



North Memorial

Annual Required Learning Packet for **Contracted Agency Staff**

Required Learning 2017

The expected time to complete this learning activity is 30 minutes.

North Memorial Medical Center

Required Learning 2017

This learning packet is for North Memorial Medical Center (NMMC) team members and others. It presents fundamental and important information that helps us create a safe and caring environment for our customers and team members. The information provided on various topics has been contributed by NMMC subject matter experts.

Directions

Agency Contractors:

1. Review this Learning Packet.
2. Sign and date the attestation page (*last page Annual Required Learning Packet*).
3. Return the signed attestation form to agency representative for placement in your file.
4. All of the above steps are required in order to be credited for packet completion.

If you have questions or any special learning needs please contact your agency operational lead / owner.

Agency Operational Lead / Owner:

1. Distributed to all contracted staff who may be assigned to interpreter at a North Memorial facility.
2. Collect signed attestation from contracted staff.
3. Maintain a copy of the signed attestation form in the contracted staff personnel file.
4. Upon request, provide a copy of the attestation form to North Memorial Medical Center within one (1) business day of the request. Requests will be based on random audits of interpreters who have provided services at one of our facilities.

North Memorial Medical Center Required Learning Packet Table of Contents

Subject	Page
NMMC Mission, Vision and Values	4
Protecting Our Customers Section	
The Patients' Bill of Rights	5,6
Grievances	6
Suspected Abuse, Neglected or Financial Exploitation	6
Patient at Risk for Suicide	7
Bariatric Sensitivity	7
Emergency Preparedness and Safety Section	
Emergency Numbers and Codes and Tasers	9
Evacuation Process	9,10
Fire Extinguisher Use	11
Telephone System Failure	11
Workplace Violence Prevention	11-13
Environmental Safety Section	
Radiation Safety	13
MRI Safety	13,14
Fragrance Free Environment	14
Respiratory Protection Plan and Tuberculosis	14,15
Infection Prevention Section	
Infection Prevention	16
Personal Food and Beverage Use	16
Hand Hygiene	16,17
Standard Precautions	17,18
Transmission-Based Precautions: Contact, Droplet, Airborne	18,19
Blood Borne Pathogens: Hepatitis B, Hepatitis C, HIV	20
Reporting Exposures	21
Corporate Compliance	22
Quality Program and Initiatives Section	
Quality Management System (QMS)	23
Communication Section	
On-Line Communication	24
Addendum:	
Attestation that Required Learning was Read and Understood	25

North Memorial Medical Center

MISSION, VISION and VALUES

OUR MISSION:

Empowering our customers to achieve their best health.

OUR VISION:

Together, health care the way it ought to be.

OUR VALUES

- Inventiveness:** We believe in solving problems creatively and thinking differently about what is possible.
- Accountability:** We believe every team member is empowered to meet our customer's needs including helping them make choices about their health.
- Relationships:** We create engagement with customers and team members through strong communication, partnering and respectful interactions.

Protecting Our Customers Section

Patient Bill of Rights and Patient Responsibilities

Each of us must ensure a health care ethic that respects the patient. All employed and contracted agency staff must be sensitive to cultural, racial, linguistic, religious, age, gender, sexual orientation and other differences, including the needs of persons with disabilities. Federal and state government law exists around a “Patients’ Bill of Rights”. The intent of the Patients’ Bill of Rights is to ensure that all regional activities are conducted with an overriding concern for the values and dignity of patients. Minnesota Department of Health and our accreditors scrutinize compliance with the Patients’ Bill of Rights.

The Patients’ Bill of Rights Includes:

- | | |
|--|---------------------------------------|
| 1) Information about rights | 12) Treatment privacy |
| 2) Courteous treatment | 13) Confidentiality of records |
| 3) Appropriate healthcare | 14) Disclosure of services available |
| 4) Physician’s identity | 15) Responsive service |
| 5) Relationship with other health services | 16) Personal privacy |
| 6) Information about treatment | 17) Grievances |
| 7) Participation in planning treatment | 18) Communication privacy |
| 8) Continuity of care | 19) Personal property |
| 9) Right to refuse care | 20) Services of the facility |
| 10) Experimental research and right to associate | 21) Protection and advocacy services |
| 11) Freedom from maltreatment | 22) Right to communication disclosure |
| | 23) Isolation and restraint |
| | 24) Treatment plan |

Patient Responsibilities:

To have the best possible treatment experience while someone is a patient, they are asked to take on some responsibilities such as:

Provide information about health status	Understand their health problems
Keep appointments	Know their caregivers
Be honest	Be considerate of others
Know their medications	Follow the treatment plan
Be tolerant/accepting of those who are different from them	Accept consequences of not following treatment plan

Along with these patient responsibilities, patients are being asked to participate in:

- Assessment and management of their pain.
- Creation of a safe environment for their health care like asking questions when they don’t understand what they have been told or need clarification on procedures or medication usage.
- Communication with caregivers to accurately inform them of medical conditions, medications or other health-related matters.

