

# **STUDENT ORIENTATION MANUAL**

**MEDICAL, NURSING & CLINICAL  
ANCILLARY SUPPORT**

Developed by: Education & Training Services  
Originated: July 1999  
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## Welcome

On behalf of our staff, physicians and volunteers, welcome to Sacred Heart Health System. Throughout Pensacola and much of Northwest Florida, Sacred Heart is considered the hospital of choice. Without question, it is our associates who make us number one. It is our associates who are “at the heart of it all”.

At Sacred Heart, you will hear a lot about Core Values and Core Commitments. These values and commitments serve as the foundation for everything we do. Whether you find yourself in direct patient care or working behind-the-scenes, your daily contribution to our mission of care is crucial. It takes each and every one of us working as a team and “living the values” to create the kind of health care delivery system that encourages our patients and their families to continually choose Sacred Heart for all their healthcare needs.

This orientation manual has been designed as a reference for you. It was developed in an effort to consolidate some very important information that you will need to know and understand. The manual contains information about the responsibilities you will assume and the benefits to which you are entitled. Please read it carefully. If you have any questions, do not hesitate to discuss them with your supervisor, Patient Care Services, Human Resources, or Education and Training Services.

We sincerely hope that your time with Sacred Heart Health System will be filled with challenging and satisfying experiences.

God Bless You.

*Susan L. Davis Ed.D, RN, FACHE*  
Ascension Health Market Leader  
Florida/Alabama/Community Health Ministries

President & CEO  
Sacred Heart Health System



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# **Section I**

# **Instructions**

## Instructions for use of the Student Orientation Manual

Education and Training Services has developed this orientation manual to assist students entering Sacred Heart Health System. The following guidelines will help you to fulfill all the requirements necessary to create a satisfying clinical experience:

1. Read Section II – Sacred Heart Health System: Our Culture.
2. Read Section III – Student Guidelines & Information
3. Complete all education as outlined on the SHHS web site. These requirements must be completed before beginning your first day in the health system:
5. Complete the Medical Record form provided in Section IV (if clearance has not already been established through your facility). This form must be returned to Human Resources, Associate Health before your first day in the hospital. You will need this form to get your identification badge (if needed).
6. Obtain a non-associate identification badge from Human Resources only if you will not be utilizing an identification badge from your facility. A badge must be worn at all times while on the Sacred Heart campus.
7. The Appendix Sections A & B contain tools for your use while assigned in the hospital. These do not have to be returned to Education. They are for your own personal use to enhance your experience.

# **Section II**

## **Sacred Heart Health System: Our Culture**

## **Our Mission and Our Values**

Sacred Heart Health System's mission of care for the sick and the poor is the driving force behind all of the hospital's services. Our philosophy of compassionate Christ-centered care is based on Ascension Health core values:

### **Service of the Poor**

**Reverence**

**Integrity**

**Wisdom**

**Creativity**

**Dedication**

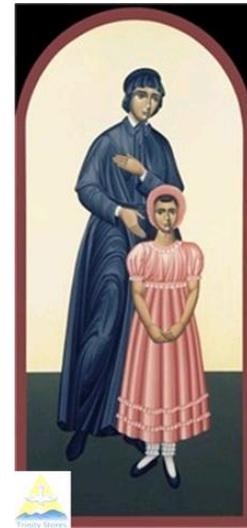
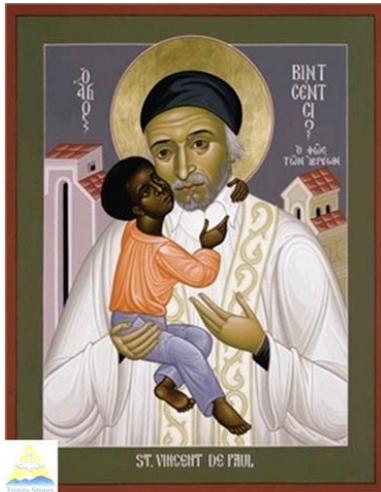


## **Our Mission Statement**

Our mission is to witness the healing ministry of Christ by providing quality health services based on the needs of our community in an atmosphere of respect and compassion.

## History & Heritage

It is important to understand the motivation of Sacred Heart's founders, St. Vincent, St. Louise, and St. Elizabeth. Their three guiding principles were to care for the poor, to have a creative vision, and to be thoughtful stewards of available resources. These principles are still relevant in today's healthcare environment and are deeply a part of Sacred Heart's Core Values.



“Leaving no one behind” is one of Ascension Health’s primary goals as a foremost healthcare system. Providing quality care to the poor requires millions of dollars each year. Creative vision in our ministry and very careful stewardship of resources is imperative to continue such care. Sacred Heart associates must resolve to make thoughtful resource decisions and to be accountable for all choices and actions.

With such an evolving healthcare system, it is vital for all associates to hold tightly to Sacred Heart’s founding principles and to have faith in the work of our mission. In so doing, we can continue to achieve great things just as our Founders did so many years ago.

# Values

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## IN PRACTICE

### What is Values in Practice?

- **In summary, Values in Practice promotes a Values Based Culture where we emphasize...**
  - A commitment to Living our Core Values;
  - The alignment of Behaviors;
  - Accountability for our Actions; and
  - An emphasis on Excellence
- **Our goal is to create and sustain a culture where our organization is a better...**
  - Place for patients to receive care;
  - Environment for our Associates to work; and
  - Place for physicians to practice medicine
- Values In Practice is not a “Flavor of the Month” Program that will be here today, gone tomorrow. Rather, it has been developed in the spirit of our Mission and Values to provide prescriptive, consistent practices that will take Sacred Heart from a very good organization to a great one.
- Values in Practice positions us for improved Associate, Patient and Physician Satisfaction...and improving Satisfaction will lead to increased volume, decreased length of stay, better clinical outcomes & quality of care, staff retention and ultimately the growth of our Mission.

### 5 Accountabilities or Pillars



We have embraced the “Accountability” or “Pillar” concept in goal setting. The Pillars provide the foundation for setting organizational goals and provide the framework for the evaluation or measurement process. Once the goals for each pillar are set for the organization as a whole, they are cascaded throughout, from the division level to department or unit level, to the individual leader. Our Five Accountabilities (Pillars) are: Service, People, Quality, Financial, and Growth. These Pillars then lay the framework for consistent evaluations, communications, and work planning. At Sacred Heart Health System, our pillars are supported by two constants: First, our Mission, which is our reason for being – simply put, it is why we are here. Second, our Values (Service of the Poor, Reverence, Integrity, Wisdom, Creativity and Dedication) serve as the foundation and describe how we accomplish our Mission and goals. To create and sustain desired results, we have aligned our goals to the pillars and will focus on behaviors as outlined in the Nine Principles<sup>sm</sup>.

### **Nine Principles**<sup>sm</sup>

The Nine Principles<sup>sm</sup> were developed by the Studer Group to provide organizations and individuals a sequenced step-by-step process to attain desired goals based on the 5 Pillars. The Nine Principles<sup>sm</sup> have been called a roadmap to help leaders navigate the journey to developing an excellence-based culture. From Principle One, Commitment To Excellence and the focus on goal setting, to Principle Nine, Reward and Recognition, these principles are a critical element to reaching our goals.

#### **Principle #1: Commit to Excellence**

It all starts with a firm and measurable commitment to excellence. What is excellence really? Excellence is when associates feel valued, physicians feel the organization is the best, and patients feel the service is extraordinary. A commitment to excellence impacts the bottom line while living out the Mission and Values of the organization. It creates alignment for our associates and our leaders while putting the “why” into health care.

#### **Principle #2: Measure the Important Things**

In order to achieve excellence, an organization needs to be able to objectively assess its current status as well as progress. Principle #2 helps us define specific targets and measurable tools, and align the necessary resources to hit those targets.

#### **Principle #3: Build a Culture Around Service**

All successful change requires well thought-out processes and procedures that must become the norm or be hardwired into the organization. This principle teaches how to connect services to organizational values - script behaviors, create teams, teach service recovery, and develop standards of performance. There is no higher responsibility than to ensure high quality and a caring environment for our patients.

**Principle #4: Create and Develop Leaders**

Leadership is crucial to sustaining a culture of organizational excellence. This principle teaches how to identify current and future leaders and then how to develop, train, and equip those leaders in a cost-effective manner.

**Principle #5: Focus on Associate Satisfaction**

The saying "A chain is only as strong as its weakest link," holds true within every organization. Every associate is critical to the success of an organization. Satisfied associates do a better job. It's that simple. This principle shows how an organization, by focusing on associate satisfaction, can improve patient and physician satisfaction while decreasing costs. Build a better workforce!

**Principle #6: Build Individual Accountability**

What if your staff acted like owners instead of renters? Principle #6 teaches how to create a self-motivated workforce. It's amazing what your staff will do when they feel ownership and alignment with an organization.

**Principle #7: Align Behaviors with Goals and Values**

Through Principle #7, organizations are shown how to create and implement objective, measurable evaluation systems that are tied to the Five Pillars. Leadership report cards and 90-day action plans are used to support the evaluation system, and align leadership and resources in an organization.

**Principle #8: Communicate at all Levels**

This principle often referred to as "Managing Up," can work magic in an organization. Change occurs when all leaders are aligned, and everyone understands what is important, and what they need to do to help accomplish organizational goals. This method speeds up the decision process, creates proactive behavior, and improves working relationships.

**Principle #9: Recognize and Reward Success**

Everyone makes a difference! We must recognize of those who live our Values on a daily basis and establish real life examples for others to follow. Create win-win-wins for your staff. Never let great work go unnoticed!

