

Welcome to Cone Health Orientation



Who Are We?

We are the **8,200 employees** who form the foundation of our organization through our commitment to the Cone Health Mission, Vision and Values.



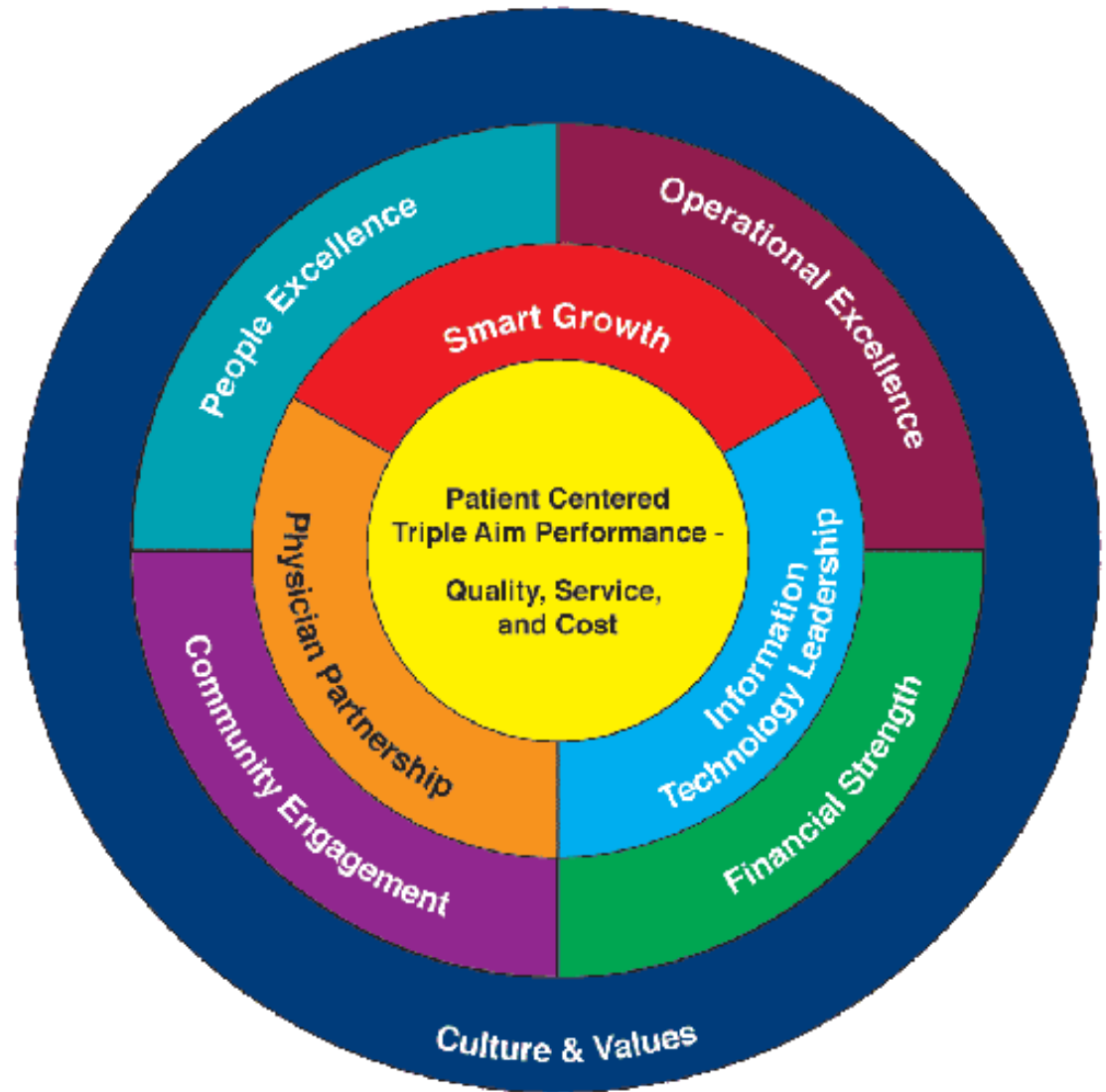
Our Mission and Vision

Our Mission

We serve our communities by preventing illness, restoring health and providing comfort, through exceptional people delivering exceptional care.

Our Vision

Cone Health will be a national leader in delivering measurably superior healthcare.



Our Expectations

To provide the best healthcare possible, we believe that **everyone** must be committed to the Cone Health **Values** and **Standards of Behavior**.



Our Values

OUR VALUES

AT CONE HEALTH, WE VALUE AND ARE ACCOUNTABLE FOR:

Caring for Our Patients

We provide exceptional quality compassionate care and service in a safe and respectful environment.

Caring for Each Other

We appreciate each other through honest communication and respect. We inspire ongoing learning, pride, passion and fun.

Caring for Our Communities

We engage our communities with integrity and transparency. We embrace our responsibility to promote health and well-being.



Our Standards of Behavior

Professional Appearance

- Wear nametag at all times.
- Comply with dress code policy.

Positive Attitude

- Acknowledge the presence of patients and visitors.
- Don't conduct personal and non-emergent conversations around patients and family members.



Our Standards of Behavior

Communicate with Compassion and Courtesy

- Address all customers by their names, not room numbers.
- Avoid terms such as “Honey” and “Sweetie.”
- Acknowledge patient complaints and concerns.

Clean/Safe/Attractive Environment

- Keep our workstation and patient rooms neat and clean.



Our Standards of Behavior

Anticipate Needs

- Assist anyone who appears lost.
- Ask “Is there anything else I can do?” before leaving the room.