Patient Rights information is posted at key entrances to the NMMC and is included in the Patient Information brochure. The Patient Bill of Rights is available in large print and different languages from the Minnesota Department of Health website at <http://www.health.state.mn.us/divs/fpc/consinfo.html> (there is a direct link to this site from NMMC Intranet). For more info about the Bill of Rights contact the Patient Representative at 763-581-0780.

Grievances

Customers have the right to complain about the quality of their care. It is expected that the customer and family concerns are acted upon to ensure that customer's needs are met effectively and efficiently. Most complaints can be addressed quickly. If a team member cannot resolve a concern/grievance at the point of care, it should be referred to management. If management cannot resolve the concern, refer to the Patient Representative's Office at ext. 1-0780 or 763-581-0780. (After hours M-F, weekends and holidays, contact the Nursing Administrative Manager on pager 612-539-2899.) Please place issues in the Safety First Reporting System.

Grievances (formal complaints) may be filed with state agencies whether or not the customer has used NMMC's internal grievance process. Instructions for filing a grievance can be found in the North Memorial Medical Center customer Welcome Book and the Patient's Bill of Rights.

Suspected Abuse, Neglect or Financial Exploitation

Minnesota law requires all team members in a hospital are required to report **suspected** abuse or neglect (of an adult or child) or financial exploitation (of an adult), **as well as actual cases** of physical assault, rape or other sexual molestation and abuse or neglect (of an adult or child) or financial exploitation (of an adult). Any physical injuries that do not match explanation (bruises, broken bones etc.) and/or emotional distress (depression, stress, anxiety, panic attacks) could be signs of abuse or neglect. Any concerns along these lines expressed by the customer and/or family should be reported. For more information see the *Vulnerable Adults-Mandated Reporting* and *Child Abuse/Maltreatment Assessment and Reporting* policies and procedures.

- To report suspected cases of **vulnerable adult** abuse, neglect and/or financial exploitation call the Common Entry Point for Hennepin County at 612-348-8526, the Social Worker for the customer unit (see amion.com), or Care Management, ext. 14628 or 763-581-4628.

- To report suspected cases of abuse/neglect (up to 17 years of age), contact Hennepin County Child Protection at 612-348-3552 or the county in which the child resides. If you need assistance in reporting suspected **child physical abuse and neglect** (up to 17 years of age), or if you require a medical consult, you may call the Suspected Child Abuse and Neglect (SCAN) Team at ext. 14357 or 763-581-HELP (4357). A member of the SCAN team will assist you as needed.
- To report suspected cases of **sexual assault of children** 12 years of age and under contact Hennepin County Child Protection at 612-348-3552 or the county in which the child resides. You may call the SCAN team for assistance if required at ext. 14357 or 763-581-HELP (4357). For other cases, call Sexual Assault Resource Service at 612-873-5832.
- Screen all customers for current **domestic abuse**. Provide for private interview. If assessment of suspected domestic abuse by direct report from the customer experiencing current abuse, neglect or exploitation, with the customer's consent, refer patient to Safe Journey for an advocate at ext:13940 or 763-581-3940.

Patient at Risk for Suicide

All patients are screened for suicide risk by North Memorial team members upon entry to the ED or the customer care area. Assess customer and environmental features that affect suicide risk and address immediate safety and appropriate treatment setting needs. Customers are provided information to individuals at risk such as crisis hotline access.



Bariatric Sensitivity

Obesity is a complex, multifactorial chronic **disease** that develops from an interaction of genotype and the environment. Our understanding of how and why obesity develops is incomplete, but involves the integration of social, behavioral, cultural, physiological, metabolic and genetic factors. Over 65% of American adults are overweight or obese (BMI greater than 25).

A person who chooses weight loss surgery is:

- *someone who has struggled with their weight most of their lives.
- *someone who has tried diet after diet and has not been unable to get the weight off, or keep it off.
- *someone who may have been teased about their weight.
- *someone who is motivated to get healthy and live a long and happy life!

What can you do?

We must educate ourselves and each other about the stigma of obesity. We must hold ourselves accountable and hold our team members accountable to treat everyone equally. BE A PATIENT ADVOCATE. Point out inappropriate comments to others and challenge negative attitudes. Nobody deserves unkind remarks.



Emergency Preparedness and Safety Section

Emergency Numbers and Codes: In case of any emergency call *99 from any campus phone or hit the designated button in a patient care room. Off-campus areas should call their emergency number (911, 9-911).

