# Clinical Rotation & Internship Participant Orientation Guide



# JOHNS HOPKINS

JOHNS HOPKINS
BAYVIEW MEDICAL CENTER







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# ABOUT HOPKINS BAYVIEW



# **MISSION**

Johns Hopkins Bayview Medical Center, a member of Johns Hopkins Medicine, provides compassionate health care that is focused on the uniqueness and dignity of each person we serve. We offer this care in an environment that promotes, embraces and honors the diversity of our global community. With a rich and long tradition of medical care, education and research, we are dedicated to providing and advancing medicine that is respectful and nurturing of the lives of those we touch.

# **VISION**

Johns Hopkins Bayview Medical Center will be widely recognized for innovation and excellence in clinical care, education and research in medicine. As a leading academic medical center, we will provide and enriching environment for our employees and an exceptional health care experience for our patients and their families.

# **CORE VALUES**

**Excellence & Discovery** 

**Leadership & Integrity** 

**Diversity & Inclusion** 

**Respect & Collegiality** 



# Hopkins Bayview History

### **Almshouse**

Provided healthcare and shelter to the sick and poor.

### **Baltimore City Hospitals**

Name changed to reflect the multiple hospitals on site for acute care, chronic care and TB.

# Johns Hopkins Health System (JHHS)

A not-for-profit organization. Includes JHBMC, JHH, Howard County General Hospital (acquired in 1998), JHCommunity Physicians, JH Health Care & JH Home Care

# Johns Hopkins Bayview Medical Center (JHBMC)

Renamed to emphasize its prominence in the Johns Hopkins Family of Institutions.

### Hopkins ranked #1

For the 22 years, U.S. News & World Report's annual ranking of American hospitals as the "Best of the Best."

 1773
 1866
 1925
 1984
 1986
 1991
 1994
 1999
 2013

# **Bayview Asylum**

Served the neighborhoods poor and indigent.

### **Francis Scott Key Medical Center**

Renamed when ownership transferred to The Johns Hopkins Hospital and University. The new name provided a link to Baltimore's lengthy history through the name of a Baltimore attorney who had witnessed the British bombardment of Ft. McHenry in 1814 and wrote "The Star-Spangled Banner."

# Johns Hopkins Bayview Care Center

Provides residential and outpatient care.

# Bayview Medical Office (BMO)

Opening of the new Ambulatory Care Center.

# THE PATIENT EXPERIENCE



No matter where you work in the hospital, you are part of the Bayview team that helps determine how patients and others view the medical center. Patient satisfaction depends on customer service. Patients want and expect to receive good customer service, as well as high-quality health care.

# Here's what patients have told us are top priority regarding their expectations of service:

"RESPOND TO MY CONCERNS/COMPLAINTS"	"BE FRIENDLY AND CHEERFUL TO ME."	"BE SENSITIVE TO INCONVENIENCE."	"BE CONCERNED ABOUT MY PRIVACY."
Listen attentively & check for understanding.	Smile, make eye contact & greet. Make me feel welcome into your "home."	Explain delays.	Respect my rights as a patient.
Offer options. Offer assistance & be helpful.	WELCOME	Don't blame others for delays or inconveniences.	Ensure cultural/spiritual concerns are met.
Speak clearlyno medical jargon or slang.	Be courteous. Address me by last name. Use kind words in a friendly tone of voice.	Take time to listen & answer questions.	Maintain patient dignity. Knock before entering & announce yourself.
Demonstrate empathy.	Keep the hospital environment warm, welcoming, neat & clean.	Ask what you can do to help. Offer options.	
Avoid distractions. Make me feel important & respected.	At the end of every interaction ask me, "Is there anything else I can do for you right now?"	Anticipate my needs. Put yourself in my shoes.	Close bedside curtain to maintain privacy.
Ensure timely response to my concerns.	Treat my loved ones with respect.	Maintain low noise levels, especially at night.	Maintain patient confidentiality at all times.