Privacy and Confidentiality

- When entering a patient room, knock and wait for a response.
- Identify yourself.
- State the purpose of your visit.



HIPAA and Corporate Compliance

These are laws and regulations students and faculty should know.

HIPAA = Health Insurance Portability and Accountability Act



HIPAA and Corporate Compliance

- HIPAA is a federal law.
- **Any information about a person's healthcare treatment or payment plan that allows you to identify the individual is **Protected Health Information (PHI)** by HIPAA.**
- **Any information that can be used to figure out an individual's identity, such as an account number or health plan enrollment number is also **Protected Health Information (PHI)**.**



HIPAA and Corporate Compliance

Confidentiality is more than a legal and regulatory issue.

It is:

- A basic show of **respect** for our patients and employees.
- A **trust** issue. Our patients must be able to trust our Health System to protect their medical information from inappropriate access.



HIPAA and Corporate Compliance

Did you know?

Within the Electronic Medical Records systems,

ACTIONS CAN BE TRACKED.

- Each time a patient's record is accessed
- Which parts are accessed
- Who accesses a record
- How long a record is accessed

Health Information Management (Medical Records) also tracks who accesses paper records.



HIPAA and Corporate Compliance

What Information Can YOU Access?

It must be:

- Information to perform your duties as a student.
- Patient must be in your care.

You CANNOT Access

- Medical records of friends, family, high-profile patients, other employees or your own record.
- Former patients, even to see how they are progressing.

Remember: This information is **Protected Health Information (PHI)** and not needed for your duties.



HIPAA and Corporate Compliance

If a student or faculty member needs his/her medical information or that of a family member, he/she **MUST** complete a **Release of Information Form** and submit it to Health Information Management.



HIPAA and Corporate Compliance

What Information Can You Share?

Unless the patient objects, it is OK to share:

- Patient's name, room number and condition with clergy and those who ask for the patient by name in the hospital.
- Names that have "XXX" in front of the name indicates strict privacy. When someone asks for that person by name, tell them there is no record of that person being in the facility.
- PHI can be shared with the American Red Cross for disaster relief purposes and for military emergency messages.



HIPAA and Corporate Compliance

When Can Information Be Given Without Prior Consent?

- In medical emergencies (life or death) when there is no one available to give consent.
- If there is a possibility of abuse and neglect, healthcare workers follow legal guidelines for reporting (follow Health System policy).
- If there is a communicable disease, it must be reported to public health agencies.
- In verifying medical treatment for insurance claims/Medicare payments.
 - For subpoenas or court orders.



HIPAA and Corporate Compliance

Ask yourself this question:

Can I identify the patient from the information shown?

If the answer is “yes,” then this patient care information must be hidden from public view.



HIPAA and Corporate Compliance

Special Note

At Cone Health Behavioral Health Hospital, it is a **violation** of the patient's rights to say that any patient is in the facility.



HIPAA and Corporate Compliance

Some Reasonable Safeguards to Protect PHI

- Place charts and reports facedown.
- Log off before leaving the computer.
- Avoid discussing patients in public areas (elevators, cafeteria, hallways).
- Place census lists in an area not visible to the public.



HIPAA and Corporate Compliance

Incidental Uses and Disclosures

- PHI is **communicated without intent** while performing normal and permitted activities.
- These **cannot be prevented using reasonable measures** and are **limited in nature**.



HIPAA and Corporate Compliance

How to Prevent Violations?

- Keep telephone calls and oral reports confidential.
- Protect computer passwords.
- Verify fax numbers.
- Remove patient names or other information that identifies a patient before recycling papers.



Use the identified Shred containers/Use a heavy black marker

- “De-identify” other patient materials – such as armbands – before throwing away.

Place in a secure container for disposal or cut them into small pieces.



HIPAA and Corporate Compliance

Written Consent

- Get the patient's **written consent** before you give out information from the medical record.
- Contact Health Information Management for guidance.
- Refer to Cone Health's policies on uses and disclosures of Protected Health Information.



HIPAA and Corporate Compliance

How to Say “No” with a Smile

- “I can’t talk about it. It’s private.”
- “We are required to protect the patient’s privacy.”



HIPAA and Corporate Compliance

HIPAA Violations

- Patient charts left on open Wallaroos.
- Discussions about patients in hallways.
- Reports left on fax machines and printers.

