

STUDENT AFFILIATIONS ORIENTATION MANUAL

Instructors are responsible for the orientation of their students. General and unit orientation must be completed prior to any “hands on” care.

Please be sure the following information has been reviewed by each student. It is expected that both instructors and students will be able to articulate their role in emergency procedures, if asked.

ATTENDANCE

Please notify your clinical instructor and the department as soon as possible, before the start of the shift, if you will not be in attendance as scheduled for your clinical experience. This will be discussed in more detail during your department orientation.

PATIENT AND FAMILY EXPERIENCE--

Marianjoy is committed to creating the best possible experience for our patients and their families. Each day we have an opportunity to make the most of a moment with a patient, a family member, a physician, an associate and the community. That moment could make all the difference in the world.

Our Promise to our Patient and Families:

At Marianjoy Rehabilitation Hospital, we recognize our patients as individuals with unique physical, emotional, spiritual, and cultural needs.

To carry out our Mission of providing excellent and compassionate health care service, we will:

- Provide a welcoming environment
- Introduce ourselves and explain what we are doing and why
- Treat you with dignity and respect
- Give you the information you need to make decisions
- Work to anticipate and respond to your needs
- Make sure you know how to care for yourself when you leave our care

We promise to support and guide you throughout your health care experience from your first interaction with us through the billing process. We are passionately committed to making our community stronger, healthier, and better. Nothing is more important to us than your health and well-being.

CORPORATE COMPLIANCE

Our corporate compliance program supports our efforts to live our mission and values while helping us assure we follow all laws, regulations and policies, as well as address ethical or legal issues that may arise in our work. The corporate compliance program applies to everyone, including employees, physicians, contract labor, and anyone else acting on behalf of the organization.

If you identify a compliance or HIPAA issue or have a question, follow this process:

- Report the issue to the director or supervisor of the department where you are working.
- Contact the Vice President, Corporate Compliance and HIPAA Services / Privacy Officer
- If you are not comfortable talking to a manager or if you want to report the issue anonymously, call the Compliance Line at 1-888-704-7794. The Compliance Line is available 24 hours per day, seven days a week. Callers who do not wish to give their names can remain anonymous. Calls to the Compliance Line will not be traced or recorded. Please be sure to give enough information and specific details.

CONFIDENTIALITY

Any information concerning a patient's illness, family, financial condition, personal situation or any other confidential information about a patient, employee or the Marianjoy facility that becomes known by you is to be treated as strictly confidential. All students are required to sign a Confidentiality Statement prior to beginning their clinical training experience.

The Health Insurance Portability and Accountability Act (HIPAA) Privacy and Security Rules are covered by our Compliance Program. For more information on how to comply with HIPAA, please review, "HIPAA Privacy and Security Primer for Students, Faculty and Agency Staff."

ETHICS

Consistent with our values of Respect for each other and Integrity in our work, Marianjoy, Inc., is committed to acting on its ethical responsibilities to patients, families, visitors, staff, volunteers, physicians, and the larger community it serves. You are expected to know and uphold the Code of Ethics of your profession. If you are faced with an ethical concern, please approach the manager of the department where you are working. If you prefer, you may contact a member of the Ethics committee at the site.

NO-SOLICITATION POLICY

Staff (temporary or regular) and students may not solicit or engage in the distribution of literature, pamphlets, forms, cards, or any other material anywhere on property leased or owned by Marianjoy Rehabilitation Hospital during their working time.

No one may at any time engage in the distribution of literature, pamphlets, forms, cards or any other material in work areas, including, but not limited to, immediate patient care areas.

All staff and students must refrain from distributing any unauthorized materials, including distribution via e-mail or other electronic means. E-mail, interoffice mail, voicemail, and other resources and technologies for communication may be used for business-related purposes only.