# PATIENT BILL OF RIGHTS AND RESPONSIBILITIES

Acceptance & Refusal of Treatment	Right to make decisions about your health care, including right to accept or refuse treatment to the extent permitted by law. Right to know about alternative treatment and consequences of refusing treatment including signing out against medical advice. Right to be informed about pain and pain relief measures.
Access to Care	Right to receive treatment regardless of race, age, creed/religion, national origin, sexual orientation, gender identity, physical or mental disability.
Advance Directives	Right to make health care decisions in advance and to appoint someone as your agent to make decisions if you are not able.
Communication	Right to receive visitors according to hospital guidelines.
Consent	Right to information you need to give informed consent to any procedure or treatment, including risks, benefits and medical alternatives for your treatment.
Consultation	Right to consult a specialist.
Continuity of Care	Right to expect coordination of care, to know the name of their physician, and health care team members and how to contact them.
Hospital Charges	Right to receive an explanation of their bill.
Hospital Rules & Regulations	Right to be informed of the medical center's rules and regulations about patient conduct.
Information	Right to obtain complete and current information about diagnosis, treatment and prognosis, including unanticipated outcomes. All communications and records about a patient's care is CONFIDENTIAL.
Personal Safety	Right to expect that surroundings are reasonably safe.
Privacy & Confidentiality	Right to privacy and to expect that all information about their care is confidential, unless restricted by law and as described in the Health Insurance Portability and Accountability Act (HIPAA).
Respect & Dignity	Right to considerate, respectful care that recognizes personal dignity.
Resolution of Complaints	Right to make a complaint and to have complaints reviewed in timely, accurate and confidential manner. Patients can take their concerns to the Maryland Department of Health and Mental Hygiene and are provided with the address and phone number.
Responsiveness	Right to expect a reasonable response to your request for treatment or service.
Transfer	Right to refuse to be treated here and to transfer to another facility after explanation of risks and benefits of transfer.

### **Your Treatment:**

- You need to give complete, accurate information about your health, including present condition, past illnesses, hospitalizations, medications, natural products and vitamins and any other matters or changes that pertain to your health.
- If you have a living will or an advance directive, please bring a copy to the Medical Center when you are admitted or have a family member bring it as soon as possible.
- Tell your health care team if you do not understand what they are telling you, or if you need more information.
- You and your health care team should agree on a treatment plan. If you are unable to follow the plan, tell your doctor or nurse.
- Ask your doctor or nurse what to expect regarding pain and pain control. Work with your provider to develop a plan that will make you as comfortable as possible.
- Please provide complete and accurate information about your full name, home telephone number, date of birth, Social Security number and health insurance information. I you are enrolled in a HMO or managed care plan, please provide us with any approvals required by your plan.

**Payment:** Please provide complete and accurate information about your health care insurance and make arrangements for timely payment of your bill. If there is something about your bill that you do not understand, please ask questions.

**Medical Care Appointments:** If you are not able to keep an appointment, please call the office or treatment area as soon as possible to change the appointment.

**Hospital Etiquette:** Your comfort and well being are important to us while you are in the Medical Center. We ask that you, in turn, treat the Medical Center staff and other patients and visitors with courtesy, compassion and respect. You, your family and visitors are expected to be considerate of others regarding noise, privacy, and safety and to follow the Medical Center's rules and regulations.

**Valuables:** We encourage you to leave your valuables at home and only bring those items necessary during your Medical Center stay. The Medical Center is not responsible for lost or stolen belongings. Please send all valuables home with family members or have your nurse secure them in the Medical Center safe.

**Smoking:** Smoking is not allowed anywhere in the Medical Center.

If you have any questions or need more information about the Bill of Rights, please contact Patient Relations at 410-550-0626 (from your hospital phone 0-0626), Monday through Friday, 8:30 a.m. to 5 p.m. If you call after yours, please leave a message, and we will return your call promptly on the next business day.

# PATIENT SAFETY



Anyone who has concerns about patient care and safety in the hospital is encouraged to contact the Patient Safety Hotline at 410-550-HARM. Staff should report patient events or near misses via HERO (Hopkins Event Reporting Online). HERO is an easy to use web-based event reporting tool found on our intranet home page under "Quick Links," located on the right-hand column.

At Johns Hopkins Bayview Medical Center, all staff work together to help the team perform at its best. Because patient safety is the responsibility of every staff member, it's important to be alert for signs of impairment or serious illness with co-workers and staff members, including physicians. The following behaviors may indicate serious physical problems, extreme stress, emotional illness, or drug/alcohol use.

- verbal statements that indicate severe pain or discomfort
- slowed physical movements
- change in gait while walking
- visible signs of pain when performing routine job movements
- frequent use of analgesics (e.g. acetaminophen, ibuprofen) to relieve discomfort
- complaints of concentration difficulties due to physical discomfort
- verbal outbursts or loss of emotional control
- impaired thought process
- pervasive feelings or expressions of sadness or hopelessness
- verbal statements that indicate thoughts of harm to self or others
- generalized loss of interest in activities and social interaction
- generalized decline in quality and effectiveness of job performance
- odor of alcohol or marijuana on breath or clothing
- changes in speech (e.g. slurred, slowed, more rapid, illogical content)
- impaired coordination, increased clumsiness or unusual involuntary body movements
- excessive drowsiness or sleeping on the job
- physical agitation or abnormally slow movements
- frequent mood swings
- verbal or physical aggressiveness directed toward others
- decline in appearance or personal hygiene
- unexplained absence from the work area
- frequent injuries from falls or poorly explained bruises or abrasions

If you observe suspicious behavior, promptly report it to your supervisor or department chair. In cases of immediate danger or threat, contact security without delay. As always, we appreciate your continued commitment to patient safety.