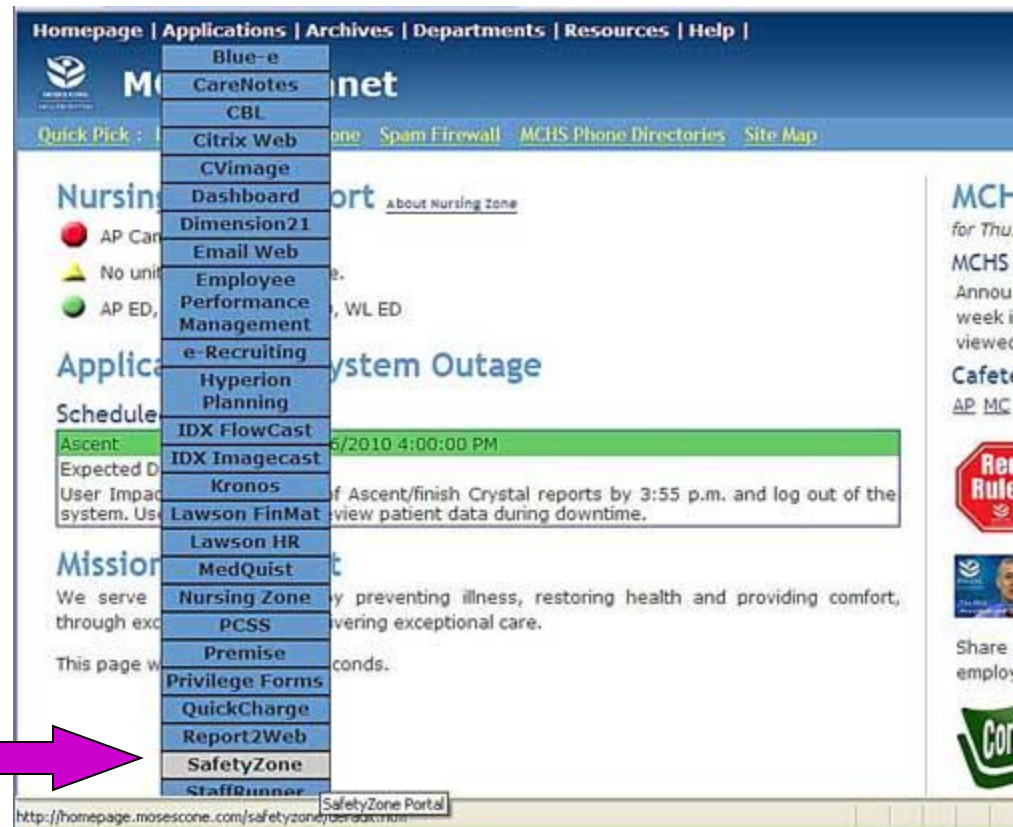


HIPAA and Corporate Compliance

Report Privacy Violations

- Reports of a privacy violation are entered into the electronic Safety Zone Portal (SZP).

Discuss first with your instructor, charge nurse or Cone Health Privacy Officer



Homepage | Applications | Archives | Departments | Resources | Help |

Blue-e
CareNotes
CBL
Citrix Web
CVimage
Dashboard
Dimension21
Email Web
Employee Performance Management
e-Recruiting
Hyperion Planning
IDX FlowCast
IDX Imagecast
Kronos
Lawson FinMat
Lawson HR
MedQuist
Nursing Zone
PCSS
Premise
Privilege Forms
QuickCharge
Report2Web
SafetyZone
StaffRunner

Quick Pick :
Spam Firewall
MCHS Phone Directories
Site Map

Nursing Zone
AP Car
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SafetyZone Portal
http://homepage.mosescone.com/safetyzone/portal.aspx

Safety Zone Portal



HIPAA and Corporate Compliance

EMTALA: What Is It?

- It is a federal law.
- EMTALA: **Emergency Medical Treatment and Active Labor Act**
- Every patient who **comes to the Emergency Department** requesting **emergency medical care** gets evaluated:
 - By a qualified individual at Cone Health
 - Regardless of the individual's ability to pay
- If there is an emergency condition, the patient is treated or **transferred** to another hospital with specialized care.



Also known as COBRA and Antidumping Act



HIPAA and Corporate Compliance

Safe Medical Devices Act (SMDA)

Medical devices include anything, other than drugs, used in a patient care or diagnostic setting such as:

- Beds
- Rehab Equipment
- Implants
- Bandages
- Infusion Pumps
- Lab Devices
- Defibrillators
- IV Sets
- Wheelchairs
- Lift Equipment
- Monitors
- Catheters



HIPAA and Corporate Compliance

Safe Medical Devices Act (SMDA)

Federal law requires a **report** of all incidents where there is a reasonable suspicion that a medical device caused or contributed to a patient's

- Serious injury
- Serious illness
- Death

Incidents are reportable if they:

- Require surgery or medical intervention
- Result in permanent impairment of a body function

OR

- Permanently damage a body structure



HIPAA and Corporate Compliance

Safe Medical Devices Act (SMDA)

If a patient is injured by a medical device, you should:

1. **Take care** of the patient's immediate needs.
2. **Remove** the device (save all settings and disposables)
3. **Label** device – “Do not use” and include date and time
4. **Alert** your supervisor
5. Complete a **Safety Zone Portal (SZP) report**



HIPAA and Corporate Compliance

Important Compliance Issues and Definitions

- **Fraud** is intentionally filing an incorrect claim to state or federal government for payment.
- **Abuse** is accidentally filing a claim that you should have known was incorrect.
- **Anti-kickback laws** govern issues such as paying for referral of patients or accepting inappropriate gifts.



HIPAA and Corporate Compliance

Federal False Claims Act (FCA)

It is a crime for any person or organization to knowingly make a false record or file a false claim with the government for payment.

No proof of specific intent to commit fraud is required.

Code	Type	Rate	Min
-1454	Direct Day		1
-9750	Direct Day		1
-1454	Direct N/Wkd		2
-1454	Direct Day		12
-1220	Direct Day		1
-1454	Direct Day		2
-4501	Direct Day		1
-0300	Direct Day		26 Minutes



HIPAA and Corporate Compliance

What Is a Violation of the False Claims Act?

- Providing services such as **drugs, oxygen or X-rays without a documented physician order** and allowing billing to occur for those services.
- Caregivers **without current licensure** and required certifications.



HIPAA and Corporate Compliance

Gifts from Patients

- Students cannot accept gifts, tips, money or other gratuities from patients and/or their families.
- To allow the patient to show appreciation for care, small tokens such as cards, flowers, plants or candy may be accepted, but they are discouraged.
- Patients who would like to honor a student should be referred to the Office of Fund Development.