Through the implementation of the Nine Proven Principles, our culture of excellence will be transformed. These practical principles turn satisfaction into bottom line results.

## Nine Principles<sup>SM</sup>

### The Key Strategies & Tactics to Achieve Our Goals

<b>Principle #1</b>	<b>Commit to Excellence</b>
<b>Principle #2</b>	<b>Measure the Important Things</b>
<b>Principle #3</b>	<b>Build a Culture Around Service</b>
<b>Principle #4</b>	<b>Create and Develop Leaders</b>
<b>Principle #5</b>	<b>Focus on Associate Satisfaction</b>
<b>Principle #6</b>	<b>Build Individual Accountability</b>
<b>Principle #7</b>	<b>Align Behaviors with Goals and Values</b>
<b>Principle #8</b>	<b>Communicate at all Levels</b>
<b>Principle #9</b>	<b>Recognize and Reward Successes</b>

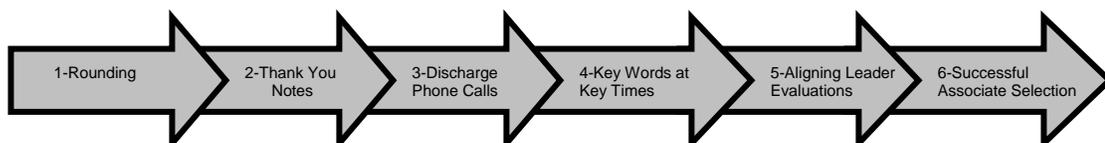
## Six Must Haves

Studer Group coaches are continuously sharing best practices, discussing challenges, and collectively exploring how to improve performance for clients. The Studer Group looked at more than 250 organizations and started to identify the specific actions, based on the Nine Principles<sup>SM</sup> that were common to those organizations achieving great results. In this review, six key behaviors surfaced as Must Haves of a Culture of Excellence.

"Must Haves," in order of suggested sequence are:

1. Effective leader rounding,
2. Associate thank you notes,
3. Discharge phone calls to patients,
4. Key words at key times (i.e., scripting),
5. Aligning leader evaluations with desired behaviors, and
6. Successful associate selection and coaching, especially the first 90 days of employment.

These "Must Haves" will position us for improved patient, associate, and physician satisfaction. Satisfaction improvement in these areas will lead to increased volume, decreased length of stay, better clinical outcomes, and better staff retention, which leads to a better bottom line.



## Eight Dimensions of Care (New Tool to Measure Patient Satisfaction)

### Where do the Eight Dimensions of Care Come From?

The Institute of Medicine published a report (Crossing the Quality Chasm) in 2001 that outlined recommendations for redesigning healthcare in the 21<sup>st</sup> century. They established 6 key aims for improving care. **Healthcare should be:**

1. **Safe:** Avoiding injuries to patients from the care that is intended to help them.
2. **Effective:** Providing Services based on Scientific Knowledge to all who could benefit in refraining from providing service to those not likely to benefit (avoiding under use and overuse).
3. **Patient Centered:** Providing care that is respectful of and responsive to individual patient preferences, needs and values and ensuring that patient values guide all clinical decisions.
4. **Timely:** Reducing waits and sometimes harmful delays for both those who receive and those who give care.
5. **Efficient:** Avoiding waste, including waste of equipment, supplies, ideas, and energy.
6. **Equitable:** Providing care that does not vary in quality because of personal characteristics such as gender, ethnicity, geographic location and socioeconomic status.

Sacred Heart Health System, along with all other local health ministries within Ascension Health, is focusing on these “aims” as outlined by the Institute of Medicine. In fact, you’ll notice that Ascension Health’s newly launched initiative entitled “Call to Action” incorporates these themes.

One of the aims is patient centeredness, which focuses on the patient’s experience of illness and healthcare, and on the systems that work or fail to work to meet individual patient ‘s needs. Patient Centered encompasses qualities of compassion, empathy and responsiveness to the needs, values, and expressed preferences of the individual patient. Years of research by the Picker Institute and the American Hospital Association identified these same key areas that patients and their families truly care about and outlined them in the “Eight Dimensions of Care.” Our organization has adopted a new Patient Satisfaction Survey tool that is based on these same “Eight Dimensions of Care.” In addition, The Agency for Healthcare Research & Quality has also adapted the Eight Dimensions of Care as a way to achieve quality in healthcare. They are in the process of establishing national standards in care based upon these 8 dimensions. These standards will ultimately be a part of a national survey tool that participating hospitals will be required to use and share their results.

**In Summary, the Eight Dimensions of Care are as follows:**

- **Respect for patient's values, preferences, and expressed needs:**  
Patients indicate a need to be recognized and treated as individuals by hospital staff. They are concerned with their illnesses and conditions and want to be kept informed. An atmosphere respectful of the individual patient should focus on quality of life, involve the patient in medical decisions, provide the patient with dignity, and respect a patient's autonomy.
- **Coordination and integration of care:**  
Patients report feeling vulnerable and powerless in the face of illness. Proper coordination of care can ease those feelings. Patients identified three areas in which care coordination can reduce feelings of vulnerability. They are: coordination of clinical care, coordination of ancillary and support services, and coordination of "front-line" patient care.
- **Information and education:**  
Patients express a fear that information is being withheld from them and that staff are not being completely honest about their condition and prognosis. Based on patient interviews, hospitals can focus on three communication items to reduce these fears. They are: information on clinical status, progress and prognosis; information on processes of care; and information to facilitate autonomy, self-care and health promotion.
- **Physical comfort:**  
The level of physical comfort patients report has a tremendous impact on their experience. Three areas were reported as particularly important to patients. They are: pain management, assistance with activities and daily living needs, and hospital surroundings and environment.
- **Emotional support and alleviation of fear and anxiety:**  
Fear and anxiety associated with illness can be as debilitating as the physical effects. Caregivers should pay particular attention to anxiety over physical status, treatment and prognosis; anxiety over the impact of the illness on themselves and family; and anxiety over the financial impact of illness.
- **Involvement of family and friends:**  
Patients continually addressed the role of family and friends in the patient experience, and often expressed concern about the impact their illness has on family and friends. Family dimensions of patient-centered care were identified as follows: accommodations provided family and friends; involving family and close friends in decision making; supporting family members as caregivers; and recognizing the needs of family and friends.

- **Transition and continuity:**  
Patients often express considerable anxiety about their ability to care for themselves after discharge. Meeting patient needs in this area requires staff to provide understandable, detailed information regarding medications, physical limitations, dietary needs, etc.; coordination and planning of ongoing treatment and services after discharge; and providing information regarding access to clinical, social, physical and financial support on a continuing basis.
  
- **Access to Care:**  
The extent to which patients are able to reach treatments and services when needed and mobilize within them. This includes waiting times, patient's ability to find out about, get referred to, and physically get to services; Accessibility for diverse populations and services provided.

Please note that such things as parking, food service, and signage are not among the top concerns of patients. Typically, these are institutionally-based concerns and must be measured. **However, through Values in Practice, we will focus on the Eight Dimensions of Care.**

## **Section III**

# **Student Guidelines & Information**

## **Student Guidelines & Information**

### **THE STUDENT'S ROLE**

All students are expected to be familiar with and to follow all Sacred Heart Health System policies and procedures while participating in clinical experiences within the system. Instructors will assist you in becoming comfortable.

Your primary responsibility is to your instructor. You are also responsible to your preceptor and to the unit manager. Introduce yourself to them as soon as you report for your assigned duties.

### **ABSENCE**

Absence is defined as any unplanned period of time off no matter what reason is provided. Tardiness is defined as not reporting for clinical assignment at the scheduled time; unauthorized early departure is considered a reverse form of tardiness.

Excessive absences, tardiness, and/or failure to report an impending absence to the appropriate person may result in suspension of your student clinical privileges at our campus. Your instructor can provide more details regarding absences and tardies.

### **ACCIDENTS: PATIENT OR VISITOR**

If you are involved in, witness, or discover an accident involving a patient, visitor, or volunteer, report it at once to Security or Quality/Risk Management (you will receive education on this). The individual(s) involved in the accident, no matter how minor, will be given the opportunity to be taken to the Emergency Department.

### **AMERICANS WITH DISABILITIES ACT**

Enforcement of the American with Disabilities Act is administered by the Equal Employment Opportunity Commission (EEOC). The ADA is a federal law that forces employers to focus on an individual's abilities rather than their limitations. The ADA prohibits an employer from discriminating against disabled individuals in regard to the terms or conditions of employment if the individual is qualified to perform the essential functions of the job with or without reasonable accommodation.

We believe that ADA protected individuals are productive members of our community. Many are valuable associates of Sacred Heart Health System, as well. Associates and students are expected to demonstrate sensitivity and

remember that a disability does not mean an individual cannot perform the job duties for which they were hired. Our organization is considerate of individuals with disabilities during the hiring process and throughout their employment. We will make every reasonable accommodation for individuals with disabilities and will educate our associates and students accordingly. Associates and students are expected to comply with ADA laws at all times.

## **ANNUAL HEALTH CLEARANCE**

You are required to visit the Associate Health office to receive an annual health clearance (unless clearance has been provided through your facility). This measure provides preventative health maintenance to associates and students and ensures that no communicable diseases are present. This service is mandatory and free.

## **CHAPEL**

Chapels are located at all hospital campuses, and are open 24 hours a day to all faiths. Our reception desks can provide directions for you. The schedule for Mass is posted outside of the Chapel. You are always welcome to spend a few moments in the Chapel in prayer or meditation.