NORTH MEMORIAL MEDICAL CENTER EMERGENCY RESPONSE

CODE RED	<p>FIRE OR SMOKE</p> <ul style="list-style-type: none"> Rescue anyone in danger Contain the fire by closing room and fire doors Alert by pulling the fire alarm Alarms will sound and location will be broadcast
CODE ORANGE	<p>INTERNAL/EXTERNAL DISASTER</p> <ul style="list-style-type: none"> Call *99 to report type of emergency and location. Hospital Incident Command System (IHICS) is activated Depending on the situation, Code Orange may or may not be broadcast. If you hear Code Orange broadcast, return to your assigned work area and follow directions of the person in charge Code Orange Information Line (763) 581-3900 may be called for additional information
CODE YELLOW	<p>SECURITY THREAT (Bomb threat, Suspicious Package, Hostage, etc.)</p> <ul style="list-style-type: none"> Stay calm and get as much information as possible Call *99 to report the security threat and location Safety&Security will broadcast and respond to the identified area If not involved, stay away from the area and keep visitors away
CODE GREEN	<p>AGGRESSIVE INDIVIDUAL – EMERGENCY ASSISTANCE NEEDED</p> <ul style="list-style-type: none"> Stay calm and get as much information as possible Call *99 to report an aggressive patient or visitor, give location Safety&Security will broadcast and respond to the identified area If not involved, stay away from the area and help keep visitors away
CODE BLUE	<p>ADULT/PEDIATRIC CARDIO PULMONARY RESPONSE (CPR)</p> <ul style="list-style-type: none"> Activate a Code Blue team by pressing a Code Blue button in patient room or by calling *99 for codes not in a patient room Code Blue Team will respond to identified area Provide appropriate intervention (initiate CPR) If Code Blue is called in your work area, return to area to assist with other patients/visitors
CODE PINK	<p>INFANT/CHILD ABDUCTION</p> <ul style="list-style-type: none"> Staff call *99 once confirmed that infant/child is missing Safety&Security will broadcast and respond to identified area All staff/volunteers monitor corridors and exits Do not approach individual Call *99 to report suspicious person(s)
CODE SILVER	<p>COMBATIVE INDIVIDUAL WITH A WEAPON</p> <ul style="list-style-type: none"> Call *99 to report an individual with a weapon, give location Safety&Security will broadcast and respond to the area with law enforcement as needed Stay away from the identified area Ensure safety of patients and visitors
RAPID RESPONSE TEAM	<p>PATIENT IN NEED OF IMMEDIATE MEDICAL ASSESSMENT</p> <ul style="list-style-type: none"> If a patient's condition rapidly changes and assistance is needed from a team of critical care clinicians, press the Rapid Response button in the patient room or call *99 and give location Rapid Response Team will be notified to respond to the identified location
SEVERE WEATHER ALERT	<p>SEVERE WEATHER ALERT (tornado, severe thunderstorm, etc.)</p> <ul style="list-style-type: none"> Weather warnings with imminent threat will be broadcast by Safety&Security Move and/or direct visitors & patients away from windows Patients who cannot be moved, should be turned away from windows and protected with pillows & blankets
CODE WALKER	<p>MISSING PATIENT (ELOPEMENT)</p> <ul style="list-style-type: none"> Call *99 to report a missing individual who is 18 years or older and on holds or suffers from conditions that may prevent him/her from making rational decisions or cause them to wander away Monitor corridors and exits for patient Safety&Security will broadcast and respond to identified area Call *99 to report the location of the found individual

A *99 can be called from any telephone or Vocera by saying "Call Star 99".

More About Code Pink

- A team member first aware of an actual or attempted infant/child abduction needs to call *99 and advise operator of Code Pink and location.
- State your name and call back extension. Remain on hold with the operator.
- All departments must deploy team member(s) to observe the nearest exits and stairwells and report any sighting by calling *99.
- Unit/department team members from the area of the announced abduction will report immediately to their area to assist in response efforts.
- Do a headcount of all children in your area.
- Department team members, not watching exits and doorways, must check all dept. spaces including rooms, bathrooms, closets and garbage cans for unauthorized person or missing child.
- Team members should not attempt to apprehend a suspected abductor.
- If a team member can maintain personal safety, you may follow at a distance to note route of escape, physical characteristics and clothing and possible vehicle license number.
- All team member(s) should remain in their department or watch stair/exit locations until "Code Pink All Clear" is announced overhead.

Use of Tasers

NMMC policy states that use of a TASER against an individual is permitted only under extreme situations where serious harm to an individual, grave injury and/or death would result from the individual's actions.

Security staff must use their discretion in determining whether to deploy a TASER against an individual. Use of a TASER in any situation must be in accordance with the "Security Use of Force" and "Taser" policies, and the officer's training.