The screenshot shows the Cone Health website's Charitable Giving page. The top navigation bar includes links for Home, Job Opportunities, and Medical Services, along with a search bar. The main content area features a large image of a woman and two children, with the headline "Help Us Create Exceptional Care" and a testimonial from Missy Akin. Below the image is a "Donate Now" button with options for "Online" and "By Mail". The left sidebar contains a menu with links for "For Patients", "For Visitors", "For the Community", "Online Tools", and "Charitable Giving". The "Charitable Giving" section lists various options such as "Where to Give", "Ways to Give", "Donor Stories", "Giving Recognition", "Donor Report", "News and Events", "Why Give?", "Donor Bill of Rights", and "Contact Us". The bottom right corner features a "Exceptional Giving Newsletter" sign-up box.



HIPAA and Corporate Compliance

Workplace

- **Harassment** – Sexual harassment or any form of physical, mental or emotional abuse will not be tolerated.
- **Respect the rights of others.**
- **Be careful not to tell inappropriate jokes.**



HIPAA and Corporate Compliance

Consequences if Students and/or Faculty Don't Comply?

- School could lose clinical privileges
- Fines and/or imprisonment
- Cone Health can lose its Medicare and Medicaid funding and ability to treat these patients



HIPAA and Corporate Compliance

Questions or Concerns?

- Talk to department director
- See Compliance and Privacy (HIPAA) information on the Intranet Homepage under Resources
- Call the Compliance Hotline – **832-8888**
- Call toll free – **866-506-8890**
- Call the Privacy Line – 832-7075
- Call the Compliance/Privacy Officer – **832-7073**

If you have questions, contact Karen Moorefield at 336-951-4678 or karen.moorefield@conehealth.com



Infection Control

Hand Hygiene

The **expectation** is that each healthcare worker (including students) will perform proper hand hygiene whether wearing gloves or not:

- **Before** touching a patient or his/her environment.
- **After** touching a patient or his/her environment.



Infection Control

Hand Hygiene

Cone Health policy:

Only use alcohol gel / foam provided by Cone Health, or soap and water.



Best Practice



Gel In...

...Gel Out

Hands Soiled



Gel In...

...Wash Out



Infection Control

Alcohol-Based Gel

- ¼ the time
- Waterless
- Less dryness
- Improves compliance
- Kills 99.9% of all germs
- Hand antiseptis agent of choice for Cone Health



Use alcohol gel/foam (provided by Cone Health), or soap and water.



Infection Control

Hand Hygiene Compliance



At Cone Health, we take proper hand hygiene very seriously.



What if I fail to perform proper hand hygiene?

If a student is observed failing to perform proper hand hygiene, the student will receive written notification from qualified observers. A copy of the written notification also will be sent to the student's clinical instructor.

Repeated failings could jeopardize a student's clinical rotation.



Infection Control

Bloodborne Pathogens

Cone Health's Bloodborne Pathogen (BBP) Exposure Control Plan provides information on:

- Hepatitis B Vaccinations
- Jobs and tasks that are risky
- How to choose Personal Protective Equipment (PPE)

If you have questions about BBP:

- Contact Infection Prevention Services
- After hours, contact the Administrative Coordinator
 - To review the [BBP Exposure Control Plan](#), go to the Intranet Homepage/Resources/Policies and Procedures/Infection Prevention Management Plans.



Infection Control

Blood Spills and PPE

When handling blood or “Other Potentially Infectious Materials” (OPIM) and anytime there is a risk of a splash, you **MUST** use the following Personal Protective Equipment (PPE):

- **Gloves** – when handling blood, OPIM or non-intact skin
- **Gowns** – when there is a risk of splash of blood or OPIM to clothing
- **Masks and Goggles (both) or Face Shields** – when blood or OPIM could splash your face.

Make sure you know where to find these items and how to use PPE.

If it is wet, warm and doesn't belong to you, wear PPE!



Infection Control

Blood Spills and Exposures

To clean a blood spill:

1. Put on gloves and other PPE appropriate to the size of the spill.
2. Contain the spill.
3. Spray the area with an approved disinfectant.
4. Wipe clean.

If you are exposed to blood or other body fluids:

1. IMMEDIATELY wash the exposed skin with soap and water or flush mucous membranes with water or saline.
2. Report to Employee Health, the Administrative Coordinator or the Infection Control liaison at off-site locations.
3. Complete an [Employee Incident Report](#) (EIR) in Safety Zone Portal.



Infection Control

Sharps Safety

Sharps Safety Devices are for your protection and, by law, you **MUST** use them. Examples of Sharps Safety devices:

- IM/SQ needles and syringes
- Needle-less IV tubing sets
- Safety lancets
- Phlebotomy devices
- IV safety catheter



Sharps should never be thrown away in anything other than a sharps disposal box.

If you are still using non-safety devices, ask your instructor about finding a safer alternative.



Infection Control

Standard Precautions

In addition to hand hygiene, PPE and safe injection practices, other elements of standard precautions include:

- Care and cleanliness of Cone Health
- Cough etiquette and respiratory hygiene
- Safe handling of laundry
- Patient isolation and transportation
- Handling of dirty patient-care equipment, instruments and devices.

Guidelines for Isolation Precautions

To review, go to the Intranet Homepage/Resources/Policies and Procedures/Infection Prevention Management Plans.



Infection Control

TB Precautions

To prevent the spread of TB, patients suspected of having TB must:

- Wear a surgical mask until they are placed in a negative pressure*, private room
- Be placed on “Airborne Precautions”
- Wear a surgical mask anytime they are outside the negative pressure room.

Any employee entering the room of a patient on Airborne Precautions must wear an N-95 mask or PAPR. Fit-testing is required – contact Employee Health for more information.

