throughout their care and treatment. Patient medical records, and the contents thereof, must be kept strictly confidential by law.

Workplace Behavior and Equal Employment Opportunities

INTEGRIS Health is committed to a work environment that respects the rights, dignity and cultural differences of its patients and Affiliates. INTEGRIS Health anticipates and expects that all Affiliates will conduct themselves in a professional manner while on INTEGRIS Health premises and at any time or location while engaged in activities related to INTEGRIS Health.

INTEGRIS Health is committed to fair and lawful human resource policies and practices in recruiting, hiring, evaluation, training, discipline, career development, compensation, promotion, and termination. Discrimination of any sort, against any employee or applicant for employment, because of age, race, religion, sex, disability, service in the armed forces, national origin, or other protected category, will not be tolerated.

Safety, Health and Environmental Matters

INTEGRIS Health seeks to provide a healthy and safe work environment. Supervisors must ensure that all employees and agents are properly trained in health and safety practices and precautions. Contractors, vendors, and members of the medical and allied health staff must commit to following all safety, health, and environmental policies while on INTEGRIS Health premises and in relation to all work with INTEGRIS Health.

INTEGRIS Health Volunteer Agreement

- I wish to provide volunteer services for INTEGRIS Health.
- As a volunteer, I understand that I am not entitled to and will not receive any compensation, salary, benefits, or other payments in exchange for my providing volunteer services to the facility.
- I understand that as a volunteer I am not covered by any state or federal wage and hour laws, nor am I eligible for workers compensation, unemployment insurance and benefits or any other benefit available to employees.
- I shall not sell or attempt to sell goods or services, request contributions, or solicit persons to sign or distribute petitions on hospital premises, unless I have the express permission of the Director of Volunteer Services.
- I understand that INTEGRIS Health offers medical services for treatment of illnesses, including but not limited to tuberculosis, hepatitis, and HIV, and I assume a risk that I might be inadvertently exposed to such diseases.
- I shall submit to initial examinations and annual retesting as necessary which may include skin test, chest x-rays, and appropriate lab tests and/or immunizations as conditions of my volunteer service.
- I release, discharge, and relieve INTEGRIS Health from any and all claims whatsoever of any nature arising as a result of my volunteer services and all related activities.
- I understand and agree that I will comply with all rules and standards of conduct that apply to hospital employees and independent contractors, including the hospital's policy on confidentiality which I have signed and submitted.
- I shall be punctual and conscientious, conduct myself with dignity, courtesy and consideration of others, and endeavor to make my volunteer service professional in quality.
- I agree to attempt to resolve any problems related to my volunteer service with my placement supervisor, (Volunteer Coordinator) and if unsuccessful, I will attempt to resolve any such problems with the Volunteer Director.
- I understand the Volunteer Coordinator or Volunteer Director reserves the right to terminate my volunteer status if I fail to follow policies, rules, and regulations; if I am absent without prior notice; or if I have unsatisfactory attitude or appearance.
- I understand I can be terminated for giving unsatisfactory service or for any other circumstance which, in the judgment of the Volunteer Coordinator or Volunteer Director, would make my continued services contrary to the best interest of the hospital.