

# Holy Cross Health Annual Enrichment



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A Member of Trinity Health

# Topics

- Mission, Vision, and Core Values
- What is Expected of Me
- Patient Experience
- National Patient Safety Goals
- Impaired Healthcare Practitioner
- Abuse, Neglect, and Exploitation
- Emergency Codes and Workplace Safety
- Infection Control
- Holy Cross Recognitions



# About Holy Cross Health

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# Holy Cross Mission and Compassionate Service



- Private Catholic, non-profit hospital
- Diocese of St. Augustine
- Sisters of Mercy of Pittsburgh, Pennsylvania
- Catholic Health Ministries
- Catholic Health East and Trinity Health consolidated to form Trinity Health in 2013



# Our Core Values

**REVERENCE:** We honor the sacredness and dignity of every person

**COMMITMENT TO THOSE WHO ARE POOR:** We stand with and serve those who are poor, especially the most vulnerable

**SAFETY:** We embrace a culture that prevents harm and nurtures a healing, safe environment for all

**JUSTICE:** We foster right relationships to promote the common good, including sustainability of earth

**STEWARDSHIP:** We honor our heritage and hold ourselves accountable for the human, financial, and natural resources entrusted to our care

**INTEGRITY:** We are faithful to who we say we are

## Our Mission

We, Trinity Health and Holy Cross Health, serve together in the spirit of the Gospel as a compassionate and transforming healing presence within our communities.

# The Why & The How

## Vision

As a mission-driven innovative health organization, we will become the national leader in improving the health of our communities and each person we serve. We will be the most trusted health partner for life.

## How Will We Know We Have Accomplished Our Vision?

We will know we are people-centered when we put the people we serve at the center of every behavior, action and decision in our ministry. We will know we are successful when we deliver better health, better care and lower costs.



# What is Expected of Me

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# Standards of Conduct

Colleagues and non-employees are expected to conduct themselves and behave in a manner that is consistent with the Code of Conduct, exemplifies our organization's Core Values and Service Excellence and is conducive to a customer friendly and efficient operation of Holy Cross Health.



# Sexual Harassment



- Against policy and the law!
- Unwelcome sexual advances, requests for sexual favors, or other conduct of a sexual nature that explicitly or implicitly affects an individual's employment or unreasonably interferes with an individual's work performance or creates an intimidating, hostile or offensive work environment.
  - Verbal/nonverbal
  - Physical
  - Visual/Environmental
- Includes behavior in which people are treated differently on the basis of their gender.

# Workplace Violence Policy

- Colleague safety is as important as patient safety and HCH has zero tolerance for workplace violence committed by or against Colleagues
- **Prohibited conduct includes:**
  - Causing physical injury to another person
  - Making threatening remarks
  - Aggressive or hostile behavior that creates a reasonable fear of injury or causes emotional distress
  - Intentionally damaging property of Employer or another Colleague



# Colleague Conduct Policy

- HR-07-730
- Conduct that can lead to immediate termination:
  - Reporting to work under the influence
  - Possession of firearms or other weapons on hospital premises
  - Disruptive behavior
  - Insubordination
  - Engaging in any form of harassment
  - Theft, destruction of hospital property
  - Sleeping on the job
  - HIPAA Violations
  - Workplace Violence



# Drug-free and Smoke-Free Environment



- Holy Cross is committed to maintaining a safe and drug-free work environment for colleagues, patients and visitors.
- Smoking or use of tobacco products is prohibited at Holy Cross Health, Healthplex, and Wells Fargo campuses (includes parking lots). Smoking includes vaping or use of e-cigarettes.
- Smoking is permitted for patients and visitors only in designated areas outside of the hospital or any other facility.

# ID Badge

Your ID badge must be worn at all times while you are on duty. Your badge is a critical component of workplace safety and customer service.

ID badge functions include:

- Facility access – external & internal
- Parking lot access

# Safety & Security Updates

- Continue to assess and restrict access to entrances at all HCH facilities to help create safer and more secure environment.
- All employees and non-employees are to part in designated parking areas- parking garage and the parking lots along Commercial Blvd; **students(i.e. 5th-6th-7th floors)**. **Violators will have their vehicles towed at their expense.**

## Masking

### Masking is required:

- When the **COVID-19 Community Transmission rate** is high at that location *or*
- If local public health authorities require it *or*
- If you are caring for immunocompromised patients *or*
- If you are working in designated areas of the facility (ex: ED, Cancer Center) *or*
- If you must enter the facility and have any COVID-related symptoms *or*
- If you are not fully vaccinated against COVID or flu

# Patient Rights & Responsibilities

Upon admission, all patients are given a copy of their **Rights & Responsibilities**.

## Examples:

- Right to Informed Consent
- Right to Good Quality Care & High Standard

Patient Rights – What do you need to know?

- All staff need to know we provide the Notice of Patient Rights
- Registration staff provides the Notice of Rights at the start of patient care or upon admission
- Location of Notices
  - ✓ Displayed in all outpatient/inpatient locations, Urgent Care Centers and Physician practices
  - ✓ Brochures in waiting areas and at registration desks

# Patient Rights – Notice & Brochure

## Florida Patient Rights and Responsibilities

### Florida Statute 381.026

As your health care provider, Holy Cross Hospital recognizes your rights while receiving medical care. You may request a copy of the full text of the Patient Rights and Responsibilities at the front desk of this office. A summary of your rights and responsibilities is as follows:

#### Patient Rights

- Be treated with courtesy and respect, with appreciation of their dignity, and with protection of privacy.
- Receive a prompt and reasonable response to questions and requests.
- Know who is providing medical services and who is responsible for your care.
- Know what patient support services are available, including if an interpreter is available if the patient does not speak English.
- Know what rules and regulations apply to your conduct.
- Be given by the health care provider information such as diagnosis, planned course of treatment, alternatives, risks, and prognosis.
- Refuse any treatment, except as otherwise provided by law.
- Be given full information and necessary counseling on the availability of known financial resources for care.
- Know whether the health care provider or facility accepts the Medicare assignment rate, if the patient is covered by Medicare.
- Receive prior to treatment, a reasonable estimate of charges for medical care.
- Receive a copy of an understandable itemized bill and, if requested, to have the charges explained.
- Receive medical treatment or accommodations, regardless of race, national origin, religion, handicap, or source of payment.
- Receive treatment for any emergency medical condition that will deteriorate from failure to provide treatment.
- Know if medical treatment is for purposes of experimental research and to give his or her consent or refusal to participate in such research.
- Express complaints regarding any violation of your rights through the grievance procedure at Holy Cross Hospital, to the appropriate licensing agency, or The Joint Commission.

#### As a patient you are responsible for:

- Providing accurate and complete information about present complaints, past illnesses, hospitalizations, medications, and other matters relating to your health.
- For reporting to your doctor whether you comprehend your treatment plan and what is expected of you.
- For following the treatment plan recommended by your doctor and staff.
- For keeping appointments and when you are unable to do so for any reason to notify the doctor and/or their staff.
- Your actions if you refuse treatment or do not follow the doctor's instructions.
- For assuring that the financial obligations of your health are fulfilled as promptly as possible.
- For following Holy Cross Hospital, Inc. rules and regulations affecting patient care and conduct.