Students/faculty are not fit-tested for N-95 masks.

**** If you discover the negative pressure is OFF, put a mask on the patient, keep the room door closed and contact Facilities Management/Plant Operations.***



Infection Control

Frequent Safety Round Issues

Frequent Infection Prevention issues cited during Safety Rounds:

- **Open food and drink** – No open food and drink in clinical areas.
- **Linen** – Clean linen must be covered. NEVER place bags of linen on the floor.



- **Portable patient care equipment** – Must be cleaned and have a green CLEAN sticker.



Policies and Procedures

Cone Health Policies and Procedures are online on the Intranet Homepage.

There are three categories:

- Employee Related
- Operations Related
- Patient Related

Pharmacy, Lab, Radiology, Nursing and other department manuals also are found on the Intranet Homepage.



Red Rules

1. A time out is completed before all invasive procedures.
2. All inpatients receiving medication or blood products, or undergoing any procedure, will have an identification band in place and identification will be confirmed.



Policies and Procedures

Red Rules

- **RED** Rules are requirements that must be followed each and every time the occasion or situation arises.
- Because they are such a priority, they are considered **RED** to signify their importance.
- **RED** rules are rules that **CANNOT** be broken.
- They are few in number.
- They are easy to remember.
- They are associated with processes that can cause serious harm to patients.



Policies and Procedures

Cone Health Red Rule #1

- A time out is completed before all invasive procedures.
- Invasive procedures are described in policy number IV-P-39 located in the Administrative Policy Manual.



Policies and Procedures

Cone Health Red Rule #2

- All inpatients receiving medication or blood products, or undergoing any procedure, will have an identification band in place and identification will be confirmed.



Policies and Procedures

Cone Health Nursing Policies and Procedures are available online on the Intranet Homepage.

Click on the icons for Citrix or the MCHS Intranet Homepage.



Policies and Procedures

CareNotes: Electronic Patient Education Resource

CareNotes provide information in English and Spanish on a variety of topics:

- Medications
- Tests
- Diagnosis
- Labs
- Procedures

You can find a link to CareNotes on the Intranet Homepage under Applications.



CareNotes® System | Document

MICROMEDEX® CareNotes® System : Moses H. Cone Memorial Hospital

Keyword Search Hot Lists Care & Condition Titles Drug Titles Lab Titles Print List

Location: MOSES CONE HEALTH SYSTEM

Search Path | [Keyword Search](#) > [Matching Titles](#) > [Search Results](#) >
CARDIAC CATHETERIZATION - HOME CARE

View: English

CARDIAC CATHETERIZATION - HOME CARE - Discharge Care

CARDIAC CATHETERIZATION - HOME CARE

Facts You Should Know

For the next 24 hours YOU SHOULD:



Policies and Procedures

Computer Training

Faculty should contact the Staff Education Department to schedule training on the E-Chart system. (832-8173)



Nursing students will be given computer instructions and access from their clinical instructor.

Training may be done at the school or in the Staff Education department.



Policies and Procedures

Documentation Standards

Do not share computer IDs or passwords.

Do not look at information in patient medical records unless you are assigned to the patient. **(HIPAA Privacy Laws)**



Policies and Procedures

CBG Training

- **Nursing students/faculty will not perform patient glucose testing at this time.**
- Students who are Cone Health employees are **not permitted to** perform the testing using their employee Identification badge.
- Faculty who are Cone Health employees are **not permitted to** allow students to use their name badge in order to perform the patient glucose testing
- Students may work with the primary nurse/instructor in order to intervene as necessary r/t blood glucose test results and may chart the results in the patient's chart (place in the vital sign area of e-chart).



CONDITION HELP

A Safety Net Program for Patients and Families

- **WHAT**- Ability for patients and families to activate a Rapid Response Team to come to your room to work with your current healthcare team to address your concerns.
 - Critical Care Nurse, Nursing Supervisor, Respiratory Therapist
- **WHEN** – After speaking with your health care team, if you feel that serious concerns are not being adequately addressed
- **HOW** – Dial the Emergency of your specific facility from any hospital phone.



Emergency Codes

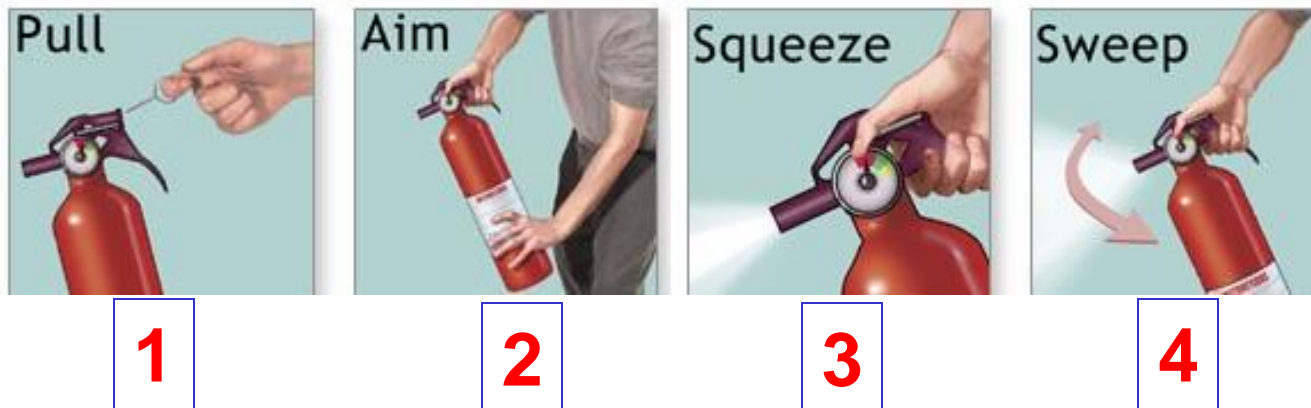
Code Red - Fire

4 steps to respond to a fire:

- R**escue anyone in immediate danger.
- A**ctivate the alarm and call the emergency number.
- C**lose doors and windows.
- E**xtinguish if possible. **E**vacuate if necessary.