GRATUITIES

Temporary staff and students, like associates, may not accept any personal tips, gifts or donations. If a patient or patient's relative offers you a gift, explain courteously that it is your job to help and that you are happy to be of service. You can explain that it is against hospital rules to accept a gift or gratuity, but they are welcome to make a contribution to the Marianjoy Foundation instead. Non-monetary gifts of minimal value such as cookies or flowers may be accepted from a patient or vendor. Please check with the supervisor of the unit before accepting any gifts.

DIVERSITY

Marianjoy is committed to creating a work and patient care environment that values the diversity of our associates, patients, suppliers and the communities that we serve. Our Value of Respect calls us to honor diversity in practices of faith, traditions and culture and supports our mission of providing excellent care to the people that we serve.

What is diversity?

At Marianjoy, we define diversity as the collective strength of our life experiences, skills, talents, perspectives, and cultures as well as race, religion, spiritual beliefs, color, disability, gender, sexual orientation, age, ancestry, place of origin, marital/family status, language, occupation, socioeconomic circumstance, health status, military status and many other dimensions.

Why is diversity important?

Creating inclusive work and patient care environments fuels creativity and innovation, improves associate satisfaction, patient satisfaction and outcomes, communication, and teamwork.

What is culture?

Culture is a component of diversity. It is learned and shared values of a particular group that guide thinking, actions, behaviors, and emotional reactions to daily living.

What is cultural competence in healthcare?

Cultural competence is the “ongoing capacity of healthcare systems, organizations and professionals to provide for diverse patient populations high quality care that is safe, patient and family centered, evidence-based, and equitable.” – The National Quality Forum

Cultural considerations:

- Diversity of patient language: Use of Interpretation services, translated documents and educational materials
- Pain styles- stoic, expressive
- Religion- prayer, beginning and end of life rituals, beliefs, spiritual leaders
- Dietary- (ex. Kosher, fasting, ethnic foods)
- Family- role in care, decision making authority
- Gender- male dominance, female modesty,
- Death- end of life decisions and rituals
- Treatment- beliefs about illness, folk remedies, traditional cures
- Conflict styles- loss of face
- Eye contact- cultural beliefs about looking a person in the eye

In the workplace and patient care environment, students will encounter diverse associate and patient populations. To carry out our Mission of providing excellent and compassionate health care service, we strive to:

- Provide a welcoming environment
- Introduce ourselves and explain what we are doing and why
- Treat patients with dignity and respect
- Give patients the information they need to make decisions
- Work to anticipate and respond to patient needs
- Make sure that the patient knows how to care for him/herself when they leave our care
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Thank you for helping us to live out our Mission by treating all associates, patients and their families with dignity and respect.

TEAM DYNAMICS

Individually we have a responsibility and the ability to positively impact the environment we work in. Not only do our patients and customers benefit but we do as well. Everyone wants to be part of a *high performing team*.

Delivering excellent service requires positive team dynamics and effective communication

Everyone Is Part of the Team

- Physicians
- Staff
- Administrators
- All departments
- Contracted services
- Other customers

Characteristics of a High Performing Team include:

- want to remain members
- willing to share information
- strong interpersonal bonds
- committed to quality and process improvement
- resolve conflict effectively
- more satisfied with their roles and experience less stress
- communicate with courtesy and compassion
- take initiative to make things better
- understand the Mission, Vision, and Values of the organization and live them
- trust, respect, and support each other
- energetic and enthusiastic
- welcome new members

The impact of positive team dynamics and effective communication include:

- Our patients receive better care
- Fewer errors occur
- Patient satisfaction scores increase
- Patients choose to receive care from us
- Patients refer others to use our services
- Others want to join our team
- We are comfortable communicating with other departments
- Team Dynamics cross all department lines and the team becomes “Organizational” versus “Departmental”.

PATIENT SAFETY

Our core business centers on patients and how we care for them. This includes keeping them safe and honoring their rights. Even staff members who do not give direct patient care have a role in keeping our patients safe. Marianjoy promotes a Culture of Safety throughout the organization. National Patient Safety Goals have been established to protect patients and are updated annually. They are a set of standards required by Joint Commission that are aimed at eliminating the most common causes of patient care errors.