We recognize that each patient has unique health care needs and we encourage a partnership between the patient and the health care team.

We encourage patients or their legally designated representative to participate in discussions and decisions about their treatments, options, alternatives, risks and benefits.

#### References

- Florida Statute
- The Joint Commission
- Centers for Medicare and Medicaid Services
- Office for Civil Rights, Health and Human Services

If you have questions or concerns, please contact Holy Cross Hospital Guest Relations at 954-776-3024.

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## Patient Rights & Responsibilities







# Patient Experience

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# AIDET

## Greet and welcome guests using AIDET Communication Technique

**A** = acknowledge the patient/family/client

- Smile-Make eye contact-Greet them in a pleasant manner.

**I** = introduce yourself

- State your name and role.
- Highlight your skill and expertise and that of other team members.

**D** = describe/ duration

- Describe what you are about to do and give a time expectation as to procedures and processes.

**E** = explain processes and procedures

- Assist patient/family/client to have clear expectations of what will be occurring.

**T** = thank the patient/client for choosing Holy Cross

- Ask if there is anything else they need before ending the interaction.

# Shhh...Silence Helps Healing Happen

Our patients need a quiet environment to aid in their healing and recovery.  
Please...

- Be mindful of your voice volume when speaking to others.
- Close their door when appropriate.
- Report equipment that makes excessive noise.
- Be particularly aware of the noise level around staff areas (i.e. nurse's station).



**HOURLY  
ROUNDING**



## + The 4 P's Checklist

- 1 POSITIONING**  
Is there anything I can do to make you more comfortable?
- 2 PERSONAL NEEDS**  
Are all of the personal items you need within reach?
- 3 PAIN**  
Are you experiencing any pain that I can assist with?
- 4 POTTY**  
Would you like for me to help you use the bathroom?

# HCH Action to Preventing Patient Falls

## ACTIONS - all patients at risk for falls

- Risk for Falls magnet on door
  - Yellow bracelet
  - Yellow non-skid socks
  - Hourly rounding
  - Education to patient and family
  - Document falls risk on “ticket to ride”
  - Shift report-fall risk
  - Care plan to note fall risk
  - Remove clutter
- Bed alarm/chair alarm (low bed HAS a built-in alarm)
  - Stay with me initiative (remaining within 3 feet of fall risk patient during toileting)
  - Call light within reach
  - Frequent toileting
  - Remote sitter monitoring via **AvaSure system**
  - Low bed and mat
  - Patient lift equipment
  - Gait belt

# AvaSure Virtual Patient Monitoring

Holy Cross Health has implemented the AvaSure Virtual Monitoring Program to help monitor and promote safety for the at-risk patient remotely. The **mobile Telesitter unit** is equipped with **one-way video and two-way audio communication** allowing the virtual monitoring attendant to respond in situations where a verbal reminder is needed to redirect the patient.

- Physician order is not required
- The device does not record
- Additional consent is not required
- A privacy mode is available
- When the yellow light is on, monitoring staff can see into the room
- When the yellow light is off staff cannot see into room and privacy mode is activated



**Patient Safety Monitoring in Progress**

This patient is being remotely monitored by hospital staff for safety and fall prevention.

This device is called a telesitter and does not record audio or video at any time. It has a privacy feature that can be activated by a health care team member during patient care or times when the patient is dressing, bathing or using the toilet.




The monitoring staff can speak directly to the patient and contact the care team if needed.

For more information, please ask a care team member for a telesitter brochure.

Holy Cross Health Trinity Health

# Location of Handicap Facilities

- Provide assistance to individuals with disabilities.
- If you are not able to provide assistance, ***please get someone who can.***

<p>Handicap Accessible Drinking Fountain</p> 	<p><b><u>Sample Location:</u></b></p> <ul style="list-style-type: none"><li>❖ Main Lobby</li><li>❖ Emergency Room</li></ul>
<p>Handicap Bathroom</p>  <p>RESTROOM</p>	<p><b><u>Sample Location:</u></b></p> <ul style="list-style-type: none"><li>❖ Main Lobby</li><li>❖ By Visitor Elevator</li></ul>
<p>A TDD device to assist the hearing impaired with making phone calls</p> 	<p><b><u>Sample Location:</u></b></p> <ul style="list-style-type: none"><li>❖ Emergency Room</li><li>❖ PBX office has one for patient use</li></ul>

# Visitor Policy



Holy Cross will not restrict, limit, or deny visitation privileges on the basis of the following: Race, Color, National Origin, Religion, Sex, Sexual Orientation, or Disability.

**General Guidelines** (see Policy on Visitors to Hospital to see complete list)

To optimize patient's ability to rest, the hospital recommends visiting between 11:00am – 8:00pm

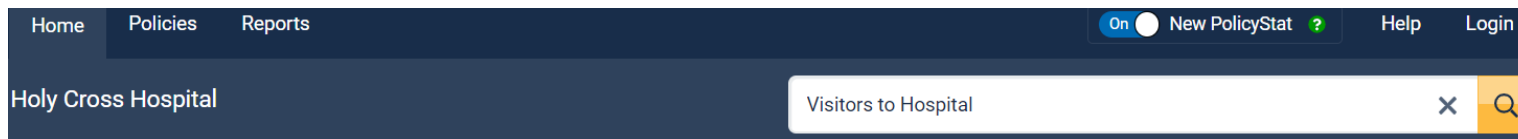
Patient care is our first priority. In the best interest of patient care, the physician, licensed independent provider or the nursing supervisor or nurse manager may, at any time, restrict visitors to a patient or restrict the number of visitors.

**NOTE: See Visitor Policy on visitor restriction regarding Covid-19 (access PolicyStat)**

Recognizing that patient support from a family member or friend contributes to patient experience, safety and healing, we desire to balance these important elements with the need to protect patients and Colleagues from unnecessary exposure to COVID-19.