4 steps for using an extinguisher:



Emergency Codes

Code Red - Fire

O₂ tanks and other compressed gas cylinders can explode. They must be handled with extreme care – it's the law! Here's the deal...



- Secure with a chain or in a rack when stored
- Use only an approved carrier during transport – an approved carrier is designed for this purpose.
- Store in limited quantities – usually no more than 12 tanks are allowed in one department.
- Full and empty tanks must be stored separately and clearly labeled for easy identification.



Emergency Codes

Code Orange – Haz Mat Incident

“**Code Orange – *Internal***” means a significant chemical spill/exposure has occurred within the Health System.

- Avoid the area until “all clear” is announced.
- Trained Cone Health personnel will respond to the scene and notify the Fire Department if necessary.
- Nearby departments should prepare to receive re-routed traffic and be ready for possible evacuation.
- Other departments throughout the building are on stand-by to assist if needed.

No announcement is made for spills that are manageable within the department.

Department staff should be trained to clean spills of chemicals they use regularly.



Emergency Codes

Code Orange – Internal Haz Mat Incident

For the protection of our employees, safety information about chemicals used within the Health System is available:



- On product labels
- Material Safety Data Sheets (MSDS)
- In departmental training
- In safety policies

Every chemical container must include:

✦ Chemical Name ✦ Manufacturer ✦ Warnings

If a product is transferred into a new container, **ALL** the above information must be on the new container.



Emergency Codes

Code Orange – Internal Haz Mat Incident



An MSDS tells how to:

- Use
- Store
- Clean up a spill
- Offer first aid
- Dispose of a chemical

Need an MSDS?

Search the easy to use database on the Health System's Intranet.

For emergencies:

Call the number on this sticker found on phones in each department.



Emergency Codes

Code Orange – External Haz Mat Incident

“Code Orange – External” means a chemical spill/exposure has occurred in our community, and we are expecting to decontaminate and treat victims in our Emergency Departments.

In response to a **Code Orange – External**:

- Members of the HazMat response team will respond to the Emergency Department.
- The Decontamination Tent will be set up.
- Contaminated patients will not be allowed into our hospitals without decontamination.



Emergency Codes

Code Yellow – Bomb Threat

In response to a Code Yellow announcement, all available employees should:

- **Immediately check your department or area for any items (boxes, backpacks, computer cases, etc.) that don't belong.**
- **Call Security to report anything found that could be related to the threat.**
- **Obtain the Code Yellow policy for more information and for the “All Clear” report form.**
- **If nothing is found, fax or deliver the completed “All Clear” form to the proper location.**
- **Prepare to evacuate if directed.**



Emergency Codes

Code Triage - Disaster

“Code Triage – Stand By” means something has happened that changes the way we will deliver services.

For example:

- An outbreak of infectious disease
- A large plane crash
- A weather-related disaster
- Sudden increase in patient census



When you hear “Code Triage – Stand By” you should:

- Be ready to respond!
- Remain in your department - Review your department’s disaster plan.
- Wait for more information – you will be contacted if needed.



Emergency Codes

Code Black – Bioterrorism

A **Code Black** announcement means the hospital is responding to a bioterrorism (BT) event.



Examples of a BT event include:

- Anthrax scares (i.e. white powder in the mail)
- Smallpox release

A BBT event can be internal or external.

How will Cone Health respond to a BT attack in our community?

- We will protect our hospitals, staff and patients by keeping contaminated patients outside of the hospital until they are decontaminated (cleaned).
- We will follow our **Code Orange** plan.



Emergency Codes

Code Gray – Restricted Access

What is Code Gray?

- Response to an incident of civil unrest within Cone Health that threatens the safety of patients, visitors and staff.
- Potential reasons to activate Code Gray include, but are not limited to:
 - Heightened emotional or behavioral response, even after de-escalation attempts
 - Visible weapons
 - Physical altercations
 - Hostage situations
 - Communication of threats



Emergency Codes



Code Gray – RESTRICTED ACCESS

- If this type of incident occurs, call the emergency phone number for the facility and request the CIRT team
- Panic buttons, where available, may be activated if you are unable to use the phone
- Close all nearby patient room, office, and procedure room doors, if possible
- Attempt to maintain a visual of the situation until help arrives



Emergency Codes

Code Gray – RESTRICTED ACCESS

When a “Code Gray” is announced:

- Ancillary services and support staff avoid the area until “Code Gray – All Clear” is announced
- All staff authorized to enter the restricted area must present appropriate identification
- Security, ACs, Facilities Management, Administrator on Call, and PBX Operator refer to department-specific policies and procedures for additional responsibilities
- Only the AC, Security, or the Incident Commander is authorized to request the “Code Gray – All Clear”



Emergency Codes

Code Pink – Abduction

A Code Pink announcement means help is needed to locate an infant or child.

For babies younger than 1 year old, the code announcement will include the *last known location*.

EXAMPLE: “Code Pink, Central Nursery” means that the missing infant was *last seen* in the Central Nursery.