In addition TASERS should not be used in the following situations:

- On individuals at increased risk of serious injury from falling due to their physical position (e.g. high above the ground or near sharp, or dangerous objects).
- On small children, and frail or elderly individuals
- In the presence of flammable liquids, fumes, or vapors to include oxygen enriched environments.

Evacuation Process

- Know at least two ways (routes) out of your area in the event one route cannot be used. Move people in immediate danger to the next safe place (refuge area) on the same level/floor, which is called horizontal evacuation.
- Move persons who can walk first. Know the location of and how to use equipment (e.g., wheelchairs, carts, evacuation chairs) that can be used to evacuate

patients/persons. Provide special assistance to persons with a disability or special needs.

- Check victims/patients after moving them to a safe area. Make sure you can account for everyone. Count heads.
- As directed by the hospital administrator in charge or other authority, move person down one or two levels/floors (vertical evacuation) or out of the building (external evacuation).

Fire Extinguisher Use



- If there is ever a need to use a fire extinguisher make sure you know where the nearest extinguisher is located in your area. To use a fire extinguisher:
 - Pull the pin/ring by twisting and pulling
 - Aim the nozzle/horn/hose at the base of the fire (from 10 feet)
 - Squeeze the operating handles together to discharge the extinguisher agent
 - Sweep the nozzle from side-to-side/back and forth



Telephone System Failure

Telephone System Failure: Essential areas have the 511E Intercom system to communicate between departments and/or Emergency Power Failure Phone, which are either all RED or have a RED handset cord, to make outgoing calls and take incoming calls. Team members may also use the computerized tube system, portable walkie-talkies, and runners/messengers.

Workplace Violence Prevention

What is Workplace Violence?

- Workplace violence (WPV) is any form of actual violence, or threats of violence against healthcare workers; this can be physical, verbal, or both (Centers for Disease Control and Prevention, [CDC], 2014).
- Research indicates that healthcare professionals are at greater risk when compared to other professions (Trossman, 2010).
- There are four types workplace violence: criminal intent, customer/client violence, worker-on-worker violence, and personal relationship violence (CDC, 2014).
- One of the biggest reasons why the data on violence experienced by healthcare workers is so inconsistent is that it is often underreported (CDC, 2014). This occurs because healthcare staff feel that it is “just part of the job” (CDC, 2014). If it is not reported, organizations do not realize the magnitude of the problem.

- The employee intranet contains policies and procedures as they relate to workplace violence to answer these questions.
- *Activate Code Green, Code Yellow, or Code Silver via *99 or code button in room if assistance is needed immediately.*
- Report events in the Safety First Reporting System under the Safety and Security Icon.
- It is always better to report an incident that you are unsure of versus not reporting.
- Team members will not be retaliated against for reporting any type of violence, or participating in an investigation of a violent act. Discrimination against victims or reports of violence will not be tolerated.
- NMHC will not interfere with or discourage a healthcare worker if any team member wishes to contact law enforcement or the Minnesota Department of Health commissioner regarding an act of violence.
- NMHC has a Workplace Violence Steering Committee that is dedicated to monitoring and improving our Workplace Violence Prevention efforts. See the Workplace Violence Prevention intranet page for contact information.

De-escalation Techniques

- Be empathetic and nonjudgemental
- Respect personal space
- Use nonthreatening non-verbals
- Avoid overreacting
- Focus on feelings
- Ignore challenging questions
- Set limits
- Choose what you insist upon wisely
- Allow silence for reflection
- Allow time for decisions
- Be prepared, know your surroundings and have an escape plan
- Activate Code Green, Code Yellow, or Code Silver via *99 or code button in room if assistance is needed immediately and you are able

Response to an Active Shooter: Run! Hide! Fight!

Run

- Use your escape plan! Get out at the first sign of danger.
- Leave belongings behind.
- Take others with you if possible. You may need to leave wounded behind. Remember, you cannot help others if you become a victim yourself.
- Try to prevent others from entering.
- Keep your hands visible.
- Follow orders of Law Enforcement.
- Call 911 when safe to do so. Keep in mind in a crowded location that others may be doing the same.

Hide

- Find a place to hide where shooter is less likely to find you.
 - Plan this out ahead of time in your workplace.

- If possible determine a place that will not trap you.
- Stay out of the shooter's view.
- Lock the door, barricade with heavy furniture if possible.
- Hide behind heavy objects (desks, file cabinets, etc.)
- Remain quiet. Silence your cell phone ringer and other sources of noise.
- Dial 911 if possible.
 - If you cannot talk just leave the line open.