# Where to find Holy Cross Policies

1. From the ZENworks window, click the *PolicyStat*
2. On the Search bar, enter a keyword to search a policy. For example:





# Language Services

Certified Languages International (CLI)

*1-800-225-5254 (2255CLI)*

- **200+ languages**
- **Available 24/7/365**
- **TDD located in Nursing Hub and in the Emergency Department.**



## Medical Terminology

- Anatomy and physiology
- Medical equipment
- Pharmaceuticals
- Patient advocacy
- Medical tests
- Diagnostic procedures
- Pathology and treatment
- Common health conditions
- Abbreviations and acronyms (e.g., ICU, qid)
- Specialties (e.g., mental health, substance abuse, homeopathic remedies)

## Language Competency

- Fluency in source and target languages
- Standard language and common colloquialisms (slang)
- Oral and written proficiency

## Interpreter Competency

- Interpreting skills
- Memory retention skills
- Customer service
- Message accuracy

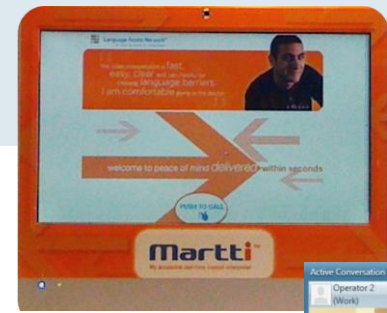
## Professional Ethics

- Patient safety
- Confidentiality and neutrality
- Professional conduct

# MARTTI - Our Video Interpreter

Qualified Trained and Tested  
24/7 365 Access

- Offers 210+ languages including American Sign Language
- Medical Interpreter training
- Independent language assessments
- Continuing education
- Members of NCIHC (National Council of Interpreting in Health Care)
- Follow National code of Ethics and Standards
- HIPAA and Confidentiality agreements



# Using Interpreters

- When discussing medical information especially Advance Directives, Treatment Options, Informed Consent and Discharge Instructions use the patient's preferred language with a **qualified interpreter**
- Document in the Medical Record the method of translation
- A family member or friend **should not** be used as an interpreter. Use of such persons could result in a breach of confidentiality or reluctance on the part of the patient to reveal personal information critical to their situation

# Cultural Competency

In the healthcare setting, **cultural competence** refers to the ability to provide optimal care to members of various cultural groups defined by common traits such as age, race, gender, sexual orientation, to name a few.

This ability rests on a set of:

- Attitudes
- Skills
- Policies
- Practices

This set of qualities makes it easier for providers to:

- Understand their patients
- Communicate with their patients

The end result is optimal care for all patients.

# Culturally Competent Provider

## Providers must understand the patient's:

- Values
- Health-related beliefs and practices
- Views about his or her current illness
- Nutrition
- Socioeconomic status
- Communication patterns
- Cultural affiliations
- Educational background

## Providers must be able to provide healthcare to:

- Patients who do not speak English
- Patients from different cultures

# Bariatric Sensitivity

The term **bariatric** refers to patients whose weight exceeds the safety capacity of standard patient lifting equipment (approximately 300 lbs.) or who otherwise have health issues, limited mobility, and limited environmental access due to their weight and size (Galinsky 2010).



Bias against individuals who are obese remains a widespread phenomenon. Overweight and obese patients are faced with issues that goes beyond their physical condition

Bariatric patients have the right

- to be treated as unique individuals
- to receive sensitive and dignified care



# National Patient Safety Goals

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# Reporting Safety/Quality of Care Concerns

The Joint Commission (TJC) represents a commitment to Patient Safety and Quality of Care.

Any Holy Cross staff, physician, student or volunteer who has concerns about the safety or quality of care provided in the hospital may report these concerns to ***The Joint Commission*** or to the ***Agency for Health Care Administration (AHCA)***.

***No retaliatory or disciplinary action*** will be taken against individuals who report safety concerns to The Joint Commission or AHCA.



# Contacting TJC and AHCA

## The Joint Commission

**FAX:** 1-630-792-5636

**Email:**

[complaint@jointcommission.org](mailto:complaint@jointcommission.org)

**Address:**

Office of Quality Monitoring  
The Joint Commission  
One Renaissance Boulevard  
Oakbrook Terrace, IL 60181

## Agency for Health Care Administration

**Toll-Free :** 1-888-419-3456

**Address:**

Agency for Health Care Administration  
2727 Mahan Drive  
Tallahassee, Florida 32308

# 2023 National Patient Safety Goals



[Click Resources for 2023 NPSG Summary](#)

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



Safety is a Holy Cross Core Value

# Goal: Identify patients correctly

ZEROHARM

The Power of 2  
the Patient and YOU

**ASK**  
the patient  
his name  
and birthdate.

**CHECK**  
that information  
on the bracelet



**Always** use 2 patient identifiers (name & date of birth)

**Ask** the patient to verbally state their name and birth date when possible

**Identify** patient when:

- Administering medication or blood products
- Collecting blood samples or specimens
- Providing care, treatment, or services

# Goal: Improve staff communication

## *Important Communication Tools for Patient Safety:*

1) **Handoff** – Clearly communicating vital information between different care providers. Example: During shift change, when transferring a patient.

Provides an opportunity to ask questions, clarify, and confirm

2) **Check Back** – Using closed loop communication to make sure the correct information is received. Example:

Nurse: “Mr. Smith needs to go to Room 256-1”

Transporter: “Mr. Smith to Room 256-1”

Nurse: “That is correct. Thank you”

# Goal: Use medicines safely

## Use medicines safely

- Before a procedure, label medicines that are not labeled
- Take extra care with patients who take medicines to thin their blood
- Record and pass along correct information about a patient's medicines

# Goal: Use alarms safely

- Alarms must be recognized, interpreted, and acted on by a knowledgeable person in a **timely** fashion
- **Alarms must be immediately reviewed and validated by patient assessment**
- Ensure proper lead placement, signal quality, and setting of alarm parameters
- Know the default alarm settings of monitors
- Set "reasonable" alarm settings

# Goal: Identify patient safety risks

***Prevent a suicide-Intervene-take any threat of Suicide seriously***

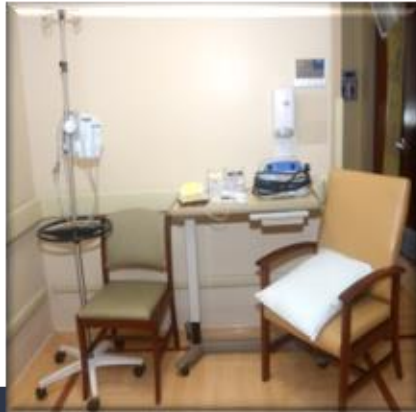
## Reduce Hanging Risk in the Physical Environment

- Suffocation or strangulation (hanging) by bell cord, bandages, sheets, a restraint belt, plastic bags, elastic tubing, or oxygen tubing is a common method of suicide while in a health care facility. (Lippincott)

Normal Patient Room



Items Removed



Baker Act Patient Room



# Goal: Prevent infection

## Hand Hygiene

- The **single most important** method of preventing infections
- Soap & water **must** be used when caring for patients with ***Clostridium difficile*** (C. diff).

We are **ALL** hand hygiene coaches!

*"May I remind you to wash your hands?"*





# Goal: Prevent mistakes in surgery

## Follow the Universal Protocol to Prevent Wrong Site, Wrong Procedure, and Wrong Person Surgery

- The patient is involved when possible, in identification, site marking
- Site marking - use consistent format
- A **Time Out** is performed before the procedure



Your job is to STOP the LINE if needed!

# Impaired Healthcare Practitioner

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# Impaired Healthcare Practitioner

Impairment is defined as the condition of being unable to perform one's professional duties and responsibilities in a reasonable manner and consistent with professional standards.