National Patient Safety Goals

- Improve accuracy of patient identification
- Improve the effectiveness of communication among caregivers
- Improve the safety of using medications
- Reduce the risk of health care associated infections (includes hand hygiene)
- Accurately and completely reconcile medications across the continuum of care
- Reduce the risk of patient harm resulting from falls
- Encourage patient’s active involvement in their care as a patient safety strategy
- The organization identifies safety risks inherent in its patient population
- Identify patients at risk of suicide and address safety needs and treatment
- Improve recognition and response to changes in a patient’s condition
- The organization meets the expectations of preventing mistakes in surgery using Universal Protocol (Make sure that the correct surgery is done on the correct patient and at the correct place on the patient’s body, Mark the correct place on the patient’s body where the surgery is to be done, Pause before the surgery to make sure that a mistake is not being made)

In addition to the above, for Long Term Care:

- Reduce the risk of influenza and pneumococcal disease in institutionalized older adults
- Prevent health care associated pressure ulcers (decubitus ulcers)

Your role is to participate in patient safety efforts by:

- Knowing the National Patient Safety Goals and how they pertain to your job role. This includes knowing and following of the policies and processes used to implement the goals at the site where you work.
- Following all safety policies, identifying and reporting unsafe situation and errors, and taking action by correcting unsafe situations or alerting others of unsafe practices.

Marianjoy Rehabilitation Hospital has ongoing proactive patient safety initiatives to continually improve processes, policies, resources and the environment in order to promote patient safety. Patients are provided, on admission, with information on how to be proactive for their safety while hospitalized and after discharge.

For additional information on the National Patient Safety Goals, click on the following link:

<http://www.jointcommission.org/patientsafety/nationalpatientsafetygoals>

FALLS PREVENTION

All patients admitted to a facility are assessed for risk of falling. Patients at risk for falls are placed on falls precautions and identified by a flagging system. Fall Risk Programs use "flagging", such as a falling leaf, star or yellow dot on the chart, a yellow armband on the patient, and various signs including the Caution Club sign posted in or near the patients room. Some facilities use red slippers to identify those at risk. Learn the specific precautions that are required at the site you are assigned for patients at risk of falling. If you see a patient on falls precautions getting up without assistance, stay with the patient and call for help. Please check with the patient's nurse prior to assisting the patient out of bed.

OCCURRENCE REPORTS

Identification and documentation of real and /or potential patient safety issues are reported in various ways. Whether the safety issue is a near miss or an actual safety event, a report must be made in the appropriate manner. This allows us to record any unplanned/unexpected event, collect data, and analyze the data to initiate appropriate corrective action in order to minimize the potential recurrence of the same or similar event. No disciplinary action will be taken against a student for the act of reporting an incident or occurrence.

All patient and visitor incidents/occurrences, whether they are near misses or have actually caused injury should be reported on an incident/occurrence report or appropriate form. There are various types of incident/occurrence reports: Associate Incident Report, Patient/Visitor Occurrence Report, Medication Error and Adverse Event Report and Falls Investigation. Please fill out the appropriate form. The person who observes or is intimately involved in the occurrence should, to the extent of their knowledge, complete the appropriate form. Your Clinical instructor will need to assist you to complete the form. Complete the report at the time or discovery of the event. Fill out the form as completely as possible, providing only objective, factual information. Do not blame or include subjective information. Incident/Occurrence reports are confidential documents and not a part of the patient's permanent chart. DO NOT document that a report is submitted to risk management. DO NOT photocopy reports. Some facilities have a phone line for reporting near-misses and/or online occurrence reports. Check with the managers of the department where you work to find about any site- specific processes for reporting occurrences. Submit the report to the unit manager or shift supervisor who will involve the Quality Assurance/Risk Management department.

DISCLOSURE OF UNANTICIPATED OUTCOMES

Marianjoy Rehabilitation Hospital and its members support disclosure of unanticipated outcomes that result in injury or harm to patients. In the event of an unanticipated outcome that results in injury or harm to a patient, the first priority is to provide for the immediate clinical needs of the patient. Notify the manager for your area immediately, who will follow appropriate procedures for disclosing the unanticipated outcome.