Fight

- As a last resort to save your life you may need to attack the shooter.
- Act as aggressively as possible!
- An attack by a group is more effective than by a single person (remember United Flight 93).
- Improve weapons (chair, laptop, paperweights, sharp objects)
- Throw things
- Yell and shout, try to disorient the shooter.
- Commit to your actions!

Radiation Safety

There are two primary sources of ionizing radiation within the healthcare setting: Equipment and Radioactive Materials.

Equipment gives off radiation only during the time of an x-ray exposure. Some examples of equipment that emit radiation are: General Radiology, C-Arms, O-Arm, CT, Interventional Radiology, Fluoroscopy, and Mammography.

Radioactive Materials are utilized in the Nuclear Medicine and Positron Emission Tomography (PET) departments. This involves administering a radiopharmaceutical to the patient so internal structures can be imaged.

Radiation protection involves effective measures employed by radiation workers to safeguard customers, team members, and the general public from unnecessary exposure to ionizing radiation. The three basic precautions involved in radiation protection are: Time, Distance, and Shielding. In most circumstances, an individual should spend the least amount of time in the room when an exposure is being made, should stand as far away from the radiation source as possible while still maintaining patient safety, and should always wear lead shielding when in the room during an x-ray exposure.



MRI Safety

Magnetic Resonance Imaging (MRI) is not ionizing radiation; instead it utilizes a very strong magnet and radiofrequency waves to image internal structures. All individuals near the MRI need to be screened to determine if they are safe to be in the area. MRI has secure zones that cannot be accessed without clearance by MRI personnel. All objects must be evaluated and

deemed to be MRI safe before they are brought into the MRI area. The magnet is always on, whether a customer is being scanned or not.

North Memorial is a Fragrance Free Facility

Perfume, cologne, scented soap, hair products and lotions are **NOT** to be worn by team members and contracted staff within the hospital (scented deodorant is permissible). Recognizing that sensitivity to fragrance is not limited to customer care areas; this policy applies to all team members,

Respiratory Protection Program

North Memorial Medical Center established a Respiratory Protection Program to assure compliance with State and Federal requirements, specifically OSHA Standard 29 CFR 1910.134, and to protect the health of workers who may use respirators. OSHA has specific requirements that must be met by the Respiratory Protection Program. These include a medical evaluation, annual training and fit-testing, and the filing of appropriate documentation for those team members who wear respirators. Fit-testing for respirators is determined by annual risk-assessment and conducted by the Team Member Health Center.

Team members and contracted staff are required to wear respiratory protection when working with patients in Airborne Precautions. Diseases known to be spread via airborne route include, but are not limited to:

- Mycobacterium tuberculosis (MTB)
- Measles
- Varicella (chickenpox)
- Disseminated zoster (shingles)
- Smallpox
- Viral Hemorrhagic Fever (VHF)
- Sudden Acute Respiratory Syndrome (SARS)
- Other emerging communicable agents as directed by the Minnesota Department of Health

Team members and contracted staff have two options of respiratory protection available to them at NMMC.

1. N95 respirator mask (fit-testing required). N95 respirator masks are available in clean supply areas of units with negative airflow
2. Powered Air Purifying Respirator (PAPR), which is an air-purifying respirator that uses a battery operated motor to force ambient air through air-purifying cartridges into the hood



N95 respirator mask



PAPR and PAPR hood



Tuberculosis

Pulmonary Tuberculosis (TB) is a disease transmitted by infectious particles expelled by a person who has TB disease in their lungs or throat. If a patient has signs or symptoms of Pulmonary Tuberculosis AND risk factors for TB, place the patient on Airborne Precautions immediately until further assessment can be completed. Infection Prevention should be notified when a patient is placed on Airborne Precautions.

Signs & Symptoms

Chest X-Ray with upper lobe infiltrated/cavitary lesion (Any abnormal Chest X-Ray in HIV+ patient)	Fever	Hemoptysis	Pleuritic chest pain
Unexplained/new cough for more than 3 weeks	Night sweats	Fatigue	Unexplained weight loss

Risk Factors

Known TB exposure	Immunocompromised
Foreign born in country, or travel to country where TB is endemic	Homelessness
Residents of group settings: long term care, correctional facilities	History of positive tuberculin skin test (PPD), T-spot
IV drug use	History of active or latent TB, treated or untreated

Infection Prevention

Introduction

Any individual who enters a health care facility is at risk for infection. The promotion of health depends on the provision of a safe environment. The purpose of infection prevention is to identify and reduce the risk of infections among customers, team members, providers, contracted staff, volunteers, students and visitors.

What does “Infection Prevention” Mean?

It means preventing illnesses that can be spread in the health-care setting. This is accomplished through many types of activities, including but not limited to, monitoring infection occurrences in customers and team members, developing and implementing infection prevention policies and procedures, education, safety program, quality improvement activities, monitoring compliance with regulatory requirements, evaluating the environment, and consulting.