## **CODE 3**

**Any hospital personnel shall initiate a Code 3 by dialing 3333 on any hospital telephone, upon discovering or witnessing a cardiac and/or respiratory emergency situation.** A Code 3 is a patient/visitor arrest. This may involve having the emergency team summoned by the switchboard operator and properly positioning the patient and beginning cardiopulmonary resuscitation. All appropriate life sustaining measures must be carried out as ordered by the physician in charge of the code.

**Student's role:** In the event a Code 3 is called in your area, **your role during the code is that of an observer.** You may carry out instructions directly given to you by the code team leader to assist other team members.

If there are any questions regarding your role during an emergency, please direct them to your instructor or preceptor the first day of your clinical rotation.

## **COMMUNICATION WITH ASSOCIATES AND STUDENTS ON DUTY**

Personal telephone calls while on duty are discouraged. All personal telephone calls are referred to the appropriate department director who will determine whether the associate or student will be interrupted. In the event of an

emergency, the associate or student will be contacted immediately. In addition, personal beepers, pagers or cell phones may not be worn while on duty.

Public telephones are available to the associate and student for making phone calls during rest or meal breaks.

Due to the large quantity of mail delivered each day, personal mail should be addressed to your home address, not to Sacred Heart Health System. (HR 48)

Additionally, we request that you do not bring family members or friends to the clinical areas. Please have them wait in the lobby area.

## **CONTAGIOUS DISEASE**

Sacred Heart Health System provides acute medical and surgical care to patients throughout our community and region. As such a provider, Sacred Heart has a duty to treat patients with all diseases, regardless of the disease presented. Sacred Heart also works to provide a safe place for associates and students to work and for our patients to receive care. Thus, Sacred Heart has specific guidelines protecting patients, associates and students that it must and does follow. If you encounter a situation or have a question involving safety or risk related to contagious diseases, you should speak to your instructor, preceptor or unit manager. If they cannot resolve the issue, your concern should be addressed by the Vice President, Operations/Chief Nursing Officer (CNO).

## **CONTINUING EDUCATION**

Sacred Heart Health System is committed to the provision of quality patient care and to the professional growth and development of its associates. Accordingly, the Health System conducts numerous in-service and continuing education programs specifically designed to meet the needs of our associates. As students, you are encouraged to take advantage of this service. Every month, Education and Training Services prepares a calendar of educational offerings and distributes it to all departments. Also, bulletin boards are located outside the Education office and contain postings of upcoming educational events. Consult your instructor or preceptor if you wish to attend or participate in any of these programs.

## **CORPORATE RESPONSIBILITY PROGRAM**

The Health System has implemented a Corporate Responsibility Program, which has as its goal to ensure that the Health System complies with federal, state and local laws and regulations. It focuses on risk management and the promotion of good corporate citizenship, including a commitment to uphold a high standard of ethical and legal business practices. All associates and students should refrain from conduct which violates any laws, rules or regulations. Likewise, associates and students should report any infraction to appropriate levels of management (see Standards of Conduct) or anonymously call the confidential, toll-free Values

Line Hotline at 800-707-2198.

## **DIVERSITY**

It is important to value and celebrate diversity. A goal here at Sacred Heart is to raise awareness about individual differences and to strive to understand how such differences can inhibit or enhance the way people work together.

Diversity can spark creativity. The uniqueness of individuals can be blended to strengthen Sacred Heart Health System. The creative ideas and thought processes of every associate and student are vital to furthering the second founding principle of having creative vision.

The benefits of accepting and encouraging diversity include:

- ❑ Our customers and their families appreciate doing business with and organization that is sensitive to their needs.
- ❑ Our ability to hire and retain talented associates is strengthened.
- ❑ Our ability to discover untapped talents and resources is enhanced.
- ❑ Organizational morale is improved
- ❑ Productivity, profits and financial growth is increased.

Clearly, promoting diversity is the right thing to do.

## **DRESS CODE & APPERANCE**

The opinion about Sacred Heart Health System depends largely on the public's interaction with its staff and students. A professional appearance makes a positive impression on our patients and their families. It is important to be well-groomed and wear neat, clean attire. One's appearance at work should inspire confidence and reflect professionalism. All staff and contract associates must adhere to the Sacred Heart organizational and departmental specific dress code policies while on duty. Students must adhere to their respective school policies; consideration should be given to the type of unit involved in their clinical experience. Certain departmental dress codes have been modified to incorporate the specific needs of the work environment.

The following dress code has been established to promote a consistent professional image and to meet infection control standards:

- ❑ ID badges will be worn in plain sight with the associate's or student's picture (if present) facing the front. Pins, stickers, etc. should not be placed on the ID badge.
- ❑ Clothing should be conservative, professional, and appropriate for the operational requirements of each department. Shorts and jeans are not permissible.

- Hemlines should be no shorter than just above the knee and no longer than ankle length.
- Pants should be loose fitting.
- Footwear should be a conservative style that is clean and safe for the operational requirements of each department. Socks or hosiery must be worn at all times.
- Jewelry should be conservative and professional and worn only on the ears, neck, wrists and hands as appropriate for the operational requirements and standards of each department. Visible body piercing is not permitted, except on the ears.
- Hair should be well-groomed and worn in a conservative, professional style.
  - Hair color must be kept to natural shades such as blonde, brunette, red, gray, etc. Colors such as pink, purple, blue, etc., even as highlights, are not acceptable.
  - For direct patient caregivers, if hair is shoulder length or longer, then it must be pulled back and contained through the use of hair nets, barrettes, braids, etc.
  - Facial hair, if grown, must be well-trimmed and well-groomed and appropriate for a healthcare environment.
- Fingernails should be kept clean and neatly trimmed as appropriate for the operational requirements and standards of the department. Direct patient caregivers must not wear artificial nails or nail jewelry.
- Make up should be worn in moderation and in good taste.

While on campus, off duty personnel should convey a professional image but may be more casual.

## **DRUG-FREE ENVIRONMENT**

To protect our patients, associates, and others, we are committed to providing a drug-free working environment safe from the risk of accidents and injuries. Each Health System associate has a responsibility to patients, co-workers and the public to deliver services in a safe and conscientious way. Continuing research and practical experience has proven that even limited quantities of narcotics, abused prescription drugs or alcohol can impair reflexes and judgment. This impairment, even when not readily apparent, can have catastrophic results, as in the case of associates engaged in patient care or operating dangerous equipment. For these reasons, we have adopted a policy that all associates and students must report to work completely free from the presence of drugs and the effects of alcohol.

This policy should not be considered as contractual in nature. It represents the Health System's current standards for dealing with a serious national problem and is subject to change at any time without advance notice.

- ❑ Associates and students must report to work and remain drug and alcohol free: With the single exception of appropriate use of prescribed medicine in accordance with a physician's instructions, associates and students must not have any controlled substances in their systems while at work. For the proper use of prescribed medicines, see the section titled "Prescription Drugs" below.
- ❑ Drug Use/Distribution/Possession: All associates and students are prohibited from manufacturing, distributing, dispensing, possessing or using illegal drugs or other unauthorized, mind-altering, or intoxicating substances while on the Health System property (including parking areas and grounds), while otherwise performing duties away from the property. Included within this prohibition are lawful controlled substances that have been illegally or improperly obtained.
- ❑ Medical Duties Exception: Nothing in this Policy shall prohibit the lawful and appropriate dispensation, distribution, or possession of controlled substances where it is a necessary part of an associate's or student's assigned patient care duties.
- ❑ Alcohol Use/Possession: All associates and students are prohibited from distributing, dispensing, possessing, using or having alcohol present in their system while at work or on duty.
- ❑ Off-Duty Conduct: Associates and students who manufacture, distribute, dispense, or possess illegal or other unauthorized controlled substances, on or off Health System property, are subject to discharge. Off-duty use of controlled substances, whether drugs or alcohol, which results in impaired work performance of any kind or in conduct which risks harm to the Health System's image or its relationship with patients, associates, or the public, will result in discipline up to and including discharge. For associates and students suffering from substance abuse impairment, see the section titled "Associate Impairment," below.
- ❑ Prescription Drugs: The proper use of medication prescribed by a physician is not prohibited; however, the misuse of prescribed medication is prohibited. Associates and students using drugs at the direction of a physician are required to notify their instructor/supervisor, the Associate Health Manager, or the Associate Relations Coordinator in the Human Resource Department where these drugs may affect their job performance, such as by causing dizziness or drowsiness. It is the associate's and student's responsibility to determine from his/her physician whether a prescribed drug may impair job performance.

- Notification of Possible Impairment: Any associate or student suffering from a substance abuse problem should consult his or her Instructor/Supervisor, the Associate Health Manager or the Associate Relations Coordinator in the Human Resource Department who will help the associate secure assistance. It is the associate's and student's responsibility to seek help before performance or misconduct problems arise. Problems resulting from active use or abuse of a controlled substance will not be excused.