*Impairment may be as a result from dependence or misuse or abuse of alcohol or drugs, or both, or due to a mental or physical condition which could affect the licensee's ability to practice with skill and safety.*

<http://www.flprn.org/faqs>



# Warning Signs of Practitioner Impairment



## Warning signs of impairment may include

- Personality changes or mood swings that occur rapidly or over time, such as increased irritability, hostile or unreasonable behavior, erratic outbursts
- Deterioration of personal hygiene and clothing habits
- Memory lapses or generalized forgetfulness
- Withdrawal from social situations
- Change in clinical judgment or behavior such as undue delay in returning consultation calls
- Inappropriate orders or over prescribing medications
- Complaints from hospital personnel, patients/family
- Makes frequent medication errors

# Florida DOH Impaired Practitioner Program

Florida health care professionals can seek assistance for impairment through the Department of Health's Impaired Practitioner Program

- **Intervention Project for Nurses (IPN)**

- Established in 1983 through state legislation to ensure public health and safety through a program that provides close monitoring of nurses who are unsafe to practice due to use of drugs (including alcohol) or psychologic/psychiatric or physical condition.

- **Professional Resource Network (PRN)**

- A nonprofit organization that provides referral services for evaluation and treatment of impaired practitioners.
  - The Florida Medical Practice Act permits the confidential treatment of physicians with impairments.

# Abuse, Neglect, and Exploitation

# Signs and Symptoms of Abuse

**Abuse** - (child, domestic partner, elderly or disabled adult) the non-accidental infliction of pain and injury.

**Signs of Physical Abuse or Physical Assault** - intentional infliction of pain or physical injury or use of force

- Bruising
- Lacerations
- Fractures
- Various stages of healing of any bruises or fractures
- Burns
- Multiple & recurrent injuries
- Injury histories inconsistent with physical findings

**Signs of Emotional or Psychological Abuse**

- Ambivalence, deference, passivity, shame
- Anxiety (mild to severe)
- Depression, hopelessness, helplessness, thoughts of suicide
- Confusion, disorientation



# Signs and Symptoms of Abuse



**Signs of Sexual Abuse** - includes rape or sexual assault/molestation

- Trauma to the genital and/or anal area such as bruises, bleeding, lacerations
- Sexually transmitted disease
- Infections/unusual discharge or odor

**Signs of Financial Abuse**

- Cashing checks without authorization or permission
- Forging an older person's signature
- Misusing or stealing an older person's money or possessions
- Forcing or deceiving an older person into signing a document (e.g., contracts or a will)



# Neglect and Exploitation

## Neglect - (child, elderly, disabled adult)

- The failure or omission to provide the care, supervision and necessary services to maintain physical and mental health.
- **Example:** deprivation of adequate food, hydration, clothing, shelter, medicine or medical care.

## Exploitation - (elderly or disabled adult)

- When a relative or care giver knowingly, by deception or intimidation, obtains and misuses the funds, assets or property of an adult with disabilities or a person 60 years or older for personal or monetary gain.
- **Example:** taking Social Security or SSI checks, abusing checking accounts and taking property and other resources without consent.



# Screening and Assessment

Identification of possible victims of abuse, neglect, and exploitation occurs through inquiry and/or observation of clinical presentation using the screening assessment tools in the electronic medical record or manual patient record as appropriate.

Colleagues identifying individuals that have met criteria of suspected abuse, neglect, or exploitation should **initiate the hospital referral process.**

**Refer to Policy** Abuse, Neglect, Exploitation: Recognition and Reporting (Appendix A)

# Referral and Reporting

- Adult patients who are suspected of having been abused, neglected or exploited are identified and assessed. Referral for appropriate resources and treatment are offered. Refer to Appendix B for Private and Public Community Agencies Referral List (**refer to Policy-Abuse, Neglect, and Exploitation**)
- For a child or vulnerable adult who is suspected of having been abused, neglected or exploited, mandatory reporting (Florida Statute) is required and the Associate will notify the following:
  - Immediate Supervisor/Coordinator/Manager
  - Physician
  - Risk Manager
  - **Florida Abuse Hotline at 1-800-96ABUSE (800-962-2873)**



# Emergency Codes

## Workplace Safety

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# Emergency Codes

Code	Description
Amber	Abducted Infant or Child
Assist	Non-Combative Behavior/Security Needed
Black	<b>Bomb Threat</b>
Blue	Cardiac/Pulmonary Arrest
Blue Jr.	Cardiac/Pulmonary Arrest: Child 29 Days-16 years
Brown	Hurricane
Clear	Emergency is over
Elopement	Vulnerable adult is missing
Emergency Evacuation	Emergency evacuation
Green	Mass casualty/disaster
Heart	Thrombolytic Therapy: Heart
Orange	Biological/Chemical/Radiological Incident
Pink	Cardiac/Pulmonary Arrest: Infant 29 Days or Less
Red	Fire
Rescue	Patient's condition is deteriorating
Stroke	Stroke/Thrombolytic Therapy: Brain
Security Alert/with descriptor	An armed person causing harm/hostage
Strong	Out of control behavior
Strong with Physician	Out of control behavior/Physician needed
White	Induced Hypothermia
Yellow	HAZMAT (Harzardous Material) Incident

# Disaster Preparedness

## Emergency Operations Plan (EOP)

- Describes the hospital's emergency preparedness program and ensure an effective response to a variety of natural or man-made disasters that could cause harm and/or disrupt the environment of care.
- The plan provides distinct policy direction, describes the roles and responsibilities of Colleagues and contains information and references to corresponding departmental mitigation, preparedness, response, and recovery procedures.

# EOP Scope

The plan identifies the **alert, notification, and activation of key Colleagues**, the internal management structure and reporting relationships, as well as coordination with external agencies and the community. The plan and corresponding procedures address *four phases* of emergency management: mitigation, preparedness, response, and recovery and the six critical areas:

1. Communication
2. Resources and Assets
3. Safety and Security
4. Staff Responsibility
5. Utilities Management
6. Patient Clinical and Support Activities

# Coordination with Community

*Holy Cross Hospital, Inc.'s Role in Emergency Management Program:* Holy Cross Hospital, Inc. participates in several communitywide emergency management programs, such as the Broward County Healthcare Coalition. Holy Cross Hospital Inc.'s role in relation to these entities in the event of a disaster is discussed, planned, and drilled for accordingly.