Personal Food and Beverage Use

In accordance with OSHA’s Blood borne Pathogen Standard, food and drink shall not be kept in refrigerators, freezers, shelves, cabinets or on countertops or bench tops where blood or other potentially infectious materials are present. .

Food or drink may be kept in break rooms, conference rooms, offices and other unit-specific areas as designated by Infection Prevention.

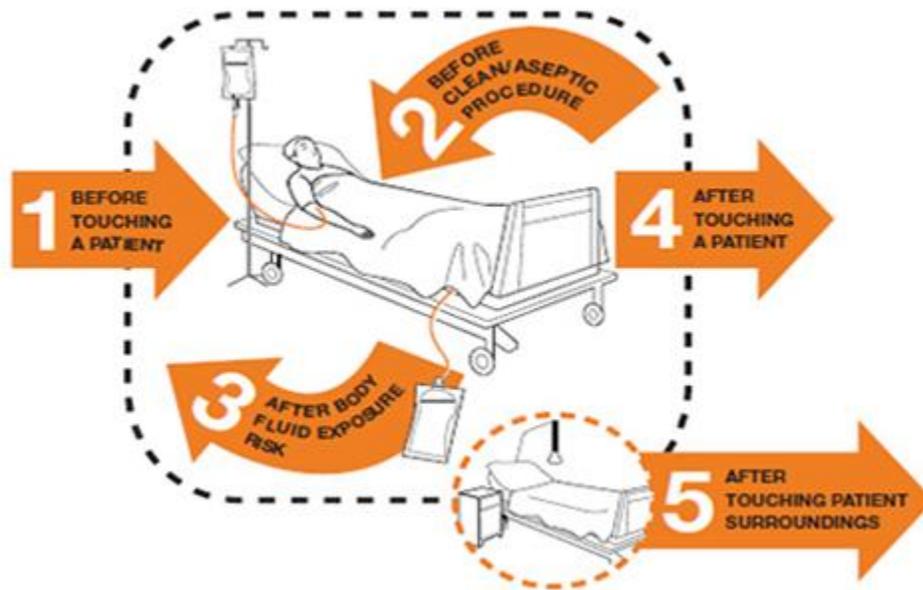


Hand Hygiene



Hand hygiene is the single most important procedure for preventing healthcare acquired infections. (CDC). All employed and contracted staff, regardless of job role, must follow the facility hand hygiene expectations. North Memorial hand hygiene performance compliance is observed and reported monthly as a high priority Quality Indicator for the organization.

North Memorial has adopted the World Health Organization “5 Moments of Hand Hygiene”



Waterless alcohol rubs (foam in foam out) are approved for most hand hygiene situations. If hands are visibly soiled, washing with soap and water is necessary.

Soap and water washing is also required when a customer is in special contact precautions for *Clostridium difficile*. Team members are asked to wash hands after using the bathroom in the work setting.

Customers and families should also be educated and asked to practice hand hygiene with their cares and before eating and drinking in the hospital environment.

Standard Precautions

Standard precaution practices, asks employed and agency staff to anticipate what exposures might be encountered during patient cares or within the work environment.

All team members potentially carry infectious agents. Team members are asked to put on the “right” stuff, to protect eyes, nose, mouth and clothing any time there is anticipated contact with excretions and secretions, and blood and body fluids.

Personal Protective Equipment (PPE) is necessary to prevent exposures and transmission of diseases and must be available for team members providing customer care.

- **Gloves** are required when touching blood, body fluids, secretions, excretions, mucous membranes, or non-intact skin. Contaminated gloves are removed before touching non-contaminated items and surfaces like supply drawers and keyboards.

- **Facial protection** (eyes, nose, mouth), a surgical mask with a visor shield is needed to protect mucous membranes during activities that are likely to generate splashes or sprays of blood/body fluids.
- **Gown** is worn to protect skin and prevent soiling of clothing during activities described above.

Practicing standard precautions will reduce the risk of transmission of microorganisms (germs) from both known and suspected sources of infection in our healthcare settings. PPE is removed after use and before leaving the environment in which it was worn.

Transmission-Based Precautions

For some communicable illnesses, additional precautions are needed in addition to standard precautions. These precautions are based on transmission route of infectious organism and provide sufficient protection from exposure. Team members and customers are alerted to additional precautions by signage on the patient's door. Signs are available on every inpatient nursing unit. Team members may also be alerted to precautions through the electronic medical record. A classification of precautions based on organism and disease type can be found in the Infection Prevention Isolation Precautions policies (found on PolicyTech: Quality>Infection Prevention).

Transmission based precautions include:

- **Contact precautions:** Use gloves and a gown for contact with patient or environment.