The following may warrant the initiation of drug screens:

Associates and students may be required to submit to screening whenever the Health System supervision has a **reasonable suspicion** that they have violated any of the rules set forth in this policy. Reasonable suspicion may arise from many factors, including observation, co-worker reports or complaints, decline in performance, attendance, behavior, or involvement in a workplace or vehicular accident indicating a possible error in judgment or negligence. Substance screening may be conducted at any **physical examination**. The Health System reserves the right to **randomly** conduct testing without advance notice where deemed necessary by management. Urinalysis, blood tests and other appropriate substance screenings / test procedures may be utilized to enforce the requirements of this policy. All urinalysis drug tests will utilize an initial immunoassay methodology with a confirmation of all positive test results by an alternate methodology such as gas chromatography/mass spectrometry using the same specimen. Written chain of custody documents and container labeling will be used to ensure that the specimen received is accurately tested and reported. Steps will be taken to control information surrounding test results. Questions regarding this policy or requests for approval for testing should be directed to the VP, Human Resources. Health System-sponsored **educational** programs may be scheduled periodically regarding the dangers associated with drug and alcohol abuse. (ENV 15)

## EMERGENCY PREPAREDNESS MANAGEMENT

Emergency Preparedness Management Safety Manuals are located in each department. Your instructor or preceptor will review the manual with you and explain what you are expected to do in case of fire or other disaster. **To report any kind of emergency, dial 3333.** You will receive additional education on environmental safety and emergency preparedness.

## EQUAL OPPORTUNITY

Sacred Heart Health System is an aggressive equal opportunity employer and all associates and prospective associates are considered equally without regard for age, handicap or disability, race or color, religion or creed, sex or marital status or national origin. It is our policy to select the best-qualified individuals for

employment based on the skill, education, training, and experience required for each position.

Sacred Heart Health System does not discriminate in violation of federal, state or local laws with respect to age, handicap or disability, race or color, religion or creed, sex, marital status, or national origin. This policy applies to all areas of the employer-associate relationship including recruitment, hiring, placement, benefits, rate of pay, promotion, transfer, training, working conditions and privileges.

If an associate feels that he/she is being discriminated against based upon race, color, sex, religion, national origin, marital status, age or physical or mental disability, the associate should immediately notify his/her supervisor or, in the alternative, the department of Human Resources or the Corporate Responsibility Officer. The matter will be investigated and where appropriate, disciplinary action will be taken.

## **FOOD & CONVIENIENCES**

### **Pensacola Campus**

- ❑ **Cafeteria: "Heart & Soul Cafe"**  
The "Heart & Soul Cafe" is available to you for meals and break periods. The cafeteria is located on the first floor of the Women's and Children's Hospital. Hours of operation are 6:30a-6:30p, seven days a week (the hotline closes at 2:00p, the grill closes at 3:00p).
- ❑ **Gift Shops**  
There are two gift shops available for convenience items such as snacks and toiletries. One gift shop is located next our first floor main entrance, which faces Cordova Mall, and the second gift shop is located on the first floor corridor of the Medical Mall. Hours of operation are 8:30a-4:30p.
- ❑ **Outpatient Pharmacy**  
The outpatient pharmacy is available for convenience items such as snacks and toiletries. It is located on the first floor corridor of the Medical Mall. Hours of operation are 8:00a-5:00p, Monday through Friday.
- ❑ **Starbuck's Coffee Shop**  
Starbuck's Coffee Shop offers coffee drinks and pastries. The shop is located on the first floor corridor across from Nursing Administration and the Express Admission Unit. Hours of operation are 6:30a-5:00p, Monday through Friday.
- ❑ **Subway**  
The restaurant is located on the first floor Main Entrance corridor. Hours of operation are 6:00a-10:00p, seven days a week.
- ❑ **Wendy's**  
Wendy's is available to you for meals. The restaurant is located on the first floor Main Entrance corridor. Hours of operation are 10:00a-11:00p, seven days a week.

## **Emerald Coast Campus**

### ❑ **Cafeteria**

The cafeteria is available to you for meals and break periods. The cafeteria is located on the first floor of the main hospital. Hours of operation are 11:15a-4:30p, seven days a week and open for breakfast 7:30a-9:15a, Monday through Friday.

### ❑ **Gift Shop**

The gift shop is available for convenience items such as snacks and toiletries. The gift shop is located next to our first floor main entrance. Hours of operation are 9:30a-4:30p, Monday through Friday.

## **GRIEVANCE**

Sacred Heart Health System provides a grievance procedure. A student may request review of a student related problem with the assurance that the grievance will be heard without jeopardy to his/her clinical experience. Any problem or complaint will be handled fairly and in accordance with Health System policies. The grievance procedure must be invoked within ten (10) days of the incident. If an incident is not timely grieved, it will be assumed for later purposes that no problem existed.

Each step in the grievance process should be presented in writing and identified as a grievance. The issue/problem should be clearly stated and the desired outcome should be identified. The student has three (3) workdays to proceed to the next step throughout the entire process. If the next step is not invoked at any point, the grievance will be deemed to have been abandoned and will be treated as though it had never been filed. The grievance steps are as follows:

Step 1: The grievance should be presented to the Director of Education & Training Services in writing. The Director will review the issue/problem and make reasonable efforts to resolve it. The Director will attempt to reply to the grievance in writing within three (3) workdays of receipt of grievance.

Step 2: If the student is not satisfied with the decision of the Director of Education & Training Services, the next step in the grievance process is to request a review of the grievance in writing by the VP of Human Resources. The VP will attempt to reply, in writing, within five (5) workdays of receipt of grievance. This review is final and binding.

## **HEALTH SYSTEM RULES**

Just as any community needs rules for the protection of its members, Sacred Heart has rules for the protection of its associates, students, patients, and visitors. Listed below are offenses that will result in dismissal or other disciplinary action.

The following list is not exhaustive and other actions not listed may also result in disciplinary action up to and including termination:

- ❑ Violation of our Core Values/Core Commitments/Performance Service Standards for Excellence
- ❑ Violation of the Mutual Respect Policy
- ❑ Violation of the Corporate Responsibility Program or the Standards of Conduct
- ❑ Insubordination, refusal to carry out assignments or other acts of disobedience
- ❑ Theft
- ❑ Delaying or restricting work or inciting other associates to do so
- ❑ Dishonesty or falsification of records
- ❑ Profanity or abusive language while on duty; improper conduct in performance of work assignment
- ❑ Clocking in or out for another person or having another associate clock in or out for you.
- ❑ Fighting or disorderly conduct
- ❑ Abuse of Health System property or property of other associates, patients, or visitors including general carelessness or negligence
- ❑ Possession, use or under the influence of alcohol or narcotics while on Health System property or unauthorized removal of narcotics
- ❑ Breach of confidentiality or professional ethics
- ❑ Sleeping on duty
- ❑ Excessive unplanned absences, tardiness or time clock violation
- ❑ Violation of safety rules
- ❑ Soliciting tips or other monies, loitering, distributing literature, selling or collecting money or other items in work areas, or holding meetings on Health System premises without the approval of administration
- ❑ Inability or failure to perform work assignments
- ❑ Disclosure of confidential computer information, theft of computer time, or illegal usage of computer time
- ❑ Associates and students, engaging in activities on or off duty which are contrary to the mission of Sacred Heart Health System, including lawful or unlawful activities, which may tend to damage Sacred Heart Health System's image in the community or the image of its associates
- ❑ Abandonment (three consecutively scheduled working days of unreported absence) or walking off the job without their instructor's or preceptor's permission

- ❑ Conviction of a felony
- ❑ Any act or threatened act of violence and possession of any weapon
- ❑ Violation of the Parking Policy

Violation of these and other Health System practices or procedures will be handled on an individual basis. Written warnings may be utilized to discipline an associate or student. Two written warnings during a twelve-month period may be grounds for termination. Since some types of misconduct are more serious than others, some or all, progressive discipline may be bypassed. Certain kinds of conduct may result in immediate termination or suspension pending completion of an investigation of the violation. (HR 44)

## HEALTH SYSTEM STANDARDS OF CONDUCT

Ascension Health and Sacred Heart Health System are committed to carrying out their health care ministry in a way consistent with the Ascension Health Mission, Vision and Core Values. In accordance with the Core Values of Ascension Health, each associate is called to Service of the Poor, Reverence, Integrity, Wisdom, Creativity and Dedication.

The following Standards of Conduct are a practical extension of Ascension Health's Core Values. These standards more clearly state Sacred Heart Health System's expectations regarding how associates and students should conduct themselves and promote and protect the integrity of Sacred Heart Health System. Each associate and student is expected to act in a way consistent with the following principles:

**Quality of Care:** Sacred Heart Health System is committed to meeting patient needs by serving the whole person in his or her spiritual, intellectual, emotional and physical dimensions. We are dedicated to providing competent and compassionate care and to respecting and safeguarding the dignity of each patient. Sacred Heart Health System allows each patient access to all the medical and ethical information necessary to make decisions about their care.

**Law and Regulations:** Sacred Heart Health System will operate in accordance with all laws and regulations. These laws and regulations apply to areas such as patient referrals, employment, physician relationships, billing and payment practices, discount arrangements, lobbying, political contributions, the environment, health and safety, and dealings with payers and regulatory agencies.

**Human Resources:** Sacred Heart Health System strives to cultivate a work environment which promotes the following:

- ❑ A high regard for associates.
- ❑ Honest and respectful treatment.
- ❑ Protection of safety and health.
- ❑ Opportunities for personal and career growth and advancement
- ❑ Provision of necessary tools to succeed
- ❑ The establishment of adequate conflict resolution procedures
- ❑ Recognition and reward for achievements, without prejudice and discrimination.

**Business and Ethical Practices:** Sacred Heart Health System is committed to ethical business conduct and integrity, including the Ethical and Religious Directives for Catholic Health Care Services. Associates and students must represent Sacred Heart Health System accurately and honestly and must not do anything that purposely defrauds anyone, including other companies or the government, of money, property or services. Record keeping and billing for services provided to patients must be accurate, timely and lawful. Associates and students must take all reasonable steps to preserve and protect Sacred Heart Health System's assets by making prudent and effective use of its resources, and properly and accurately reporting its financial condition.