# Environment of Care: Medical Equipment Safety

## How do you know equipment is safe to use?

- “Spot the Dot” system: Dot indicates the month/year of the next scheduled medical equipment annual preventative maintenance (PM)

- 2021: Purple
- 2022: Yellow



- Black label indicates equipment does not require annual PM

**INVENTORY ONLY**  
FOR SERVICE: CALL  
CLINICAL ENGINEERING

# What is “SDS” and where can you find it?

SDS = Safety Data Sheet

- Information sheet from the manufacturer on chemicals
- Contains instructions on safe use & response actions in case of harmful exposures

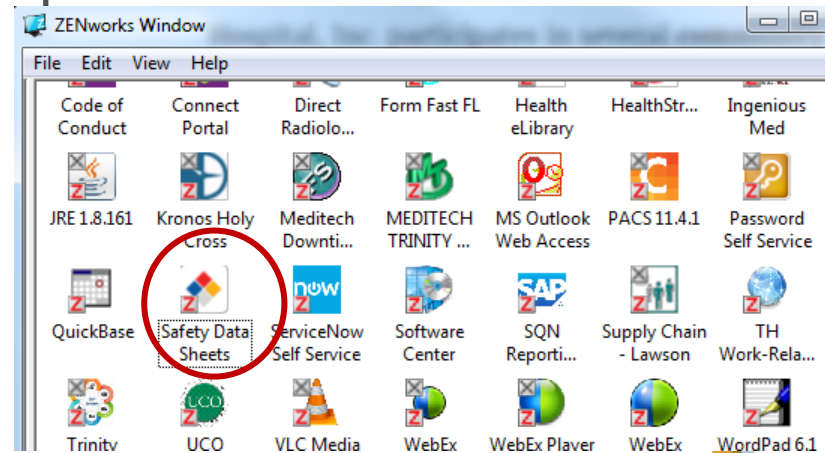
Located on desktop

(ZENworks window)

or

Reached by Hotline

(1-888-362-7416)



# What to do if a possible Chemical exposure occurred!

Notify immediate supervisor, and if you are not protected, remove yourself from exposure area and utilize appropriate PPE.

If you know how to handle the spill, (use SDS and department protocol) contain the hazard or secure area until further directions have been given.

Call **Safety and Security** (Ext. 3099) for assistance to contain the spill if needed.

Any exposure that makes you to have symptoms such as respiratory difficulty, burning to skin or eyes, redness or swelling-report immediately to Emergency Department.

Complete an incident report and report to Occupational Health for follow-up.

Colleague Health Office at the Hospital or Occupational Medicine Office at the HealthPlex Medical Plaza are also excellent resources for any questions - **954-492-5776** or **954-229-8666**.

# MRI Safety



The MRI technologist will be responsible to control access to the MRI imaging suite *at all times* and will ensure that the following safety precautions are followed:

1. **NO metallic** (ferro-magnetic) objects will be allowed entry in the MRI imaging suite such as equipment, O2 tanks, stretchers, wheelchairs, etc.
  - All metal objects must be scrutinized.
2. ONLY patients and individuals that have been **properly screened and cleared for contraindications** within a magnetic field will be allowed entry into the MRI imaging suite.

# MRI Safety

Examples of items **NOT allowed** in the MRI suite: (these are not the only items that cannot go into the MRI suite)

- HCH ID badge/film badge
- Credit cards/bank cards
- Watch
- Coins
- Keys
- Hearing aids
- **Magnetic false eyelashes**



- Jewelry, pins, body-piercing items
- Metal eyeglasses
- Metal pens
- Belts
- Stethoscopes
- Hemostats
- Scissors

# MRI Safety

**CODE RED** (Fire): In case of a Code Red in the MRI room

- Immediately remove the patient from the room.
- **Use only MRI safe/approved Fire Extinguisher** located by the MRI suite.



**CODE BLUE**: In case of a Code Blue in the MRI room:

- Immediately remove the patient from the scanner, placing them on the non-magnetic stretcher kept permanently in the area.
- **Code Blue team administers emergency care** to the patient **OUTSIDE the MRI room**
- Emergency equipment or Oxygen tanks are **NOT ALLOWED**



# Sharps Injury Prevention



Click Resources to  
read Sharps Safety

The CDC estimates that **each year 385,000 needlesticks and other sharps-related injuries are sustained by hospital-based healthcare personnel; an average of 1,000 sharps injuries per day .**

Use caution when handling, administering and/or disposing of *any* sharps.

Review CDC recommendations on Sharps Safety for Healthcare Professionals

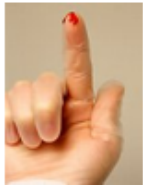
**ZEROHARM**

# Sharps Containers

## What Goes in the SHARPS Box?

It is important to ONLY put appropriate things in the sharps box.

1. Keep the Container safe, not overflowing with other items
2. We pay a fee to a vendor for replacing the sharps containers twice a week



### YES – sharps box

Needles  
Broken Glass  
Lancets  
Disposable scalpels

### NO – dispose correctly

Narcotic vials  
Dressing items  
IV tubing  
Paper or paper products

## Keep yourself SAFE!

Sharps injuries could expose you to HIV and Hepatitis B & C.

**Do NOT stuff things into a full sharps box!**

**DO** call EVS at 5785 if your box is 75% full. They will replace it





# Slips, Trips, & Falls



Exposure to wet floors or spills and clutter can lead to Slips, Trips, and Falls causing potential harm to self/patient or a family member.

## Recommended Good Work Practices:

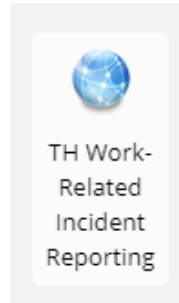
- Keep floors clean and dry.
- Provide warning signs for wet floor areas.
- Keep aisles and passageways clear and in good repair with *no* obstructions.
- Access to exits must remain clear of obstructions at *all* times.



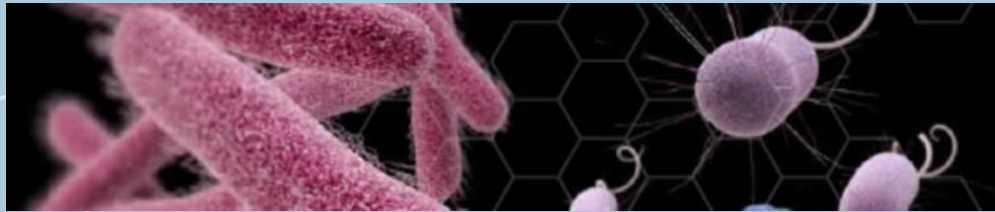
- Provide adequate lighting especially during night hours.
  - Do not use stools, chairs, or boxes as substitutes for ladders.
  - Utilize HCH S.T.O.P.P. Safety Program initiative to prevent colleague/patient injuries.
- Workplace accidents are preventable when we remember to **Stop, Think, Observe, Prepare and Proceed.**

# Trinity Health Employee Incident Reporting (THEIR)

- All colleague injuries are to be reported to the T.H.E.I.R. system.
- Complete on-line **THEIR** report within 24 hours
- To find the form:  
From the **ZENworks** window, click on the **TH Work-Related Incident Reporting icon**.