# The Joint Commission 2017 National Patient Safety Goals

The purpose of the Joint Commission's National Patient Safety Goals is to promote specific improvements in patient safety. The Goals highlight problematic areas in health care and describe evidence and expert-based solutions to these problems. Recognizing that sound system design is intrinsic to the delivery of safe, high quality health care, the Goals focus on system-wide solutions, wherever possible.

### 1. Identify Patients Correctly

- a. Use at least two ways to identify patients
- b. Eliminate transfusion errors related to patient misidentification

### 2. Improve Staff Communication

a. Get important test results to the right staff person on time

### 3. Use Medicines Safely

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

## 4. Use Alarms Safely

a. Ensure alarms are heard and responded to on-time.

### 5. Prevent Infection

- a. Use the hand cleaning guidelines from the CDC or the WHO. Set goals for improving hand cleaning
- b. Use proven guidelines to prevent infections
  - i. that are difficult to treat
  - ii. of the blood from central lines
  - iii. after surgery
  - iv. of the urinary tract that are caused by catheters

### 6. Identify Patient Safety Risks

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

### 7. Prevent Mistakes in Surgery

- a. Make sure the correct surgery is done on the correct patient at that correct place on the body
- b. Mark the correct place on the patient's body where the surgery is to be done
- C. Pause before the surgery to make sure that a mistake is not being made.

### **RAPID RESPONSE TEAM**

The Rapid Response Team (RRT) is comprised of rotating ICU staff responding to situations when a patient's condition appears to be worsening. Any staff member may request this assistance.

- In the Medical Center, call 0-0222 and ask for the Rapid Response Team.
- In the Care Center, call the MERT Team. Dial 3-6700 and enter room number.

Any staff member can call the RRT if:

### The patient:

- has a change in vital signs
  - o HR <40
  - o SBP <90 or >240
  - o RR <8 or >30
- has problems breathing
- has a change in mental status with new & unexplained confusion
- has chest pain
- is bleeding
- doesn't look right, feel right or is uncomfortable.

### **Contact Information**

### **Patient Safety Hotline**

Ext. **0-HARM** (0-4276)

(You may also call if you have ideas for improving safety.)

Joint Commission Hotline

1-800-944-6610

complaint@icaho.org.

A new Joint Commission accreditation participation requirement (APR) effective July 1, 2005, states that we educate staff about their right to report safety or quality of care concerns directly to the Joint Commission. No disciplinary or retalitory action may be taken against employees if they choose to report these concerns.





# REPORT ABUSE, NEGLECT AND/OR DOMESTIC VIOLENCE:

Abuse, neglect, and domestic violence occur across all ages and socioeconomic groups. Anyone who suspects a child or vulnerable adult has been mistreated, **must** report it to the local Department of Social Services or the Police. Health care practitioners, police officers, educators and social workers are subject to professional sanctions if they do not report.

# Definitions and Signs & Symptoms of Abuse, Neglect and Domestic Violence

TYPE	DEFINITION	SIGNS/SYMPTOMS
Child Abuse	An act by a parent or person with permanent or temporary care of a child that results in physical injury or threatens the child's health or welfare.	Bruises, welts, lacerations, black eyes, broken bones, open wounds, dislocations and untreated injuries in various stages of healing.
Elderly Abuse	An act that causes pain or injury, or places a person in fear of imminent serious bodily harm.  • Abuse can be physical, sexual or psychological.  • The elderly can be victims of financial abuse, which is the illegal or improper use of a person's assets or resources.	Bruises, welts, lacerations, black eyes, broken bones, open wounds, dislocations and untreated wounds or injuries in various stages of healing.  Malnutrition, dehydration, untreated health problems, poor personal hygiene, untreated health problems, hazardous or unsanitary living conditions.
Child Neglect	When a minor child suffers physical or mental harm from the absence of a parent or guardian, or the failure to provide the child with food, shelter, education, medical care or other necessities.	Failure to gain weight, malnutrition, dehydration, untreated health problems, poor personal hygiene, untreated health problems, hazardous or unsanitary living conditions.
Adult Neglect	The intentional failure of a caregiver to provide basic necessities; the unintentional failure to fulfill caregiver responsibilities due to lack of knowledge or inexperience, characterized by situations in which the person is left alone, isolated or forgotten. Self-neglect is the inability or refusal to provide for one's essential needs.	Malnutrition, dehydration, untreated health problems, poor personal hygiene, untreated health problems, hazardous or unsanitary living conditions.
Domestic Violence	A pattern of assault and coercive behaviors, including physical, sexual, and psychological attacks as well as economic coercion, that adults or adolescents use against their intimate partners.	Bruising, fractures, lacerations, report of pushing, punching, slapping, choking, kicking, using weapons, hurting children, reports of non-consensual sexual contact, fear induced by intimidating looks, actions, gestures, loud voices and threats. Reluctance to speak in front of partner. Partner always speaks for patient.