**Confidentiality:** In keeping with various laws, regulations, professional ethical guidelines and the Ethical and Religious Directives for Catholic Health Care Services, Sacred Heart Health System associates and students must maintain the confidentiality of medical records and other patient information. Associates and students are also expected to keep confidential information about other associates and the proprietary business practices of the organization.

**Conflicts of Interest:** Sacred Heart Health System associates and students are expected to act in a way that is in the best interest of the organization and the patients it serves. Associates and students may not use their positions to profit personally or to assist others in profiting in any way at the expense of the organization. In any situation where an associate's outside interest conflicts with those of the organization, the associate must disclose the conflict in accordance with organizational policy.

## IDENTIFICATION BADGES

For security purposes, the Human Resources department issues a name badge to every associate. Students must wear a name badge. The badge must be worn while on duty and should be positioned with the photo (as applicable) facing out and clearly visible on the upper left side of the body or around the neck attached to a lanyard. Do not put any type of sticker or tape on your badge.

## JOB SUMMARIES OF A PATIENT CARE UNIT

To help you understand the flow of a typical patient care unit, we have listed a few job summaries of associates with whom you may be interacting:

**Patient Care Manager** - Provides for overall patient care management of one or more units. This includes quality of care, patient satisfaction and personnel management.

**Assistant Patient Care Manager** - Assists the PCM in overall patient care management of one or more units. This includes quality of care, patient satisfaction and personnel management.

**Coordinator** - Directs/coordinates a group of individuals in the delivery of patient care and maintains the appropriate function of the unit and performs all aspects of direct patient care and psychosocial care of the patient and family.

**Clinical Educator** - Assists in the development, implementation, maintenance and evaluation of the SHHS staff and patients and community and network affiliate education programs as assigned.

**Child Life Specialist** - Works to provide emotional support to children and families, to provide developmentally appropriate play activities, to provide pre and post procedural/surgical teaching, and to assist the child and family in their adjustment to the hospital, diagnosis and treatment plan.

**Health Unit Coordinator (HUC)** - Under the direction of licensed personnel, performs the clerical and receptionist activities at the nurse's station. Coordinates incoming and outgoing communications to staff and other departments, enters physician orders into the computer, orders supplies, equipment and/or prompt return of the same.

**Patient Care Technician** - Assists licensed personnel with direct patient care and procedures such as activities of daily living, measurement of vital signs, assists with admission/discharge of patients, answering patient call lights, providing for safety of patients, unit restocking and cleanliness.

## **LABOR RELATIONS POLICY**

Sacred Heart Health System endeavors to practice fair and consistent associate and student relations. We have made a sincere commitment to human dignity and individual human rights. We recognize that our primary responsibility is to provide good quality patient care in an efficient, effective and economical way. We also recognize our responsibility to provide our associates with adequate compensation, benefits, and safe and healthy working conditions.

We expect our associates and students to fulfill their responsibility to the Health System and to patients by working productively and harmoniously to accomplish its mission.

We respect the rights of associates and believe that unions are unnecessary to protect these rights at Sacred Heart Health System. We further believe that our associates' interests are best served by direct communication between associates and those responsible for the management of the Health System.

Because we are providing essential community services, the unnecessary interruption of those services by union activities could do irreparable harm to the patients we are here to serve. Therefore, as a general policy, we believe that unions should not be a part of the Health System.

We pledge ourselves to continue to further the interests of our associates and the common good of the community we serve by providing fair compensation and good working conditions at Sacred Heart Health System. (HR 63)

## **LICENSURE AND REGISTRATION**

If your position requires a license, registration, or certification, you are responsible for keeping such licensure current and in effect. Your instructor, preceptor and Education & Training Services should be kept up-to-date regarding your licensure.

## **LOCKERS**

Lockers are available for the personal belongings of associates. Lockers are potentially available to students on an interim basis. Contact your instructor or preceptor for locker locations and assignment instructions. Please keep only personal belongings in the locker, excluding money or valuables. Sacred Heart Health System is not responsible for the loss of personal property and reserves the right to inspect lockers at any time. Any Sacred Heart property found in lockers may result in disciplinary action, including termination.

## LOST AND FOUND

Any article found in the Health System or on the grounds should be turned in to the Information Desk. The item will be forwarded to the Volunteer Director, who will keep the lost article for 30 days before disposing of it. If you have lost something, report the loss to these offices and check with them on a regular basis.

## MEALS AND REST PERIODS

As an associate or student of Sacred Heart Health System, you are entitled to one 30-minute meal period and one 15-minute rest period during each 8.5 hour shift. Associates and students scheduled to work 10-hour shifts are entitled to two 10-minute rest periods plus the meal period, and associates and students scheduled to work 12-hour shifts are entitled to two 15-minute rest periods plus the meal period. Meal periods and rest periods will be scheduled by your instructor or will be taken with your preceptor to ensure the department's operations are not interrupted. There are no designated "smoke breaks" for associates or students; rather, smoking should be incorporated into regular meal times and rest periods. The "Heart and Soul Cafe" and other designated break areas are available for your use during rest periods. (HR 51)

## MUTUAL RESPECT

Sacred Heart Health System is committed to providing a working environment that respects the dignity of every person. We will not tolerate harassment of our associates or students. Any form of harassment related to race, color, sex, religion, national origin, age, marital status, or physical or mental disability is a violation of this policy and will be treated as a disciplinary matter. The term "harassment" includes, but is not necessarily limited to:

- ❑ Verbal conduct, such as epithets, derogatory comments or jokes, relating to an individual's race, color, sex, religion, national origin, age, marital status or physical or mental disability; unwanted sexual advances, invitations or comments.
- ❑ Visual conduct, such as derogatory posters, cartoons, drawings or gestures.
- ❑ Physical conduct, such as assault, blocking normal movement, or interference with work directed at an associate because of his/her race, sex, or other protected basis.
- ❑ Threats and Demands to submit to sexual requests in order to keep the associate's job or avoid some other loss, and offers of job benefits in return for sexual favors.
- ❑ Retaliation for having reported the harassment.

Violation of this policy by an associate or student will subject that individual to disciplinary action, up to and including termination. If an associate or student believes that they are being harassed or is a witness to harassment, then that associate or student should immediately notify his or her supervisor or instructor, Human Resources, or the Corporate Responsibility Officer. The matter will be investigated, and where appropriate, disciplinary action will be taken. (HR 18)

## **PARKING**

Student parking at Sacred Heart Health System is provided on our surface associate parking lots. Students are not permitted to park in areas designated for visitors or physicians or designated as handicapped or construction or fire zones. Students working the night shift may park in visitor spaces; however, the vehicle must be moved by 8:00 A.M. The campus speed limit is 10 miles per hour or less, unless otherwise posted. Remember, pedestrians always have the right of way.

## **PATIENT ABUSE**

Victims of abuse or neglect may come to the hospital in a variety of ways. The patient may be unable or reluctant to speak about the abuse, and it may not be obvious to the casual observer. Staff must be able to identify abuse or neglect including the extent and circumstances of the abuse or neglect in order to give the patient appropriate care. Under Florida law, it is the duty of health professionals to report suspected abuse or neglect of children, disabled adults and elderly persons.

Chapter 415, Florida Statutes, protects children, disabled adults and elderly persons (aged 60 or older) from abuse and/or neglect. Section 415.103 provides for a contact registry (1-800-96-ABUSE) to receive reports of abuse and neglect and defines who must report abuse. The law assigns to Department of Children and Family Services (CFS) all responsibility for receiving, investigating and acting upon each report. For convenience, the abuse hotline number is located on the back of all associate name badge attachments.

“Child abuse or neglect” means harm or threatened harm to a child’s physical or mental health, welfare or sexual injury by the acts or omissions of a parent, adult household member, or other person responsible for the child’s welfare, or, for purposes of reporting requirements by any person. Child neglect is failure to provide adequate, food, clothing, shelter, and health care or needed supervision.

Spousal abuse may take many forms, including the following:

1. Verbal attacks and insults
2. Emotional deprivation and aggravation
3. Social isolation and economic deprivation
4. Intellectual derision and ridicule

## 5. Sexual demands and deprivation

Abuse of Disabled Adults and Elderly Persons means the non-accidental infliction of physical or psychological injury or sexual abuse upon a disabled adult or an elderly person by a relative, caregiver, or household member, or an action by any of those persons which could reasonably be expected to result in physical or psychological injury, or sexual abuse of a disabled adult or an elderly person by any person. "Abuse" also means the active encouragement of any person by a relative, caregiver, or household member to commit an act that inflicts or could reasonably be expected to result in physical or psychological injury to a disabled adult or an elderly person.