Emergency Codes

Code Pink – Abduction

For toddlers and older children, the code announcement will include the child's:

- **Sex** (“Amber” for a girl, “Adam” for a boy)
- **Age** and
- **Last known location**

EXAMPLE: “Code Pink – Adam – 7 – 6100” means that a 7-year-old boy was last seen on Unit 6100.



Emergency Codes

Code Pink – Abduction

When **Code Pink** is announced, some departments have specific assignments. **All other available employees** should:



- **Come into the hallways and stairwells.**
- **Keep an eye on any nearby exits.**
- **Call Security to report any activity that seems suspicious.**



Banding Together for Patient Safety

Banding Together for Patient Safety



Cone Health is participating in the statewide program to implement standardized armband colors for improved safety.



Banding Together for Patient Safety

Why the Change?

- In Pennsylvania, there was confusion regarding wristband color that resulted in a patient being labeled DNR erroneously.
- At one time in North Carolina, there were nine different colors being used to convey DNR.
- What does this mean?
 - Potential for confusion exists.
 - Opportunity to reduce potential for harm and improve patient safety.



Banding Together for Patient Safety

Standardization of patient color-coded wristbands for “do not resuscitate,” “allergy,” and “fall risk” is endorsed by the North Carolina Quality Center and North Carolina Hospital Association.



Banding Together for Patient Safety

RED: Patient Allergy

Cone Health adopted the color **red** for the patient allergy designation.

- “Allergy” is labeled on a thin **red** armband.
- Specific allergies are not listed on the armband.
- Staff should refer to the patient’s chart for the complete list of allergies.



Banding Together for Patient Safety

YELLOW: Fall Risk

Cone Health adopted the color **yellow** for the fall risk designation.

- “Fall Risk” is labeled on a thin **yellow** armband.
- Staff should continually reassess a patient’s fall risk.



Banding Together for Patient Safety

PURPLE: Do Not Resuscitate

Cone Health adopted the color **purple** for the do-not-resuscitate designation.

- “DNR” is labeled on a thin **purple** armband.
- When a **purple** armband is present, it is essential to verify on the chart if the patient is a true DNR.



Banding Together for Patient Safety

PINK: Restricted Extremity

Extremity restriction has moved from a red armband to a **pink** armband.

Pink has become the standard.

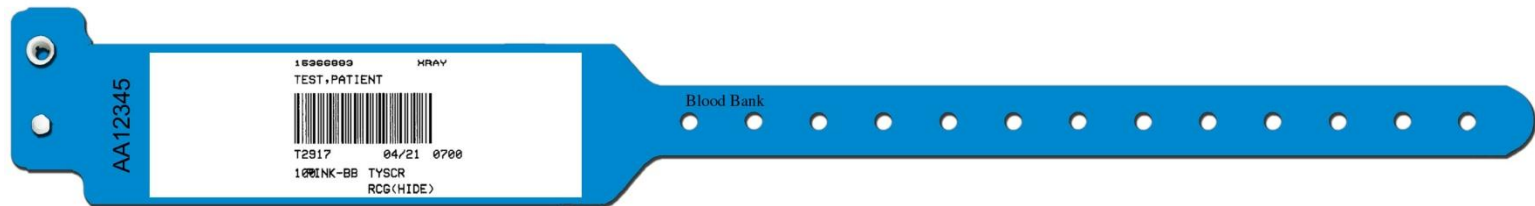


Banding Together for Patient Safety

BLUE: Blood Bank Bracelet

The blood identification bracelet is now a **blue** armband. The armband will continue to have a patient identification number.

Patient identification is done by the white arm band.



Patient Safety

2011 Hospital National Patient Safety Goals

The purpose of the National Patient Safety Goals is to improve patient safety. The Goals focus on problems in health care safety and how to solve them.

Identify patients correctly

Use at least two ways to identify patients. For example, use the patient's name and date of birth. This is done to make sure that each patient gets the medicine and treatment meant for them.

Make sure that the correct patient gets the correct blood type when they get a blood transfusion.

Improve staff communication

Quickly get important test results to the right staff person.

Use medicines safely

Label all medicines that are not already labeled. For example, medicines in syringes, cups and basins.

Take extra care with patients who take medicines to thin their blood.

Prevent infection

Use the hand cleaning guidelines from the Centers for Disease Control and Prevention or the World Health Organization.

Use proven guidelines to prevent infections that are difficult to treat.

Use proven guidelines to prevent infection of the blood from central lines.

Use safe practices to treat the part of the body where surgery was done.

Check patient medicines

Note: This goal is effective July 1, 2011.

Find out what medicines each patient is taking. Make sure that it is OK for the patient to take any new medicines with their current medicines.

Give a list of the patient's medicines to their next caregiver or to their regular doctor before the patient goes home.

Give a list of the patient's medicines to the patient and their family before they go home. Explain the list.

Some patients may get medicine in small amounts or for a short time. Make sure that it is OK for those patients to take those medicines with their current medicines.

Identify patient safety risks

Find out which patients are most likely to try to commit suicide.