RISK MANAGEMENT

Risk management is the dynamic process of identifying, assessing, preventing, minimizing, controlling, and managing the negative effects of accidental losses to the organization's property, equipment, employees, patients, and other customers or visitors. We are all responsible for managing risk, but the organization also has specialists known as Risk Managers. Risk managers are responsible for patient safety and obtaining and managing insurance coverage in the event accidents or other losses occur. If an accident or loss occurs, you may be asked to assist in investigating and documenting how and why an injury or loss occurred. Investigation of accidents, injuries, loss or property, etc. are essential to learning the cause and preventing future losses. The purpose is prevention and not to blame someone. Risk management and security have an open door policy and are available 24/7.

SAFETY AND SECURITY

To ensure a safe working environment, everyone must be aware of and practice the following safety guidelines:

- Learn and follow the steps prescribed in the Emergency Procedures Reference Guide at the site you are assigned to. (See separate references on web site)
- Walk; do not run inside the facility even during emergencies.
- **Do not** operate equipment unless you are properly instructed on its use.
- Remove hazards such as water, paper wrappers, and other objects from the floors.

- Know the location of the nearest fire exit as well as the location and use of the fire-fighting equipment in your area and the procedure for turning in a fire alarm.
- Be on the alert for fire hazards.
- Report any unsafe conditions such as wet floors, exposed wiring, defective equipment or obstructions left in halls or stairways.
- Never operate electrical appliances with wet hands.
- If you should observe an accident involving a patient, visitor or another associate, report the incident to your instructor and/or supervisor/unit manager at once.
- Observe and obey all posted safety rules.

HARASSMENT/ VIOLENCE IN THE WORKPLACE

Marianjoy supports a work environment that is free from all forms of harassment or intimidation based on age, race, creed, color, handicap, marital status, gender, national origin, ancestry, sexual orientation or any other prohibited basis of employment discrimination. Marianjoy will not tolerate any acts or threats of violence including intimidation, verbal or physical harassment, verbal or physical assault, coercion or threatening behavior of any kind. If you feel that you are experiencing harassment, please notify the supervisor immediately.

SMOKING REGULATIONS

All Marianjoy facilities are Smoke-Free. This includes buildings and all outside areas. Smoking restrictions are established for your safety and in the best interest of patient care. We ask that everyone observe the NO SMOKING regulations.

ALCOHOL AND CONTROLLED SUBSTANCES

To ensure a safe, productive work environment at all Marianjoy facilities and worksites, Marianjoy prohibits the use and/or possession, sale, purchase, manufacture, distribution or dispensation of intoxicants, including alcohol or controlled substances (drugs), other than over-the-counter drugs or lawfully prescribed drugs on Corporate premises (including all work sites) during work hours including breaks.

IDENTIFICATION

Whenever you are on facility grounds wear your ID badge which includes your name, photo, school and title. You'll help yourself and the facility by wearing your ID badge because it helps security protect the premises by determining who belongs in the area and who does not. If you do not have a ID badge, contact the supervisor/unit manager to obtain one. Some sites/department may also require additional identification/access badges.

PERSONAL APPEARANCE AND CONDUCT

Your personal appearance should reflect pride in your work as well as comply with hospital safety and uniform regulations. Please contact the department you will be assigned to for information on dress requirements.

TELEPHONES

Phones are available for your use throughout the facility while you are off-duty. We discourage personal phone calls while on duty but in an **emergency**, messages may be relayed to you. Personal Cell phones should be turned off or on vibrate.

If you are required to answer the phone when you are working, follow these guidelines: answer the call promptly and identify your department and yourself, be friendly, transfer calls tactfully and hang up carefully.