WHAT TO DO IF YOU SUSPECT SOMEONE IS A VICTIM OF ABUSE, NEGLECT, OR DOMESTIC VIOLENCE:

- WITHIN THE HOSPITAL
  - Call the Social Work Department, ext. 0-0296.

- On nights/weekends, call the hospital operator, ext. 0-0100, who will page the on-call Social Worker.

■ IN THE COMMUNITY

Call the Department of Social Services

- Baltimore City 410-361-2235
- Baltimore County 410-853-3000
- Harford County 410-836-4700 or 410-838-6600

# Resources for Domestic Violence

- House of Ruth Hotline 410-889-7884

- Maryland Network Against

Domestic Violence 1-800-634-3577

- Baltimore County 24-Hour Line 410-828-6390

First Call for Help 410-685-0525

# Standard Fall Precautions

Johns Hopkins Bayview Medical Center is concerned for our patient's safety.

Falls are a threat to the lives and the health of adults 65 and older. It also inhibits their ability to get around freely. You should note however that, all patients should be considered at fall risk at all times.

# \*Falls can often be prevented\*

Below are some of the steps how staff can help to prevent falls and how you can help.

### In All Areas:

- Maintain a safe environment; including:
  - o removing excess equipment/supplies/furniture from hallways and patient rooms.
  - reporting all spills immediately to Environmental Services (EVS) 0-0317;
     pager 3-0572 after hours
    - placing signage to indicate wet floor danger, if possible.
  - o coiling and securing excess electrical and telephone wires.

## In Patient Rooms:

- Assess patient's environment for fall risk hazards including:
  - o Inoperable locks on bed/stretcher/wheelchair,
  - Lack of adequate lighting,
  - o Clutter/obstacles,
  - Excess furniture or equipment.

If any of the above are found, notify Unit Secretary/Charge Nurse immediately

- Keep patient's call bell within reach at all times.
  - o Remind patients to use their call bell for help before moving.
  - Move important items (glasses, tissue, water, etc.) within reach of the patient.
- If you see a patient attempting to get up from bed, push call bell to contact nurse for assistance,
   Suggested Script: "Is there something I can help you with? I want to make sure you do not fall. I will contact your nurse right away and I will wait with you until she/he arrives"
- If you see a patient out of bed that needs assistance, ask them if they need assistance, and call the nurse while you wait with the patient.
- Remind patients:
  - o To call their nurse if they feel dizzy or light-headed
  - o To be sure to use their glasses, walker or cane
  - o To sit on the side of the bed for a few moments before they get up
  - o To wear non-skid shoes or slippers that fit
  - o To use caution when walking with wires, oxygen or other tubing
  - Use handrails whenever available
- Engage the patient's family in helping enforce these reminders.
  - Ask for help when their loved one needs to get out of bed
  - Notify the nurse immediately if their loved one is dizzy or weak
  - Assist their loved one to the bathroom or for walks (with the nurse's permission)
  - o Consider staying with their loved one if they are confused or at risk for falling
  - Move the nurse call bell and other important items (glasses, tissue, water, etc.) within easy reach of the patient
  - o Remind their loved one to call for help before getting out of bed

Inpatients may have additional individual risk precautions taken based on their assessed needs.

# PATIENT SERVICES

Patient Support Department

Ext. 0-0627

### SPIRITUAL CARE SERVICES

- Fulfills religious, spiritual and sacramental needs when requested.
- Available to patients of all denominations and their families.
- Meditation chapel located on main floor for patients, families and staff.
- Labyrinth is a peaceful, meditative "healing" space located on Mason Lord Drive.



### PATIENT SAFETY PARTNERSHIP

- Patients are urged to partner with their health care team to insure a positive, comfortable, safe experience.
- The safety brochure, distributed to all inpatients, provides information about how patients can partner with physicians, nurses and other hospital staff.