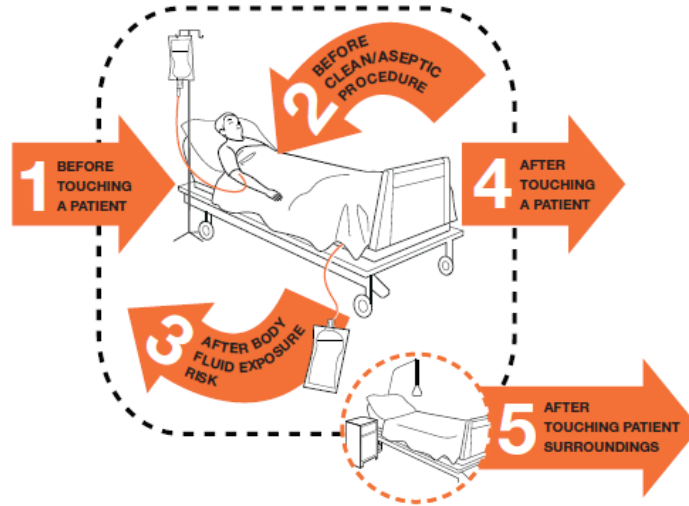


# Infection Control



BeRemarkable.®

# 5 Moments of Hand Hygiene



<b>1</b>	<b>BEFORE TOUCHING A PATIENT</b>	<b>WHEN?</b> Clean your hands before touching a patient when approaching him/her.
		<b>WHY?</b> To protect the patient against harmful germs carried on your hands.
<b>2</b>	<b>BEFORE CLEAN/ASEPTIC PROCEDURE</b>	<b>WHEN?</b> Clean your hands immediately before performing a clean/aseptic procedure.
		<b>WHY?</b> To protect the patient against harmful germs, including the patient's own, from entering his/her body.
<b>3</b>	<b>AFTER BODY FLUID EXPOSURE RISK</b>	<b>WHEN?</b> Clean your hands immediately after an exposure risk to body fluids (and after glove removal).
		<b>WHY?</b> To protect yourself and the health-care environment from harmful patient germs.
<b>4</b>	<b>AFTER TOUCHING A PATIENT</b>	<b>WHEN?</b> Clean your hands after touching a patient and her/his immediate surroundings, when leaving the patient's side.
		<b>WHY?</b> To protect yourself and the health-care environment from harmful patient germs.
<b>5</b>	<b>AFTER TOUCHING PATIENT SURROUNDINGS</b>	<b>WHEN?</b> Clean your hands after touching any object or furniture in the patient's immediate surroundings, when leaving – even if the patient has not been touched.
		<b>WHY?</b> To protect yourself and the health-care environment from harmful patient germs.

# Hand Hygiene

Proper Hand Hygiene is the single most important factor for preventing Hospital Acquired Infections (HAI).

Hand hygiene procedures include the use of alcohol-based hand rubs (containing **60%–95% alcohol**) and **hand washing with soap and water**.



Hands should be disinfected:

- Scrub hands for at least **20 seconds**
- **No** artificial nails, tips, gels, etc.
- Gloves should be used when touching blood, body fluids, etc.
- Remove gloves and perform hand hygiene following any contact previously stated above



# Covid-19 Pandemic

## Wash your hands often

Wash your hands often with soap and water for at least **20** seconds especially after you have been in a public place, or after blowing your nose, coughing, or sneezing.

If soap and water are not readily available, **use a hand sanitizer that contains at least 60% alcohol**. Cover all surfaces of your hands and rub them together until they feel dry.

**Avoid touching your eyes, nose, and mouth** with unwashed hands.

# Healthcare-Associated Infection (HAI)

**Healthcare-Associated Infection (HAI)** is an infection that develops after contact with the healthcare system. An HAI:

- Is not present or incubating at the time healthcare services begin
- Presents symptomatically **48 hours** or more after admission or provision of care

Infections that develop before an individual enters a healthcare facility are **community-acquired infections**. If a person **develops an infection while receiving healthcare**, it may be named a **healthcare-associated infection (HAI)**.

# HAI: Prevention

Preventing HAI is an important focus of the Centers for Disease Control and Prevention (CDC) and healthcare accrediting organizations.

- CAUTI (catheter-associated urinary tract infection)
- CLABSI (central line–associated bloodstream infection)
- CDI (*Clostridium difficile* infection)
- MRSA (methicillin-resistant *Staphylococcus aureus*)
- SSI (Surgical site infections)
- VAP (Ventilator Associated Pneumonia)

Protective measures to prevent the spread of infection

- Follow infection control policies & procedures
- Use standard and transmission-based precautions
- Get vaccinated
- Talk to patient & family about infection prevention
- Use antibiotics the right way
- Stay home when there are signs of infection





# Bloodborne Pathogens

- **Bloodborne pathogens are infectious microorganisms in human blood that can cause disease in humans.**
- These pathogens include, but are not limited to,
  - hepatitis B (HBV)
  - hepatitis C (HCV) and
  - human immunodeficiency virus (HIV)

## Risk of Exposure

Workers in many occupations, including first aid team members, housekeeping personnel in some industries, nurses and other healthcare personnel may be at risk of exposure to bloodborne pathogens.

# How are BBPs Transmitted?

- Direct contact of infected blood to open cut, skin abrasion or mucous membrane (eyes, nose, mouth)
- Needle sticks and other “sharps” injury
- IV drug abuse
- Blood transfusion
- Sexual transmission
- Perinatal
- Breastfeeding (HIV)

# Standard (Universal) Precautions

- An infection control method to treat **All** human blood and certain human body fluids as if they were known to be infectious for HIV, HBV, and other bloodborne pathogens.
- Apply to all patients regardless of their diagnosis or presumed infection status
- Precautions apply to blood, body fluids, secretions, excretions regardless of whether or not they contain visible blood
- Includes the use of **hand washing** and use of **Personal Protective Equipment** (gowns, mask, gloves, goggles) for protection against exposure to blood and/or body fluids
- Use sharps (needles, scalpels, etc.) carefully and appropriately. For example, do not bend or recap needles; use safe injection practices; take care to prevent accidental sticks.

# Personal Protective Equipment

**Gloves**-use whenever there is a reasonable expectation of exposure to blood or body fluids (BBF)

- A **MUST** for: Contact Isolation.
- **Artificial Airway (Vent or Trach)**

**Gowns**-wear when there is potential for contamination of clothing with BBF.

**Masks**-there are 2 types of masks used by health care workers

- The **N-95 mask** is used by HCWs when caring for a patient in Airborne precautions.
- A **surgical mask** is used when there is anticipation of splash or splatter of body fluids when providing care and when caring for patients on **Droplet** precautions.

**Goggles/ Eye Protection**

- Eye protection is used when there is anticipation of splash or splatter of body fluids.