ELECTRONIC DEVICES

Electronic devices may be used for academic purposes **ONLY**. Please let the department leaders know if your students have electronic devices for E-resources. Please review and follow the attached guidelines for the use of social media in patient care settings: [A Nurse's Guide to the Use of Social Media](#) (click on link)

COMPUTER USAGE

Marianjoy Rehabilitation Hospital computers and communication systems must be used only for business purposes. You may be assigned a computer access code and password security code for electronic health record documentation. This information is confidential and it is your professional responsibility to

protect these access codes. Without this information you will not be able to document in the electronic health record if applicable.

MILITARY TIME

You need to use military time on your patient record entries. To properly document military time, follow these guidelines:

- From 1:00 am to noon – use the same digits as the twelve hour clock but omit the colon and add a zero before single hours. Midnight is 2400 hours.
Examples: 1:00 am = 0100, 5:00 am = 0500
- From noon to midnight – add 12 to the pm time. Noon is 1200 hours.
Examples: 2:00 pm = 1400, 8:00 pm = 2000

STUDENT HEALTH/ILLNESS and ABSENCES

Please take precautions to prevent accidents by observing safe work practices. If you are injured at your clinical site, regardless of how minor the injury may seem, inform your instructor immediately. Your instructor or the supervisor will assist you in filling out an Associate Incident Report form. If injured or you become ill while at your clinical site, emergent or urgent medical care shall be provided, as appropriate and consistent with the capability and policies of the site. You shall bear financial responsibility for charges associated with said treatment. Marianjoy Rehabilitation Hospital is not able to provide routine healthcare to students and requires that students maintain their own health insurance coverage. Should you become too ill to report to your assigned area, you will be informed about whom to contact. Notification of illness or absence should be made as soon as possible before the start of the shift. It is your responsibility to not expose staff or patients to communicable diseases.

EMERGENCY MEDICAL TREATMENT AND ACTIVE LABOR ACT (EMTALA)

The Emergency Medical Treatment and Active Labor Act establish specific responsibilities for physicians attending to patients who present, on hospital property, for purposes of examination and treatment of medical complaint. The act describes the need for the provision of stabilizing treatment for all patients who possess an emergency medical condition.

PATIENT'S BILL OF RIGHTS

In support of our Mission and Values, Marianjoy has developed a policy on Patient's Rights. All associates, physicians, students and volunteers are expected to honor these rights. Please click here and read [Patient's Rights and Responsibilities](#).

PAIN MANAGEMENT

Pain Management is a part of our value for excellence in patient care.

Marianjoy is committed to proving pain management to patients. Here are our key points about what you should know about pain management and our promise to patients:

1. Good pain management will make a difference in patient's care and recovery. What happens when pain is not controlled, or the patient doesn't let the nurse or doctor know about their pain? Research has shown us that patients do not heal as quickly and can have more problems when their pain is not managed well.
2. Pain Management is stated as a basic right of patients.
3. Patients are informed of this right in many ways;
 - it is stated in patient handbooks
 - it is on patient rights signs in elevators and in hallways and other facility areas.
 - At some facilities, each patient room or patient care area has a pain tool which states 'Your Comfort is our Goal'.

It is everyone's responsibility to report patient's reports of pain to the appropriate unit nurse. It is important to acknowledge the patient's concerns about pain and to communicate that his/her concerns will be immediately reported to the nurse. There are many pain management techniques that may be used, including pharmacologic and non-pharmacological interventions.

INFECTION CONTROL

Handling Contaminated Items- Standard Precautions

EVERYONE should be considered to be potentially infectious. To best protect yourself and others always use the appropriate Personal Protective Equipment (PPE) (ex. gloves, gowns, masks, protective eyewear) for potential contact or exposure to all blood, body fluids, excretions and secretions, (except sweat), non-intact skin or mucous membranes.

When handling items contaminated with blood or body fluids:

- Wear gloves
- Wear mask, gown, and protective eyewear if splashing may occur.
- If items are contaminated with blood or body fluids that may drip or flake off, wear appropriate PPE and dispose of them in red bags for hazardous waste.
- Put bags in appropriate place for pickup and disposal. This will usually be the Soiled Utility Room, check at your facility.