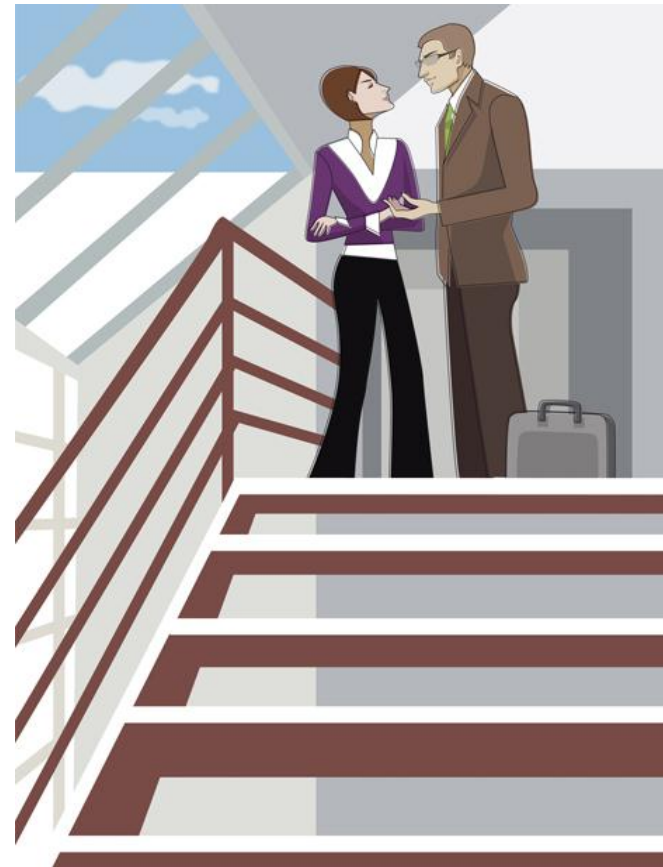
This is an easy-to-read document. It has been created for the public. The exact language of the Goals can be found at www.jointcommission.org.



General Guidelines

Chain of Command

- Speak with your Instructor or Nurse, first and as appropriate.
- The Instructor / Nurse will guide you further as needed.



General Guidelines

Cone Health Approved Abbreviations

- Only approved abbreviations may be used.
- The list is found in Citrix / Resources / Policies & Procedures / Approved Abbreviations List.
- Also '**Do Not Use**' list can be found on MD Order Sheet.



General Guidelines



Meals

The Moses H. Cone Memorial Hospital • Wesley Long Hospital
Women's Hospital • Annie Penn Hospital
Moses Cone Behavioral Health Hospital



Libraries

Moses Cone Hospital • Wesley Long Hospital
Women's Hospital • Behavioral Health Hospital



General Guidelines

Student Parking

Carpooling is strongly encouraged on each campus.

Moses Cone Hospital – Students and faculty are required to part in the Wendover and Church Street parking lot.

Wesley Long Hospital – Students must park in the employee parking lot located off N. Elam and Friendly avenues.

May have temporary modifications; confirm with Instructor

Women's Hospital – Students may park in the Women's Education Center parking lot. Turn onto Lendew Avenue from Green Valley Road. Park in the lower area of the parking lot.

Annie Penn Hospital – Students may park in the employee parking lot located adjacent to the South Main Street exit of the hospital lot.

Behavioral Health Hospital – Students must park in the upper middle lot and to the left of the building.



General Guidelines

Dress Code

- Dress professionally.
- Follow the dress code policy of your school and Cone Health.
- Wear your school uniform.
- Lab coats are to be worn over your street clothes.
- Your picture ID must be worn at all times.



General Guidelines

Dress Code

- **Picture ID badges** must be worn mid-chest or above with no obstructions.
- **Clothing** must be clean, neat, pressed and non-tattered. Shoes should be in good repair.
- **Good personal hygiene.** Avoid obvious and natural odors. No perfumes, fragrances or after-shaves are to be worn in patient-care areas.
- **Hair** should be styled as not to interfere with patient care. Shoulder length or longer hair must be pulled back.
- Beards and mustaches should be short, neat and trimmed.



General Guidelines

Dress Code

- **Tattoos** should be discreet and covered at all times.
- **Nails** must be neat, clean and short.
 - **NO artificial nails, nail applications or overlays are allowed for direct bedside caregivers.**
- **Appropriate underclothing** must be worn and not visible.
- **Use discretion in dress to pick up assignments.**
 - Wear a lab coat over street clothes.
 - **NO** tank tops, revealing clothing, sweat pants, biking shorts, jeans, capris, shorts or flip flops.
- **Crocs.** Solid Crocs with openings along the sides are OK.



General Guidelines

Dress Code

- **Jewelry** – Conservative and safe, based on the area in which staff works. Minimal while providing patient care.
- No more than one ring on one hand.
- **Earrings** no greater than 1½ inches in diameter. **No other visible piercing is acceptable.**
- **NO insignias** on shirts and sweaters unless related to school, then no larger than the ID badge.



General Guidelines

Phones/Valuables

- Personal phone calls should be limited to emergencies.
- **Personal cellular phones are to be turned off and not used in clinical settings.**
- Storage is limited for personal belongings.
- Valuables cannot be secured.



GENERAL GUIDELINES

Other issues cited during Safety Rounds:

- No open food and drink in clinical areas
- Clean linen - must be covered
- Dirty linen bags must be placed in area for soiled items - not on the floor
- Food, meds and specimens – properly labeled and stored separately
- Patient and staff food must be in separate refrigerators
- Dispose of expired food/medications.



General Guidelines

Theft Prevention

Reduce your risk of becoming the victim of a theft. Your best defense is to limit the opportunity.

Here are some basic security reminders:

Parking Lots

- Keep valuables out of sight.
- Place money, purses/wallets, GPS devices, packages and shopping bags in your car's trunk.
- Always lock your vehicle.
- Park in well-lighted areas.
- When it's dark outside, walk to your car with friends and co-workers. You also may request an escort by calling Security.
- Secure bikes, motorcycles and mopeds.

Security awareness is everyone's business.



General Guidelines



We're tobacco-free.



Questions?



Now let's see what you've learned.

Please take your test.