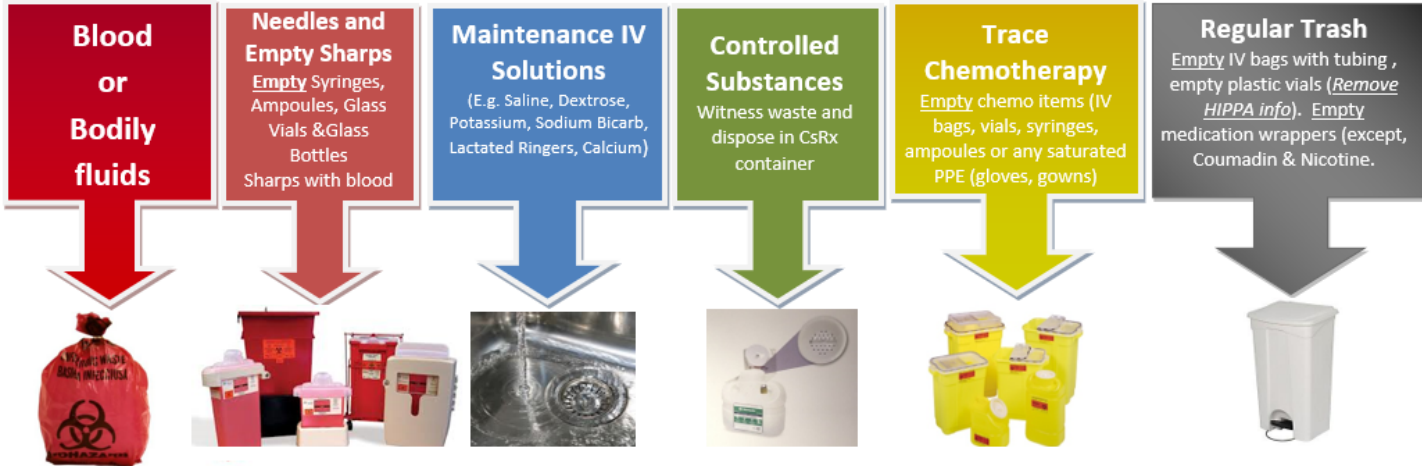
# Biohazardous Waste

Use “**RED BAGS**” for:

- Absorbent materials that are saturated with blood or body fluids.
- Non-absorbent, **non-sharp devices** contaminated with blood or bloody fluids (suction container liners, IV tubing, foley tubing, etc.).
- Blood products, body parts, tissues, etc.
  - ✓ Must be labeled with the International Biohazard symbol.



# Holy Cross Hospital Rx FLYER



## PHARMACEUTICAL WASTE

Waste only when there is leftover/ unused medication. Waste Alerts are found in Meditech and Pyxis.

### Medications left in a SHARP



- Syringes w/needles
- Ampoules
- Small glass vials

**\*No empty items, trash, IV's, CONTROLLED SUBSTANCES. Remove HIPPA info.**

### 'ALERT' Medications left in Non-Sharp format



- Partial IV bags/vials/oral liquids
- Pills/capsules/tablets
- Topical medication (creams, ointments, eye drops)

*Nicotine, Coumadin, & Physostigmine - Place packaging and/or leftover unused med in large black container*

**\*No sharps, empty items, empty IV bags, plain IV solutions, trash, CONTROLLED SUBSTANCES. Remove HIPPA info.**

### All drugs with NO ALERT 'Default Waste Container'



- Partial IV bags/vials/oral liquids
- Pills/capsules/tablets
- Topical medication (creams, ointments, eye drops)

**\*No empty items, trash, etc....  
\* No controlled substances or plain IV solutions**

### 'ALERT' Send to Pharmacy

Seal unused or partially used medication in a clear Ziploc bag and send to Pharmacy for proper disposal

- Aerosols/ Pressurized Inhalers
- Oxidizers
- Corrosives

# Transmission-Based Precautions

## Contact Precautions

- Precautions for patients known or suspected to be infected with microorganisms that are transmitted by **direct or indirect contact** with the patient, environmental surfaces or items in the patient's environment
- Wear gloves and gown must be worn the entire time you are in the patient's room
  - ✓ Resistant bacteria (MRSA, VRE, C. difficile, other MDROs-Multidrug resistant organisms)
  - ✓ Scabies & Lice

# Monkeypox

- This is a rare, sometimes life-threatening **zoonotic infection**. An endemic in west and central Africa.
- This is caused by *Monkeypox virus* (which is an **orthopoxvirus**). Specific animal reservoir unknown, but likely small mammals.
- It can spread from infected animals to humans and person-to-person via respiratory secretions, intimate skin-to-skin contact, contact with infected body fluids (e.g., fluid from vesicles and pustules), fomites (e.g., shared towels, contaminated bedding)
- **Isolation Precautions** – Droplet and Contact





# Monkeypox

## Clinical Symptoms

- Skin rash or enanthem in all patients
- Lesions in different phases of development seen side-by-side
- Rash either scattered or diffuse; sometimes limited to one body site and mucosal area (e.g., anogenital region or lips/face)
- Presenting complaint sometimes anorectal pain or tenesmus; physical examination yields visible lesions and proctitis
- Prodromal symptoms mild or not occurring
- Fever, lymphadenopathy not occurring in all patients
- Some co-infections with sexual transmitted infections (STIs)



# Transmission-Based Precautions

## Droplet Precautions

- Microorganisms transported by large particle droplets, generated by an infected patient during coughing, sneezing, talking or performance of other procedures
- Wear a surgical mask the entire time you are in the patient's room
  - ✓ Bacterial meningitis and meningococemia
  - ✓ Pertussis
  - ✓ Influenza
  - ✓ Mumps, Rubella, Parvovirus B 19

# Transmission-Based Precautions

## Airborne Isolation Precautions

- Used for patients known or suspected to be infected with pathogens that are transmitted by airborne droplet nuclei (ex. TB, Measles, **Covid-19**)
- Wear respiratory protection (N-95 particulate respirator mask) when in patient's room; keep door closed; patient must be in a negative pressure room.



# Flu Season



- Adults shed the infectious influenza virus at least **1 day before** any symptoms appear and continue to shed for **5-10 days after symptoms appear**
- Approximately 50% of influenza infections can be asymptomatic
- Both symptomatic and asymptomatic individuals can **shed** the virus and be a source of infections to others, especially patients

It is the policy of Trinity Health that all Employees and Health Care Providers / Personnel (“HCP”) are required to receive an **influenza vaccination**, and any subsequent booster vaccinations, unless Trinity Health approves an exemption for either medical contraindications or as a religious accommodation. Employees with an approved exemption may be required to take other precautions as defined by Trinity Health, including but not limited to wearing a mask and physically distancing to prevent the spread of influenza. (See Influenza Vaccine Policy)

[Read HCH Influenza Vaccine Policy](#)

# Tuberculosis

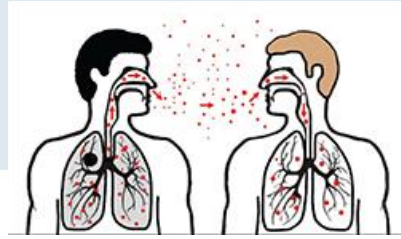
TB is a disease caused by a bacterium called *Mycobacterium tuberculosis*. The bacteria usually attack the lungs, but TB bacteria can attack any part of the body such as the kidney, spine, and brain. If not treated properly, TB disease can be fatal.