(Contact/Special Contact Isolation)

- **Special Contact precautions:** wear gloves and gown, wash hands with soap and water (not alcohol-based foam) after caring for a customer with known or suspected *C. difficile*. Use bleach wipes to disinfect medical equipment.
- **Droplet precautions:** Use surgical mask for all room entry. A surgical mask with eye protection should be worn for influenza. Keep the door closed. An N95 respirator should be worn while performing aerosolizing procedures (e.g. administering a nebulizer).



(Droplet Isolation)

- **Airborne precautions:** Place the customer in a negative ventilation room and use an N95 respirator or PAPR for all room entry. Keep the door closed.



(Airborne Isolation: N95 Respirator, PAPR back, PAPR front)

- **Special Airborne precautions:** Place the customer in a negative ventilation room. Team members who have immunity to pathogen (e.g. measles, chickenpox) are not required to wear respiratory protection. If immune status is unknown, an N95 respirator or PAPR is required for all room entry.
- **Full Barrier precautions:** Place the customer in a negative airflow room. Full skin coverage is required for room entry and includes: a coverall (Tyvek) suit with built-in shoe covers, double gloves, eye and face protection (e.g. PAPR). See photo next page.



**(Full Barrier Isolation)
Blood borne Pathogens**

	Hepatitis B (HBV)	Hepatitis C (HCV)	Human Immunodeficiency Virus (HIV)
About the Disease	A serious disease caused by a virus that attacks the liver. It can cause lifelong infection, cirrhosis (scarring) of the liver, liver cancer, liver failure, and death.	Disease of the liver caused by the hepatitis C virus. HCV is primarily spread by exposure to human blood. Disease progression similar to Hepatitis B.	The virus that causes AIDS, is a blood borne pathogen that presents a small but real risk to health care workers.
Symptoms	Symptoms include fatigue, nausea, vomiting, loss of appetite, abdominal pain, and jaundice. About 30% of persons infected have no signs or symptoms.	Some symptoms may include fatigue, dark urine, loss of appetite, abdominal pain, and jaundice. 80% of persons infected with HCV have no signs of symptoms.	HIV infection is a complex disease that can be associated with many symptoms. The virus attacks the immune system, eventually leading to severe infections and complications and a condition known as AIDS.
Vaccine Availability	Hepatitis B vaccine is available for all age groups to prevent Hepatitis B virus infections.	There is no vaccine to prevent Hepatitis C.	There is no vaccine to prevent HIV.
Risks	Without the vaccine, the risk after an exposure to HBV infected blood is 6-30%	The risk for infection after a needle stick to HCV infected blood is about 1.8%.	The risk of becoming infected by an exposure to the blood or body fluids of a patient infected with HIV is about 1 in 300.

Prevention

- Treat all blood and body fluids as potentially infectious and use standard precautions including use of barriers—gowns, gloves, masks, eye protection that is appropriate to the task if exposure to blood/body fluids is possible.
- Get your Hepatitis B vaccinations
- No recapping of needles
- Dispose of sharps, needles and infectious waste in red biohazard containers
- Use safety devices whenever possible
- Do not attempt to pick up broken glass without a tool
- Secure blood and body fluid spills – Call Environmental Services for assistance when spill is large or uncontained
- Treat all blood and body fluids as potentially infectious and use Standard precautions
- Report exposures immediately to your manager/supervisor

Reporting Exposures

Vaccine-Preventable Diseases

Immunity to rubella (German measles), rubeola (measles), mumps and varicella (chickenpox) is required and reviewed on hire. Contact Team Member Health Center if you have questions about your vaccination status. Exposures to non-vaccine-preventable disease, such as tuberculosis, should be reported to Team Member Health Center.

Blood/Body Fluid Exposure Incident

A specific exposure-- to the eye, mouth, other mucous membrane, non-intact skin or parenteral exposure to blood or other potentially infectious materials that results from the performance of a team member's duties.

Blood/Body Fluid Exposure Protocol: Care of Exposure Site and Reporting

Exposures are reported as soon as possible to the appropriate department as listed below. Doubtful and Non-Parenteral exposures are reported and blood-borne pathogen screening will be implemented at provider or individual request.

1. Hospital Team Members, providers and volunteers report to the Team Member Health Center (0700-1530) or Emergency Department during all other hours
2. EMS/First Responders who are not North Memorial Team Members report to the Emergency Department.
3. Non-North Memorial staff report to the Emergency Department. This includes contracted workers, and allied health professionals. Exposures of non-North Memorial staff should also be reported to Infection Prevention.
4. Customer-to-Customer exposures are reported to and managed by the Infection Prevention Department.
5. Hospital Team Member-to-Customer exposures are reported to and managed by the Infection Prevention Department.
6. Customer-to-Good Samaritans are reported to and managed by the Infection Prevention Department.