BLOOD SPILLS:

- Minor- wearing gloves wipe up the spill with disposable toweling and disinfect the area.
- Major- contact Hospitality or Environmental Services or supervisor/unit manager for assistance.

BLOOD AND BODY FLUID EXPOSURE

What should you do if you are exposed to blood or a body fluid?

- Mucous Membrane: Flush exposed area, e.g., eye, nose or mouth immediately with warm water.
- Puncture wound/needle stick or cut or splash on non-intact skin: Wash wound thoroughly with soap and water for a minimum of 15 seconds.
- Report incident to the manager of the department or administrative supervisor (on off shifts) where you are working immediately.
- Fill out an associate incident report. (Write the name of the source patient on a separate piece of paper.
- Go to Associate Health & Wellness immediately; if Associate Health & Wellness is not available, contact the house supervisor or go to the Emergency Department. Follow any instructions provided at this time.

Multi-dose Vials

Multi-dose vials are dated when first opened and are discarded within 28 days. If they are used for more than one patient, the vials must not enter the immediate patient treatment area, i.e. OR, patient room, anesthesia carts. If multi-dose vials are found in the patient care area, they must be dedicated for single patient use and discarded after use.

HAND HYGIENE

Because our hands are the most common way to spread germs, improving hand hygiene will increase patient safety and prevent infections.

Hand hygiene includes:

- Hand washing (with soap and water for at least 15 seconds)
- Antiseptic hand wash
- Surgical hand hygiene/antiseptics
- Alcohol-based hand rubs (rub until completely dry)

Hand hygiene should be performed after using the restroom, after coughing or sneezing, after petting an animal, after handling money, after handling/touching patient equipment or surfaces, **before and after wearing gloves, before and after patient contact**, before handling or eating food, before handling medications, when going from dirty to clean procedures on the same patient and at the beginning and end of work day. When caring for a patient with c.difficile you must wash your hands with soap and water. If you are working in the patient care environment, food is only permitted in the designated lounge area of that department. Covered beverages are permitted in the "nurses stations".

Different types of **isolation precautions** may be posted on the doors of patient rooms. Please be alert to such signs, and read and follow the instructions before entering the room. Check with the patient's nurse if you have questions.

PATIENT ABUSE-SUSPECTED

It is the responsibility of all to report suspected abuse to the Department Supervisor/ Manager for direction and assistance with information gathering and/or reporting to the appropriate authorities. Patient Abuse can include Abuse, Neglect, or Misappropriation of Property Exploitation, or Human Trafficking. Indicators for Identifying Alleged or Suspected Victims of Patient Abuse:

- Injuries to unusual parts of the body, on several different surfaces or in a central location
- Fractures that require significant force
- Multiple injuries in various stages of healing; patterns left by whatever implement was used to inflict the injury
- Reported cause of injury does not fit type of injury observed
- History of repeated ER visits
- Recurrent episodes of an injury being attributed to the individual being accident prone
- Reports of inappropriate touching, fondling or sexual activity
- Patient reports vaginal or rectal injuries or bleeding.
- Verbal assaults, threats or intimidation
- Withholding clothing, food, medical care or shelter that would expose the patient to great risk
- Patient is unkempt, dirty.
- Misusing or withholding an individual's resources
- Fears or signs of protecting self from the family member/caregiver
- Significant other speaks for the patient and does not allow patient to give history of incident
- Shaken baby syndrome
- Any report claiming abuse

CAREGIVER MISCONDUCT

There are laws intended to protect clients in health care settings from abuse, neglect, or misappropriation of property. All patient allegations of verbal abuse or of intimidating or threatening behavior by an associate will be taken seriously. If you suspect caregiver misconduct, you should:

- Immediately protect client/patient from possible further incident
- Immediately notify one of the following:
 - your supervisor or manager
 - Director of Human Resources
 - Director of Risk Management – open door policy; available 24/7

Welcome to Marianjoy Rehabilitation Hospital, we hope you have a great experience!