### **ADVANCE DIRECTIVES**

- A document that patients can complete to insure their wishes for medical care and treatment are respected.
- Patients can appoint a health care agent if they are unable to make decisions.
- A patient representative can visit the patient to provide information and help them complete an advance directive if requested.

### **ETHICS**

- An Ethics Committee is available for patients, staff and family members faced with difficult treatment decisions.
- Ethics consults can be made by calling the hospital operator (ext. 0-0100).



### **VOLUNTEERS**

Support and supplement hospital services.

## **INTERPRETERS**

Create bridges between patient, family and medical staff.

# PATIENT REPRESENTATIVES

Investigate and resolve patient complaints and concerns.



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# **What Is Diversity?**

Diversity is the combination of similarities and differences we bring to our environment. As you can see here, these go well beyond race and gender. This diversity of thought, perspective, and problem solving abilities is what makes our organization the best of the best.



The Four Layers of Diversity
Adapted from: <u>Diverse Teams at Work:</u>
<u>Capitalizing on the Power of Diversity</u> by
Lee Gardenswartz & Anita Rowe. Irwin:
Chicago, 1994.

To ensure a culture of diversity and inclusion, we at Johns Hopkins Bayview Medical Center embrace mutual respect and celebrate the rich cultural differences brought by everyone who enters our doors.





# HEALTHY AT HOPKINS

MFL Center Tower 2<sup>nd</sup> Fl.

Ext. 0-1690

# **Back Safety**

Healthcare is a high-risk industry for back pain and injury. Healthcare workers who lift or move patients as part of their job are at highest risk for back pain and injury. These injuries include strains and sprains of muscles, ligaments, and tendons. These injuries may be prevented through: good posture, regular exercise, proper body mechanics, and use of lifting devices. Every time you bend over, lift a heavy object, or sit leaning forward, you put stress on the components of your back and spine. Over time, they can start to wear out and become damaged.



# What can put me at risk for a back injury?

Poor physical condition - Your stomach muscles provide a lot of the support needed by your back. If you have weak, flabby stomach muscles, your back may not get all the support it needs, especially when you're lifting or carrying heavy objects. Good physical condition in general is important for preventing strains, sprains, and other injuries.

**Poor posture** - When your mother told you to sit and stand up straight, she was giving you good advice. It is best to try to maintain the back in its natural "S" shaped curve. You want to avoid leaning forward (unsupported) when you sit, or hunching over while you're standing.

**Extra weight** -The more you weigh, the more stress it puts on your back every time you bend over... on a 10:1 ratio.



**Stress** - Tense muscles are more susceptible to strains and spasms.

**Overdoing it** - Don't be afraid to say, "This is too heavy for me to lift alone." It's important to recognize your own physical limitations and abilities. Many people have injured their backs because they were afraid to ask for help.

Anytime you find yourself doing one of these things, you should think: **DANGER!** My back is at risk!

- Heavy lifting
- Twisting at the waist while lifting or holding a heavy load
- Reaching and lifting
- Lifting or carrying objects with awkward or odd shapes
- Working in awkward, uncomfortable positions
- Sitting or standing too long in one position
- Slipping on a wet floor or ice



# How can I prevent a back injury?

- Avoid lifting and bending whenever you can: Place objects up off the floor, raise/lower shelves, use carts and dolly's to move objects.
- Follow these steps when lifting:
  - **1.** Take a balanced stance with your feet about a shoulder-width apart. One foot can be behind the object and the other next to it.
  - **2.** Squat down to lift the object. Keep your heels on the floor. Get as close to the object as you can.



- **3.** Use your palms (not just your fingers) to get a secure grip on the load. Make sure you'll be able to maintain a hold on the object without switching your grip later.
- **4.** Lift gradually (without jerking) using your leg, abdominal and buttock muscles and keeping the load as close to you as possible. Keep your chin tucked in so as to keep a relatively straight back and neck line.



- **5.** Once you're standing, change directions by pointing your feet in the direction you want to go and turning your whole body. Avoid twisting at your waist while carrying a load.
- **6.** When you put a load down, use these same guidelines in reverse.



- Take measures to avoid an injury.
  - **Stretch first**: Taking time to stretch your muscles before starting will help avoid painful strains and sprains.
  - **Slow down**: Allow yourself more recovery time between lifts; take it slowly when doing repetitive lifting; don't overdo it.
  - **Rest your back**: Take frequent, short (micro) breaks; stretch.
  - **Sleep on a firm mattress**: The best sleeping position is on your back with knees slightly elevated (by a pillow), or on your side with knees slightly bent.
  - Get in shape: Strengthen your stomach muscles; lose a little weight; increase your flexibility.