Care of Exposure: Consent for Testing and Counseling for Hepatitis B and C or HIV

1. Exposed NMMC team members are offered testing after consent and counseled according to the protocol for management of Blood/Body Fluid Exposures
2. Exposed customers are tested and counseled according to the policy for management of *Blood/Body Fluid Exposures* policy.
 - a. The *Admission Consent for Treatment* serves as consent for blood-borne pathogen screening of exposure incidents.
 - b. Customers who have not signed the *Admission Consent for Treatment* are informed of the exposure:
 - Document in a note in the electronic health record that the customer has been informed and verbalizes understanding.
 - If unable to inform the customer, the next of kin is notified, and document in a note in the electronic health record.
 - If the next of kin cannot be notified, testing without notification is permitted and documented in a note in the electronic health record.
3. Test results are maintained by the testing laboratory as required by law and are reported to and maintained by the following:
 - Team Member Health Center for team member exposures.
 - Infection Prevention Department for all positive patient results.

- The Minnesota Department of Health for all positive results according to Minnesota Statutes 4605.7040 and 4605.7080.

In the event the source or exposed individual refuse testing, notify the Infection Prevention Department for recommendations regarding exposure management.

Corporate Information/Workplace Conduct Section

Compliance is everyone's responsibility!

These accountabilities are included in every North Memorial team member's job description:

- Recognizes and complies with legal regulatory, accrediting, and
- procedural requirements related to area of responsibility.
- Understands and follows principles and standards as outlined in North Memorial's *Corporate Code of Conduct*.
- Protects customer/team member privacy and only accesses customer/team member related information as needed to perform job duties.
- Reports violations or areas of concern to supervisor or Corporate Compliance Officer via established methods of communication.

The resources for reporting violations or areas of concerns are:

- Leave a confidential message on the Helpline at 763-581-4670

You may choose to leave an anonymous message

- E-mail compliance@northmemorial.com

COMPLIANCE: DOING THE RIGHT THING!!!



Quality Programs and Initiatives Section

Quality Management System

Quality Standards and Regulation

- North Memorial Medical Center and our Comprehensive Stroke Program are accredited by DNV-GL Healthcare based in Ohio and Texas.
- DNV-GL, the Joint Commission and the American Osteopathic Association are granted federal authority for hospital survey and accreditation.
- CMS Conditions of Participation are standards for health care services that all healthcare organizations must be surveyed against for compliance in order to care for most patients under federal and state programs.
- The National Integrated Accreditation for Healthcare Organizations (NIAHO) standards are developed by DNV-GL to incorporate the CMS Conditions of Participation requirements and for hospitals to use for accreditation.
 - CMS COP + ISO = NIAHO
- ISO 9001 Quality Management System standards or clauses are internationally recognized standards for quality process design, management, and improvement, integrated with the NIAHO standards for our accreditation program.

The Quality Management System (QMS) is the framework by which we monitor and continually improve our processes within the organization. QMS is comprised of the CMS Conditions of Participation/NIAHO Standards, the ISO 9001 Standards and our mission, vision and values.

We perform internal audits to assess the strength and compliance of our quality system. This is another way to say that we are “doing what we say we are doing” as reflected in our policies and procedures. Specially trained internal auditors focus on high risk processes in each department as a way to proactively identify areas of vulnerability within our organization. This allows us the time to fix our process so that it matches procedure/policy.

One aspect of our ISO standard is that we continually strive to improve our processes. North Memorial’s basic approach to improvement or project implementations is the **PDSA cycle**:



- **Plan** the improvement
- **Do** the improvement
- **Study** the results of implementation
- **Act** on findings to continuously improve

Communication Section



“On-Line” Communication

When using Social Media, non-corporate email/software, personal handheld devices, or any on-line communication we have an ethical and legal responsibility to:

1. Never discuss customer information over social media services e.g. cell phone text message, Facebook, Twitter, Instagram, etc.
2. Never take pictures or send email or text messages with customer information over personal phones/hand held devices.
3. Do not disclose customer information in any email system other than our corporate Outlook, and even then do not send to any external recipients.
4. Never include a customer name in the subject line of any email.

**Thank you for taking the time to read the 2017
Required Annual Education!!!!**

Attestation for North Memorial Medical Center's Annual Required Learning Packet

I acknowledge having received and read a copy of the 2017 North Memorial Medical Center Required Learning Packet. By signing this attestation I am acknowledging that:

- I understand the information presented
- I am responsible for working safely within the facility
- I know who to contact or resources available to obtain more information
- I know who to contact to report unsafe conditions

Date: _____

Signature: _____

Print Name: _____