Symptoms of TB disease include:

- a bad cough that lasts 3 weeks or longer
- pain in the chest
- coughing up blood or sputum
- weakness or fatigue
- weight loss
- no appetite
- chills
- fever
- sweating at night



# Transmission & Prevention of TB



## Transmission

- TB is spread through the air from one person to another. The TB bacteria are put into the air when a person with TB disease of the lungs or throat coughs, sneezes, speaks, or sings. People nearby may breathe in these bacteria and become infected.
- Close contacts at highest risk of becoming infected

## Prevention

- Early recognition-signs and symptoms, history, etc., especially in ER
- Institution of airborne precautions (negative pressure room with special air handling) to prevent transmission by droplet nuclei; N-95 Particulate Respirators for health care workers
- Isolation of HIV + patients with respiratory symptoms until TB is ruled out
- If exposure occurs, screening process is initiated

# Multidrug Resistant Organisms

- MDRO is a bacterial pathogen that is able to survive exposure to multiple commonly used antibiotics due to changes in genetic coding.
- As a result, more powerful, more toxic and more expensive antibiotics must be used to treat infection and eradicate these organisms.
- MDRO infections are associated with increased lengths of stay, costs, and mortality.

## Transmission Prevention Strategies

- HAND HYGIENE
- Use **Contact Precautions** (gowns, gloves and good hand hygiene) for care of these patients even if contact is not anticipated
- Private room when possible-appropriate patient placement
- Alert system for patient re-admission
- Monitor cleaning performance & use effective disinfectants and agents
- Dedicated patient equipment
- Touching surfaces in the patient's room is the same as touching the skin of the infected patient

# Antibiotic Resistance

Antibiotic resistance is the ability of bacteria to resist the effects of an antibiotic – that is, the bacteria are not killed, and their growth is not stopped.

Resistant bacteria survive exposure to the antibiotic and continue to multiply in the body, potentially causing more harm and spreading to other animals or people.

Antibiotic-resistant strains contribute significantly to HAI.

We can slow the spread of bacterial resistance by using antibiotics wisely.

Holy Cross Health is committed to antimicrobial stewardship. It is through our efforts in stewardship we will be able to provide our patients.....

- The right antimicrobial
- The right dose
- For the right indication and duration
- While minimizing unwanted consequences

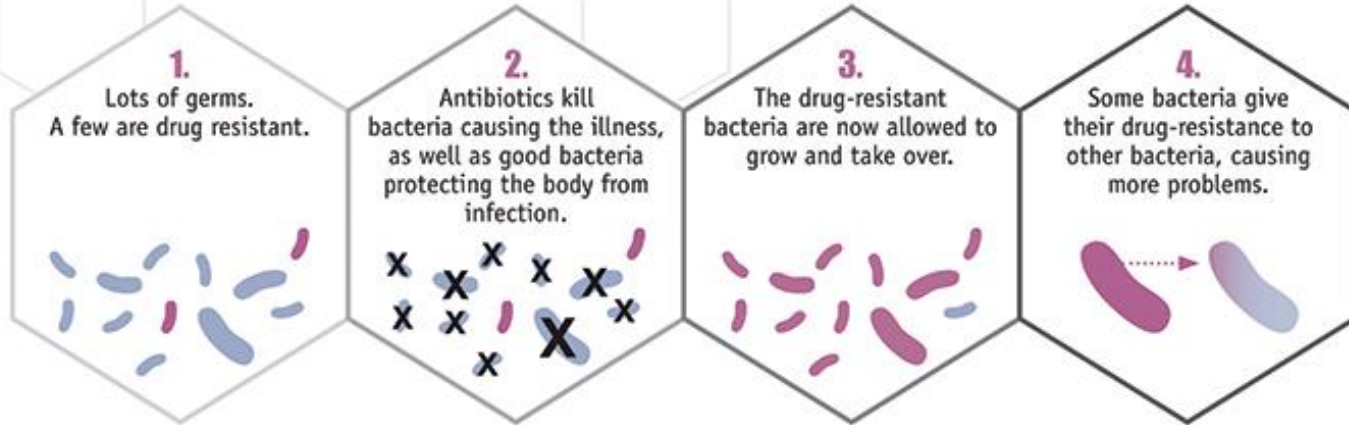
[cdc.gov/drugresistance/index.html](https://cdc.gov/drugresistance/index.html)



# How Antibiotic Resistance Happens



## How Antibiotic Resistance Happens



# Clostridium Difficile

- C.Diff is a bacterium that causes diarrhea; it is shed in the feces; most cases of infection occur in patients taking antibiotics.
- Caused by exposure to antibiotics and other medications

## How it is spread

- Spread through contact with contaminated surfaces or items; C diff spores can be found on things in the environment like bed linens, bed rails, bathroom fixtures and medical equipment

## Most common symptoms:

- Watery diarrhea, fever, loss of appetite, nausea, abdominal pain & tenderness

## Preventing Transmission

- Place patient in a private room on **Contact Precautions** (use **yellow sign**)
- Wear gowns and gloves for patient contact.
- Perform hand hygiene with **antimicrobial soap and water**
- Use dedicated equipment for the patient (disinfect shared equipment after use)

# Holy Cross Recognitions

BeRemarkable.®

# The Joint Commission Advanced Certification in Heart Failure

## Congestive Heart Failure program

- provides the next generation of heart failure care
- has met and seeks to maintain The Joint Commission's high standards in providing stroke or heart failure care.



# What is Heart Failure?

Heart Failure (HF) is a very common problem in the United States. It affects over 550,000 Americans each year. It is the leading cause for adults over the age of 65 to be admitted to the hospital.

Heart failure is called ***congestive heart failure*** when fluid builds up in various parts of the body. Heart failure symptoms usually develop over time as the heart becomes weaker and less able to pump the blood that the body needs. When you have heart failure, it doesn't mean that the heart has stopped beating. It means that the heart is not pumping blood as it should. The heart keeps working, but the body's need for blood and oxygen is not being met.

# The Joint Commission Certification for Thrombectomy-Capable Stroke Centers

- Holy Cross Health is certified as **Thrombectomy-Capable Stroke Center**
- Holy Cross Provides round-the-clock personnel, infrastructure, expertise and programs to diagnose and treat stroke and TIA (Transient Ischemic Attack) patients, who require a high degree of medical and surgical care, specialized tests or interventional treatments.



# Stroke Warning Signs

What is a Stroke?

Stroke is a disease that affects the arteries leading to and within the brain. It is the No. 5 cause of death and a leading cause of disability in the United States.

A stroke occurs when a blood vessel that carries oxygen and nutrients to the brain is either blocked by a clot or bursts (or ruptures). When that happens, part of the brain cannot get the blood (and oxygen) it needs, so it and brain cells die.



**END**

Click Exit to close the program.

**BeRemarkable.**<sup>®</sup>

Thank You.