# EMPLOYEE RELATIONS

Alpha Commons Building, Human Resources

Ext. 0-4006

# Handling Confidential Information

- Any information concerning the business of the medical center, our patients, suppliers, dealers, employees or personnel associated with JHBMC is confidential and restricted.
- You may not reveal any such information except under the direction and approval of your immediate supervisor.
- If you are not sure about the confidentiality of particular information, you should refer your inquiry to your immediate supervisor or the Employee Relations Director.

### Personal Visitors at Work

- You are not permitted to have visitors while you are at work.
- No one should enter your work area unless working or conducting business with JHBMC.
- In a personal emergency, notify your immediate supervisor concerning your needs.

# Personal Phone Calls at Work

- Because telephones are an integral part of the medical center's business, it is important for phone lines to be available for that purpose.
- Personal calls, except for emergency reasons, should not be made. They should be made or received only when necessary and be as brief as possible.
- Personal long-distance calls are not to be charged to the medical center. If such a call is necessary, charge that call to your home telephone number or to your personal telephone calling card.
- Making or receiving excessive telephone calls shall result in disciplinary action up to and including termination.

Types of Separation

RESIGNATION WITH NOTICE	At least two weeks notice is given by you to your immediate supervisor.
RESIGNATION WITHOUT NOTICE	Less than two weeks notice is given by you to your immediate supervisor. Not eligible for rehire.
DISCHARGE	Medical Center terminates employee under our standards of conduct.
JOB ABANDONMENT	Medical Center terminates employee after he/she does not report or call supervisor for three consecutive scheduled workdays.
RETIREMENT	You may elect to take early retirement at age 55 with five years of service or full retirement at age 65 with five years of service.
LAYOFF	Termination after 12 consecutive months of no employment from the date of layoff.
FAILURE TO RETURN FROM LEAVE OF ABSENCE	

# Reporting Potential Safety or Health Problems

- The medical center is interested in your health and safety and in protecting our facilities.
- You should observe and obey our safety rules and report any unsafe conditions.
- All on-the-job or work-related injuries should be reported immediately to your supervisor and to Occupational Health Services.
- Hopkins Bayview reserves the right, in its discretion, to require you to submit to medical or physical examinations or tests as a job requirement at any time.
- The medical center contains valuable machinery, equipment, furnishings, merchandise and other property. To protect your job and those of all employees, it is important to pay close attention to the security of our facilities as well as its equipment, merchandise and other property. You can help by immediately notifying your supervisor if you see any suspicious or illegal activity, including the presence of strangers on our premises.

# Kronos, Badge Swiping Guidelines

- Swipe badge in department where assigned to work
- Swipe in no sooner than 7 minutes before the start of shift
- Swipe out no later than 7 minutes after the end of shift

# Hours of Work and Meal Breaks Non-exempt Staff

- Must obtain approval from manager to work outside of scheduled hours
- Must notify manager of any missed meal breaks
- Must obtain approval from manager to not take, work through, or substitute a meal break
- Unapproved overtime will be paid; failure to follow policy/procedure can result in disciplinary action.
- Employees are allowed unpaid meal break of 30 minutes in an 8, 10, 12 hour shift.
- Rest period of 15 minutes is subject to operating efficiency.

# Employee Relations Policies

- In orientation folder:
  - Dress Code
  - Attendance Monitoring Program
  - Lateness Monitoring Program
  - Discipline and Discharge
  - Harassment
  - Grievances
  - Hours of Work & Meal Breaks Non Exempt Staff
- On Bayview Intranet: http://www.insidehopkinsbayview.org/hr/policies/index.html



# INFECTION CONTROL

Mason F. Lord Center Tower 3rd floor

Ext. 0-0515

# Isolation Precautions: Standard and Transmission-Based

The goal of isolation is to prevent the transmission of microorganisms from an infected or colonized patient to other patients, visitors and health care workers. By using personal protective equipment (masks, gloves, gowns, eyewear, etc.) and specific room requirements, this can be accomplished. This system of isolation derived from the Centers for Disease Control (CDC) is composed of two levels of precautions: Standard Precautions and Transmission-Based Precautions. *A copy of the Infection Control Manual is available online*, www.insidehopkinsbayview.org/

### STANDARD PRECAUTIONS

Standard Precautions are to be used in the care of *all* patients. They apply to blood, all body fluids, secretions, and excretions, except sweat, regardless of whether or not they contain visible blood, non-intact skin and mucous membranes.