Elderly abuse may include:

1. Threats or assault
2. Physical abuse
3. Verbal abuse
4. Financial exploitation
5. Emotional abuse
6. Neglect
7. Violation of an elderly person's rights

Victims are most likely to be:

1. Age 75 or over
2. Women
3. Dependent on the abuser for basic need

The following signs and symptoms of abuse have been provided to help educate you on recognition while in our health system:

**SIGNS OF SEXUAL ABUSE**

<b>Physical Signs</b>	<b>Behavioral Signs</b>
Laceration of labia, vagina or perineum	Advanced knowledge of adult sexual behavior
Irritation, pain or injury to genital area	Discussion of or implied involvement in sexual activity
Hematomas in genital area	Expression of severe emotional conflict at home with fear of intervention
Vaginal or penile discharge	Reluctance to participate in sports, showers, changing of clothes
Dysuria or urinary frequency	Excessive bathing
Sexually transmitted disease in young child (in eyes, mouth, anus or genitals)	Sitting carefully because of the injuries
Pregnancy	Unusual interest in genital area (i.e., "French kissing" or fondling of genitals, excessive masturbation)
Itching, bruises or bleeding in the genital areas	Sexually acting out with peers
Unexplained vaginal or rectal bleeding	Sleeping disturbances (i.e., nightmares, fear of sleeping alone)
Enlarged vaginal or rectal orifice	Reluctance to participate in activities with a particular person at a particular place
Foreign objects in vagina or rectum	Increased number of new fears
Increased rectal pigmentation	Fear of being alone
Gait disturbance	Poor peer relations
	Depression
	Change in performance at school

## SIGNS AND SYMPTOMS OF PHYSICAL ABUSE

Indication	Assessment Findings
Bruises or welts on ears, eyes, mouth, lips, torso, buttocks, genital areas, calves	Injuries may be in shape of an object used to produce them (i.e., sticks, belts, hairbrushes, buckles). Injuries located on parts of body not usually injured, such as bruising behind the ear, bleeding into the conjunctiva or retina, pinch marks on genitals (normal bruises commonly appear on forehead, shins, knees, elbows)
Burns	Shape suggests type of burn
Immersion burns	Immersion burns on feet have "sock-like", on hands "glove-like" on buttocks or genitalia "doughnut-like" appearance.
Pattern burns	Pattern suggests object used (i.e., iron, stove grate, electric burner, heater); small, circular burns on feet, face, hands, chest or buttocks suggest cigar or cigarette
Friction burns	Friction burns on legs, arms, neck or torso may be caused by child having been tied up with rope
Scald burns	Caused by hot liquid poured over trunk or extremities; multiple splash marks may appear on body; depth of burn varies with temperature of liquid, length of contact, and presence of clothing
Fractures of skull, face, nose, orbit, long bones, ribs	Multiple or spiral fractures caused by twisting motion
	Evidence of epiphyseal separation and periosteal shearing
	Shaft fractures from direct blows
	Fractures may be in various stages of healing if earlier fractures were untreated
Lacerations or abrasions on mouth, lips, gums, eyes, genitals	Human bite marks, especially adult size, may be evident. Torn frenulum in infant from forcing object into mouth
	Puncture wounds or deep scratch marks from fingernails around face or genital area

Indication	Assessment Findings
Head Trauma	Evidence of increased intracranial pressure in infant (bulging fontanel)
	Subdural hematomas from being dropped on the head or from receiving blows to the head; if abuse is repetitive, separation of cranial sutures may be evident due to chronic subdural hematoma
	Areas of baldness and swelling from hair being pulled out when dragging the child by the hair
Neck trauma	Limited range of motion from whiplash injury due to being shaken
	Dislocation or subluxation of neck
Somatic	Persistent vomiting or abdominal pain
Shock	Rigid abdomen due to internal bleeding.
<b>Child Behaviors</b>	
Extreme aggressiveness or withdrawal; wariness of adults; fear of going home; apprehension when other children cry	Appears disinterested or frightened of parents, shows no emotion when parents leave or return
Indiscriminate friendliness and immediate affection shown toward anyone providing attention	Stiffens when approached as if expecting punishment of a physical nature
Surveys environment but remains motionless	Vacant stare; no eye contact
Extreme shyness	Inappropriate response to painful procedures
Increased aggressive or hostile behavior	Eating disorders
Enuresis (bed wetting)	Encopresis (fecal retention)
Runaway behaviors	Vague somatic complaints
Substance abuse	Self-destructive or suicidal behaviors

## PATIENT RIGHTS & RESPONSIBILITIES

The **goal** of patient rights and responsibilities is to improve care, treatment, services, and outcomes by recognizing and respecting the rights of each patient and by conducting business in an ethical way. Care, treatment, and services are provided in a way that respects and fosters dignity, autonomy, positive self-regard, civil rights, and involvement of patients. Care, treatment, and services consider the patient's abilities and resources, the relevant demands of his or her environment, and the requirements and expectations of the providers and those they serve. The family is involved in care, treatment, and service decisions with the patient's approval.

Patients deserve care, treatment, and services that safeguard their personal dignity and respect their cultural, psychosocial, and spiritual values. These values often influence the patient's perceptions and needs. By understanding and respecting these values, providers can meet care, treatment, and service needs and preferences.

For a complete listing of patient rights and responsibilities, please refer to organizational policy PR 8.

## PERFORMANCE IMPROVEMENT

Performance improvement is a continuous process. It involves measuring the functioning of important processes and services, and, when indicated, identifying changes that enhance performance. These changes are incorporated into new or existing work processes, products or services, and performance is monitored to ensure that the improvements are sustained.

An acronym used in our organization to assist with initiating performance improvement efforts is **PDCA (Plan Do Check Act)**.

An important aspect of improving organizational performance is effectively reducing factors that contribute to unanticipated adverse events and/or outcomes. Unanticipated adverse events and/or outcomes may be caused by poorly designed systems, system failures, or errors. Reducing unanticipated adverse events and/or unanticipated outcomes requires an environment in which patients, their families, and hospital staff and leaders can identify and manage actual and potential risks to safety. Such an environment encourages the following:

- Recognizing and acknowledging risks and unanticipated adverse events
- Initiating actions to reduce these risks and unanticipated adverse events
- Reporting internally on risk reduction initiatives and their effectiveness
- Focusing on processes and systems

- Minimizing individual blame or retribution for involvement in an unanticipated adverse event
- Investigating factors that contribute to unanticipated adverse events and sharing that acquired knowledge both internally and with other hospitals

Our organization's leaders are responsible for fostering such an environment through their personal example and by supporting effective responses to actual occurrences of unanticipated adverse events, ongoing proactive reduction of safety risks to patients, and integration of safety priorities into the design and redesign of all relevant organization processes, functions, and services.

## **PERSONAL PACKAGES**

For security reasons, please do not bring personal packages into Health System property. If it is necessary to do so, you should immediately verify the contents with your instructor or preceptor. Packages being removed from the Health System must have the approval of a supervisor and are subject to inspection by the Health System's security guards or management. Refusal to allow a security guard or manager to inspect a parcel being removed can result in immediate disciplinary action.

## **PERSONNEL RESOURCES**

Various personnel will be available as a source of information for you. The following lists some of the most common resources:

- Patient Care Managers and Department Managers
- Assistant Patient Care Managers
- Coordinators and Supervisors
- Clinical Educators and Education Coordinators
- Preceptors
- Child Life Specialist (Pediatrics)

Patient Care Managers and Assistant Patient Care Managers usually work 7:00 A.M. - 3:30 P.M., though you will often see them on the unit many hours after this time. Department Managers often maintain an 8:00 A.M. - 4:30 P.M. schedule. Units and departments usually have a Coordinator or Supervisor on each shift, but there may be some exceptions. If no Coordinator or Supervisor is on duty on your particular shift, a senior staff RN or staff member is in charge.

Clinical Educators and Education Coordinators are typically available Monday through Friday, 8:00 A.M. - 4:30 P.M.

Nursing Directors are available Monday through Friday during the day. Nursing Supervisors are available Monday through Friday 3 P.M. - 11 P.M. and 11P.M. - 7A.M. shifts. On weekends and holidays, the Nursing Supervisors are available

24 hours a day. You may reach a Nursing Supervisor by dialing the operator and requesting that they be paged to your extension.

## **PRIVILEGED INFORMATION**

To protect you, our patients, and Sacred Heart Health System, information concerning any patient must be held in strict confidence and is not to be discussed with anyone outside your immediate work area. Any discussion of patients or patient records must be professional in nature and limited only to those who have a legitimate need to know. Any request for such information from persons outside the Health System should be referred to your unit supervisor. Further, you should handle in strict confidence any confidential information regarding your co-workers or the Health System itself. In order to safeguard confidential information stored in equipment (i.e., computers, answering machines, etc.), associates and students must limit their use of Health System equipment to functions necessary to the associate's or student's specific job duties. (PR 24)

## **SAFETY AND SECURITY**

The Health System strives to maintain a safe and secure environment at all times. As an associate or student, you should always be safety-conscious for your own protection and for the protection of your fellow associates and students and for our patients and visitors. The success of our safety program depends on your awareness and cooperation. Please report hazardous conditions to your supervisor at once. If the hazardous condition remains, notify the Safety Manager at ext. 7270. A security service provides 24-hour coverage of the Hospital, parking lots and grounds. Security personnel are available to escort associates and students to and from the parking lots after dark. Suspicious persons or activities should be immediately reported to your supervisor or to Security. Security officers can be reached through the Health System operator.

## **SMOKE-FREE WORKPLACE**

Our goal is to maintain a healthy environment that will enhance patient recovery and provide families, visitors and staff with a clean, smoke-free atmosphere. Therefore, Sacred Heart Health System has implemented a smoke-free policy. Smoking is only allowed in designated outdoor areas. Smoking is prohibited at all facility entrances. (ENV 5)

## **"SNIPS and SNAPS"**

A bi-weekly newsletter titled "SNIPS" is published by the Marketing Department and is provided to all associates and students. This newsletter allows us to communicate very important information to you.

## SOLICITATION, DISTRIBUTION AND POSTING

To avoid disruption of health care operations, interference with patient care, and inconvenience to our patients and their visitors, the following rules apply to solicitation and distribution of materials and/or literature on Health System property.