Hand Washing	This is the single most important measure you can take to reduce the transmission of microorganisms. Perform hand hygiene following exposure to all blood and body fluids, after glove removal, between patient contacts, and between tasks and procedures. Maintain good hand hygiene by washing and cleaning your hands. The Medical Center policy requires everyone to wash their hands with soap and water or an alcohol-based cleanser before they enter and after they leave a patient'
Gloves	Used with all contact with preceding body fluids. Gloves are changed between tasks and procedures on the same patient, and changed between patients. Gloves are <i>not</i> a substitute for hand hygiene.
Gown, Mask, Eye Wear	For any activity anticipated generating splashes or sprays of blood, body fluid, secretions or excretions.
Mouth pieces, resuscitation bags or other ventilation devices	Used as an alternative to mouth-to-mouth.
Patient Care Equipment	Handle equipment in a manner that prevents contamination of self, other patients, and the environment.
Environmental Control	Gloves: Worn for cleaning up spills containing blood, body fluids, secretions or excretions.  Spills: Wiped up using absorbent material. A hospital-approved disinfectant or a hypochlorite solution (1 part bleach to 9 parts water) should be applied to the area, and then rinsed.
Linen	All linen is treated as contaminated. Wet linen should be placed in a clear plastic bag first.

Sharps	Great care should be exercised with needles, scalpels and other sharp Instruments or devices. Needles <u>are not</u> to be recapped, bent or cut after use, and are to be disposed of in puncture resistant containers.
High-Risk Work Areas	Contamination of environmental surfaces as well as hands of personnel is possible. Therefore, for safety purposes you should always leave the work area to eat, drink, apply cosmetics, or handle contact lenses.
Food	Never store food in a refrigerator with materials that could be contaminated.

# What if I'm exposed to an infectious material?

Answer: WIN

Wash the exposed area immediately with soap and water.

dentify the source of the exposure.

Notify your supervisor immediately. Call Occupational Health Services (OHS) Monday-Friday, 8:00 a.m.-4:30 p.m., extension 0-0477. All other times, page the patient care coordinator at 3-1545.

Bayview's **Exposure Control Plan** outlines methods to protect you from exposure to diseases transmitted by blood/body fluids. You will find a copy of this plan in the infection control manual, red envelope or in the Medical Center's policy manual located on the intranet site <a href="https://www.insidehopkinsbayview.org/">www.insidehopkinsbayview.org/</a>

### TRANSMISSION-BASED PRECAUTIONS

These precautions are used in the care of patients with highly transmissible pathogens, and are used in addition to standard precautions. There are three transmission-based precautions to remember:

**AIRBORNE PRECAUTIONS**: Illnesses spread by airborne droplet nuclei such as tuberculosis. Patients are place in negative pressure rooms and N95 respirators are worn.

**DROPLET PRECAUTIONS**: Spread by large particle droplets, which are generated by patient coughing, sneezing and/or talking. Droplets may travel up to three feet from the patient. Surgical masks are worn to enter room.

**CONTACT PRECAUTIONS:** Infection or colonization with organisms transmitted either directly (e.g. patient care activities) or indirectly (e.g. contact with contaminated environmental surfaces). Gloves are worn to enter room. Add a gown if contact with the patient or the patient's environment is anticipated.

# SECURITY

Administrative Service Center

Main Number Ext. 0-0333

I.D. Badges Ext. 0-3179

# What's my role in maintaining security at Bayview?

**KNOW THE MEDICAL CENTER'S SECURITY POLICY**: By following proper procedures, you'll improve your chance for a positive outcome – no matter what the situation. Ask your manager to explain the specific procedures for identifying, responding to, and preventing dangerous situations.

**BE ON THE ALERT:** If something or someone seems suspicious, check into it or contact Security. Don't assume that someone else will handle it. □Be alert to potential dangers and report them immediately.

BE OBSERVANT OF PEOPLE AROUND YOU: Wear your ID badge ALWAYS. It's a State law and



hospital policy. The badge is to be worn above the waist with photo facing forward. Visitors are also required to wear ID and are given location-specific, color-coded wristbands. If you see anyone without proper ID, it is your responsibility to direct him/her to the appropriate place (ex. a security station at the entrance to any building). Be polite but firm. Explain that it's for everyone's protection. If resistance is met, notify Security immediately.

ID Wristbands	For
Black	Employees who have forgotten their ID badge.
Blue	Individuals visiting patients.
White background with picture	Vendors
Pink	Individuals using the cafeteria only.
Yellow	Individuals with appointments.

**REPORT ALL INCIDENTS**: No matter how minor something may seem, you have a duty to report it. Reporting all incidents helps determine if any security improvements are needed. Reporting potential threats to Security improves overall safety. These reports are used to decide upon a plan of action, and are an important component in the overall assessment of the safety of the medical center.