- ❑ No associate or student shall engage in solicitation of any kind during working time. Working time includes the working time of the associate or student doing the soliciting or distributing and the associate or student to whom the soliciting or distributing is directed. Working time does not include break periods, meal times or any other specified periods during the workday when associates or students are properly not engaged in performing their work tasks.
- ❑ No associate or student shall engage in solicitation of any kind in immediate patient care areas such as patient rooms, operating rooms, and places where patients receive treatment, such as x-ray and therapy areas, or in any areas that might cause disruption of health-care operations or disturbance of patients, such as corridors in patient treatment areas and rooms used by patients for consultations with physicians and meeting with families or friends.
- ❑ Associates or students may not distribute literature during working time for any purpose. Working time is defined in Paragraph I. Associates or students may not distribute literature at any time, for any purpose, in working areas. Working areas are all areas in the Health System, except cafeterias, gift shops, associate lounges, lobbies and parking areas.
- ❑ Solicitation of patients, guests, invitees or visitors or distribution of non-Health System material or literature to such persons, by any associate or student, is prohibited on Health System property at all times.
- ❑ Persons not employed by the Health System may not solicit or distribute literature on Health System property at any time, for any purpose or reason. Health System bulletin boards, including those located in associate lounges, are reserved for official use only. The Human Resource Department is responsible for maintaining these boards and for posting notices directly related to the Health System work settings, for example, available positions, administrative announcements, educational notices, and such posters as are required by law. Non-work related information should not be posted on these bulletin boards. If you have work-related information to post, please contact the Human Resources Department for approval. Information posted without prior permission will be removed immediately, and proper disciplinary measures may be taken.

- Authorized Health System solicitation is limited to certain activities defined by administration that directly benefit the Health System or are directly related to the Health System's function. Any such activities require advance administration approval.
- Associates and students should assist in the enforcement of this rule whenever possible by reporting all violations to their supervisor or to security. (HR 46)

## **STAFF AND STUDENT RIGHTS**

Any associate or student who delivers care to patients may request not to participate in an aspect of care due to the associate or student's personal cultural values, ethics, and religious beliefs. A written request must be submitted in advance to the associate's Department Director, who will immediately forward it to the Vice President, Patient Care Services/Chief Nurse Officer. Students must submit written requests in advance to their instructor. Consideration will be given to each request, but at no time will the patient's care be delayed, diminished, or otherwise negatively affected. For further information regarding staff rights, see your supervisor or department director. (HR 6)

## **WORKPLACE SECURITY/CONCEALED WEAPONS**

In order to provide a safe workplace for our associates and students and to provide a comfortable and secure atmosphere for our customers and others with whom we do business, the Health System will not tolerate any violent acts or threats of violence.

Any associate or student who commits, or threatens to commit, any violent act against any person while on Health System premises will be subject to immediate discharge. Any associate or student who commits, or threatens to commit, any violent act against any person while engaged in Health System business on or off the premises will be subject to immediate discharge. Even when off the premises and not involved in Health System business, an associate or student who commits, or threatens to commit, a violent act against any other person will be subject to immediate discharge, if that threat or violence could adversely affect this Health System or its reputation in the community.

Any associate or student who is threatened shall immediately notify his or her supervisor or someone in management. Associates and students are urged to take all threats seriously. Reports of threats or violence will be carefully investigated and associate confidentiality will be maintained to the fullest extent possible.

No associate or student of Sacred Heart Health System shall possess or carry on their person a weapon, concealed or unconcealed, while on Health System property or while doing Health System business off Health System property. This means no weapon shall be carried in a briefcase, handbag, or kept in a vehicle while on Health System property. Violation of this policy is so serious as to warrant immediate dismissal for cause and without notice. (ENV 16)

### **WORK-RELATED INJURY**

It is the responsibility of each associate and student to immediately report an on-the-job injury to his or her manager or supervisor. An associate incident report must be completed and signed by the associate and his/her supervisor. For students, a non-associate incident report must be completed and signed by the student and his/her supervisor. Additionally, the instructor must be notified.

The Associate Health Manager or the House Supervisor directs initial medical care. Emergencies should report to the nearest Emergency Room.



## **Section IV**

# **Student Administrative and Medical Clearance**

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**ORGANIZATIONWIDE POLICY - ONLINE DOCUMENT (1/4/15)**


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Policy Number **HR 57**


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 Title **COMPETENCY MANAGEMENT OF CONTRACT PERSONNEL, STUDENTS & VOLUNTEERS**


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**POLICY**

Competency management is governed by organizational-wide policy & procedure HR66 – Integrated Performance Management. This policy is intended to act as an addendum to HR66 and provide competency management guidelines that are unique to contract/agency personnel, students and volunteers.

It is the responsibility of the Unit/Department Director/Manager negotiating any independent contractor, student or volunteer relationship with the health system to have a contract or agreement with the independent contractor, student, volunteer or sponsoring organization on file. Additionally, it is the responsibility of the Unit/Department Director/Manager to ensure that all elements of the competency program for the independent contractor, student or volunteer are met.

These contracts or agreements must be reviewed and approved by the organization's General Counsel and updated periodically.

Upon approval of contracts or agreements, the following departments must be notified as indicated:

- Contract Personnel – Human Resources
- Healthcare Agency Personnel – Education & Training Services
- Nursing & Ancillary Healthcare Support Students – Education & Training Services
- Medical Students, Physician Assistant Students & Nurse Practitioner Students – Medical Staff Services
- Volunteers – Volunteer Office

**PROCEDURE (edited to Student information only)****I. Students**

Note: Students are defined as those individuals from an academic program that have requested to use our facilities for the purpose of obtaining education, training and job role experience through internship, externship, preceptorship, clinical rotations and/or job shadowing.

As a general rule, the following departments will be responsible for the processing of students as follows:

- Education & Training Services – Nursing students & all clinical ancillary support students.
- Medical Staff Services – Medical students, physician assistant students & nurse practitioner students (also see department policy and procedure for Advance Practice Student Rotations, Applications and Clinical Activities).

The following procedures are to be followed to ensure students have met all requirements of the student competency management program:

Agreements – at a minimum, all agreements will contain the following elements to ensure that the student’s qualifications are consistent with his or her experiences while on SHHS’s campuses:

- Term of contract or agreement
- Relationship of parties
- Responsibilities of the School
- Responsibilities of the Hospital
- Removal of students from job role experience
- Insurance/indemnity
- Pre-requisites to job role experience
- Accreditation of School
- Scheduling guidelines of students
- Areas of education, training and experience the students are eligible
- Changes in staff or curriculum
- Agreement to criminal background screening
- Orientation, training & competency compliance
- HIPAA compliance
- JCAHO compliance

Orientation & Training – students will complete all orientation and training requirements prior to commencing their experience on campus. During this initial orientation phase, the following will be provided and/or verified by the school or by SHHS as defined by the respective agreement:

- Issuance of a school ID badge (ID badge may be provided by SHHS)
- Health clearance or verification of health records
- Criminal background screening
- N95 respirator fit testing as applicable (may be provided by SHHS)
- Waived testing competency validation as applicable (may be provided by SHHS)

From this point, the school will provide Education & Training Services a list of all students scheduled for job role experience:

- Students will be enrolled in SHHS’s online learning center for completion of an organizational orientation and completion of all required education.

Lastly, all students are to report to their respective unit/department for further orientation needs prior to commencing their job role experience. During this phase of orientation, the school instructor or preceptor will provide the following:

- Unit/department specific orientation

Performance Assessment – at the end of the school term, the school instructor will conduct performance assessments of students completing their job role experience on campus and will communicate findings to Education & Training Services and/or Medical Staff Services as applicable. Additionally, the school will provide staff with an opportunity to evaluate instructors and students via an end of term evaluation as well.

Ongoing Education Requirements – all students will complete all ongoing education requirements (annually & bi-annually) as defined in SHHS’s online learning center.

Ongoing Competency Requirements – schools will create a competency skills checklist for all students. This checklist will serve as a reference for both students and staff as to what competencies have been reviewed and/or demonstrated by the student. All students will be required to keep a copy of their competency skills checklist with them at all times while on SHHS campuses. For students who work in the same capacity as staff providing care, treatment and services, focus competencies will be identified and developed by the department director/manager based upon high risk/low frequency activities, new procedures/equipment and problem prone areas. Problem prone areas may be indicated through performance measurements such as surveys, questionnaires, and other feedback tools.

Ongoing Health Screens - all students will provide verification of an annual health screen.

Documentation - Monitoring on-going performance is the responsibility of the school instructor and/or preceptor who will document performance through the development and use of a variety of forms. These documents will be maintained at the respective student’s school in a separate file for each student. At a minimum, documentation should include:

- Copy of contract or agreement
- Evidence of formal education as applicable
- Licensures, registrations and/or certifications as applicable
- Criminal background screening as applicable
- Health screens as applicable
- Organization orientation (Appendix A of orientation program)
- Unit/department orientation(s) as applicable
- Job specific orientation as applicable
- Competency skills checklists as applicable
- N95 fit testing documentation
- Waived testing competencies
- Required education

Transferring to a Different Unit/Department or Changes in Job Role Experiences

– For students who work in the same capacity as staff providing care, treatment and services, appropriate re-orientation and re-validation of qualifications and competencies will be performed as outlined above as students transfer to perform work duties in another unit/department or as job role experiences change.

Student/Instructor Injuries & Illness - students incurring minor injuries while on campus for education, training and job role experience in the Health System must notify their supervisor to obtain care. If hospital services (e.g., Emergency Room) are required then the sponsoring organization will be responsible for payment of bills. Students & instructors that are ill while on campus must notify the Infection Control Practitioner for record. Additionally, assignment sheets for each student rotation must be submitted to Infection Control for purposes of notifying students & instructors of potential exposures while on campus (also see Infection Control Policy 1.08 - Notification of EMS, Paramedic or Emergency Medical Employer of Persons Known to have been Exposed to Selected Diseases While Transporting or Treating a Patient).

## Departmental Policy

### **Subjects:**

Affiliating Agency/Students/Clinical Faculty Health Requirements

### **Purpose:**

The purpose of this policy is to define the health requirements of Students/Clinical Faculty of Affiliating Agencies

### **Procedures:**

- A. Employee health Guidelines are to be followed to assure the good health and maximum effectiveness of affiliating agency students/clinical faculty as well as to ensure safeguards for patients involved with these personnel.
  
- B. **Health Requirements Prior to Assignment to the Hospital**  
 It is the affiliating agency's responsibility to ensure that their students/clinical faculty have received the periodic health exam and other mandatory requirements listed below.
  1. PPD tuberculin skin test within the last year, unless known to have a positive reaction.
  2. CXR within the last year if known to have a positive reaction.
  3. Documentation of immunity (active disease, vaccination or laboratory evidence) for Measles, Mumps and Rubella.
  4. A diphtheria-Tetanus booster every ten (10) years.
  5. Hepatitis B vaccine is not mandatory for affiliating agency students/clinical faculty; however, it is strongly recommended they obtain the vaccine for their protection. It is the affiliating agency's responsibility to obtain a release form prior to the students/clinical faculty being assigned to clinical areas.
  6. Evidence that they have received training to enable them to successfully work within the OSHA guidelines.
  
- C. **General Information:**
  1. Employee health Guidelines pertain to pregnancy, communicable disease exposure, accidental needle sticks or mucous membrane exposures, work restrictions due to illness, etc. apply also to affiliating agency students/clinical faculty.
  2. Affiliating agency students/clinical faculty must report all injuries, communicable disease exposures, illnesses, etc. to their director and/or instructor and report to the Emergency Department, Medical Group or private physician if follow-up is needed.

This policy has been adapted from the Employee Health Clinic Policy #15 last reviewed 6/2001.



### Medical Record:

Volunteers, Students, Temporary Employees & Contract Employees

NAME \_\_\_\_\_ SOCIAL SECURITY NO. \_\_\_\_\_

ADDRESS \_\_\_\_\_ TELEPHONE \_\_\_\_\_

HEIGHT \_\_\_\_\_ WEIGHT \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

Do you have a history of: Rubella \_\_\_\_\_ Chickenpox \_\_\_\_\_  
Tuberculosis \_\_\_\_\_ Chronic Cough \_\_\_\_\_  
Rash \_\_\_\_\_

PRIMARY CARE PHYSICIAN OR FAMILY DOCTOR \_\_\_\_\_

ARE YOU TAKING ANY MEDICATION? \_\_\_\_\_

REMARKS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PARENT OR GUARDIEN:** Please provide a copy of Measles-Rubella Immunization. Please indicate by your consent to allow your child to have a **TUBERCULOSIS SKIN TEST PPD) ANNUALLY.**

DATE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

# **Section V**

# **Appendix**

## APPENDIX A

### ORIENTATION CHECKLIST

The following list will be helpful in orienting you to your assigned clinical area. All items may or may not be available. This tool must be completed and returned to your preceptor or coordinator/supervisor for review.

DEPARTMENT OR UNIT NAME \_\_\_\_\_

ORIENTEE'S NAME & TITLE \_\_\_\_\_

SCHOOL AFFILIATION \_\_\_\_\_

Locate the following items on your unit.

1. Linen Room/Closet
2. Wheelchairs
3. Stretcher(s)
4. Ice Machine
5. Supply Closet/Cart: What items would be stored here?
6. Thermometer(s) How many does your unit have? What type?
7. Blood Pressure Equipment
8. Central Supply Cart: What items would be stored here?
9. Tube System
10. Clean Utility Room: What items are stored here?
11. Dirty Utility Room
12. Traction Equipment
13. Catheter Trays: What is this used for?
14. Scales

15. Specimen Containers: Blood, Urine, and other body fluids. What container is used for which specimen?
16. Call light(s)
17. Policies and Procedures Book
18. Narcotic Cabinet and Book
19. Intercom System: How does this system work?
20. Crash Cart: What is your role in a Code 3?
21. Evacuation Route
22. Fire Alarm
23. Fire Extinguisher
24. Infection Control Manual
25. IV Equipment and Mixtures
26. Types of Charting; Documentation (blank copies and location in patient's chart)
  - a.) History and Physical
  - b.) Graphic Sheet
  - c.) Progress Notes
  - d.) Care Plan
  - e.) Diabetic Flow Sheet
  - f.) IV flow sheet
  - g.) Anticoagulant Flow Sheet
  - h.) Kardex
  - i.) MAR
  - j.) Patient Teaching Record
  - k.) Transcribed MD's Record
  - l.) Transfer Summary
  - m.) Discharge Summary
27. What are patient mealtimes? What are staff mealtimes?
28. Oxygen therapy - where is the O2 cut off valve located? When would this information be necessary?
29. Equipment for special procedures. What special procedures are done on your unit?

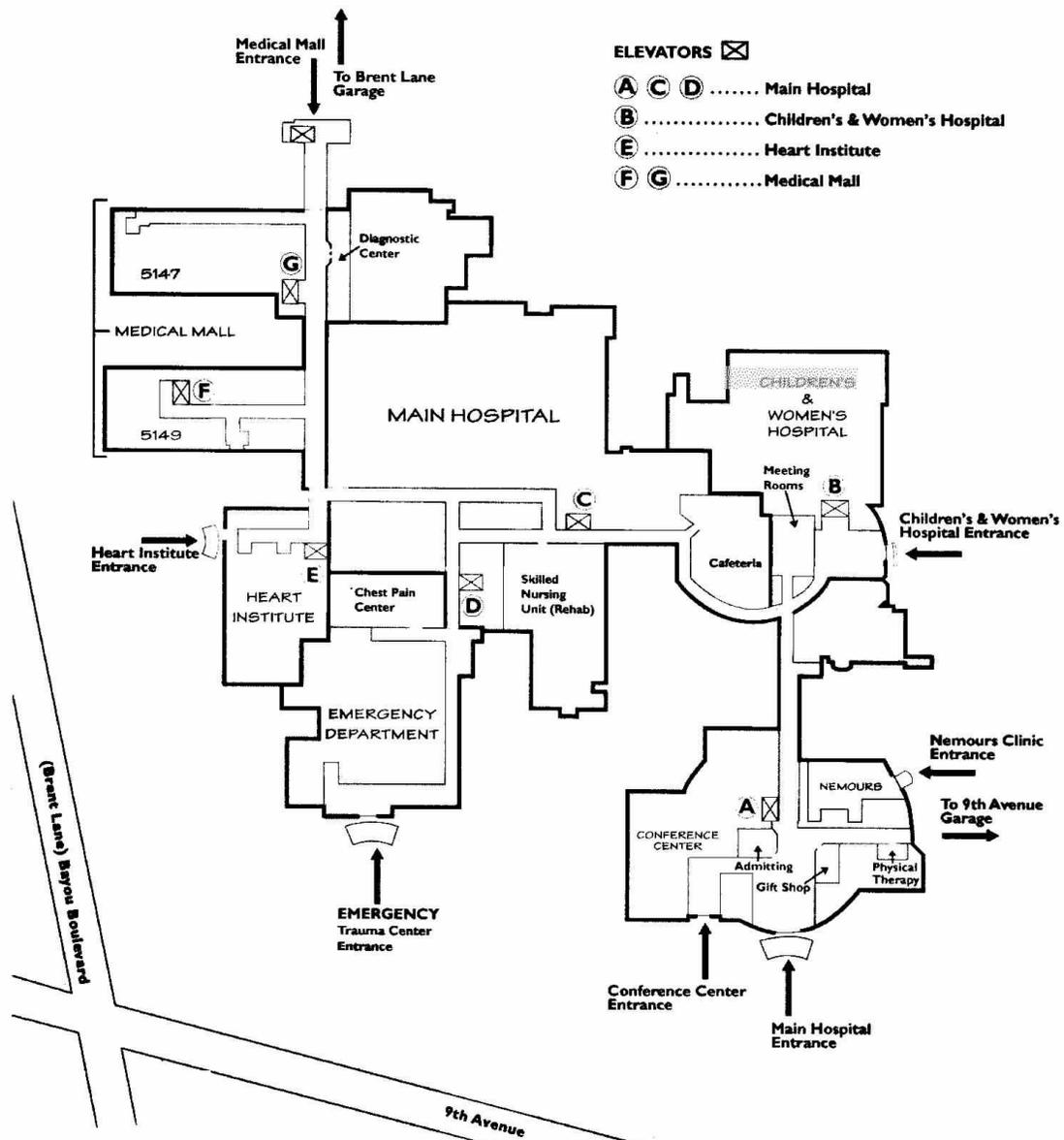
# **Appendix B**

## **Maps**





5151 North 9th Avenue  
 Pensacola, Florida  
**850-416-7000**  
 www.sacred-heart.org



# 1st Floor

SHHS S-3/01 9000-184