# **PROTECT PROPERTY BY PREVENTING THEFT**: It only takes a few seconds for theft to occur.

Make sure that people are wearing ID badges/wristbands, and are authorized to use medical records, special equipment and restricted areas.



- Report hazards promptly. Notify Security and/or Maintenance of burned-out lights, vandalism, damaged or missing signs, etc.
- Use keys and electronic access codes properly. Don't leave keys where they can be stolen or copied. Never share computer passwords or access codes.
- Secure your workstation if left unattended. Make sure doors, windows, cabinets, supply closets, etc., are kept locked until needed. Secure computers and patients records too. Computers should be password guarded. Turn your computer off at the end of your shift.
- Carry only those items with you that you need with you at work. Keep wallets, pocketbooks, backpacks, etc. locked securely. Avoid carrying large amounts of cash, or leaving valuables in your car.
  - Report **ALL** losses to Security regardless of how minor they may seem.



### BE SAFE OUTSIDE:

- Avoid traveling alone. Travel to and from with a friend or coworker, if possible.
- Contact Security for an escort to/from parking lots or buildings.



- Ride the shuttle buses to/from buildings and parking lots.
  - Bayview Campus shuttle routes and times vary between 6 am & 8 pm weekdays. Call ext. 0-0168 (before 4pm) or ext. 0-1954 (after 4pm) for questions about shuttle service & routes.
  - o Cross campus shuttles also run between JHBMC and JHH (Wolfe St.) between 7:00 am to 7:15 pm weekdays. See intranet for pick-up and drop-off times and locations.

# HELP STOP **VIOLENCE** BEFORE IT STARTS!

- Know what the guidelines are for managing a violent situation. Ask your manager.
- Safely store anything that could be used as a weapon (e.g., syringes, scissors, etc.).
- Treat everyone with respect. Common courtesy can help calm angry feelings.
- Trust your feelings about people and situations. Your feelings are vital warning signs!
- Be alert for warning signs that a person may be losing control (e.g., holding a weapon, acting drunk or under the influence of other drugs, pounding on objects, making threats, insults or unreasonable demands, shouting, swearing, pacing, restless, clenching their fists
- If violence occurs stay calm, alert Security and other staff. Follow your dept. /unit guidelines.

# HIPAA

# **Johns Hopkins Privacy Office**



Johns Hopkins (JH) has a centralized Privacy Office. The mission of the Privacy Office is to encourage and assist JH covered entities in complying with the **Health Insurance Portability and Accountability Act** ("HIPAA") privacy regulations, other applicable federal and state privacy laws, and related Johns Hopkins HIPAA policies and procedures. The Privacy Office provides direction and advice over <u>all</u> Johns Hopkins HIPAA covered entities and functions, for both the Health System and the University, for both providers and for health plans.

The Privacy Office maintains a comprehensive intranet site that can be accessed by JH workforce members. The intranet site contains a wealth of information about the HIPAA regulations and how they have been implemented at JH. All JH privacy policies and related forms can be accessed through the Privacy Office intranet site. In addition, all privacy related requests, questions and concerns may be submitted through the intranet site. To access the Privacy Office intranet site, visit:

http://intranet.insidehopkinsmedicine.org/privacy\_office/index.html.

All JH workforce members who have access to patients and/or patient information are required to complete HIPAA online training within 10 days of work/hire. The minimum JH HIPAA training requirements are available on the JH Privacy Office intranet site.

- General HIPAA phone number 410-614-9900
- General HIPAA email address HIPAA@jhmi.edu
- Reporting breaches <u>HIPAAbreaches@jhmi.edu</u>
- Subpoena email address <u>subpoenas–HIPAA@jhmi.edu</u>

# INFORMATION SECURITY

## Introduction to Information Security

Johns Hopkins processes a lot of information. Most of what we do—whether in education, patient care, benefit administration or research and operations—demands that we protect sensitive information throughout various systems. We need that information to be accurate and on hand, and we must be able to trust that it will be used only by those who need it.

Since we use computers in our daily work duties, we should follow the best computer security practices. Our use of computers must be:

- Legal and ethical
- Considerate of others
- Proper in order to limit security problems

### Protected Health Information

The HIPAA privacy regulations protect individually identifiable patient and health plan member information, no matter what form it is in—paper, oral, or electronic. This information is called Protected Health Information or PHI. The HIPAA security regulations cover only electronic forms of this information called Electronic Protected Health Information or E-PHI. The HIPAA security regulations are enforceable as of April 20, 2005. How you use your computer can impact the security and privacy of patient and plan member information.

To protect E-PHI, follow these steps:

- Avoid disclosing unencrypted E-PHI in e-mails and shared files over the Internet.
- Avoid saving E-PHI to your computer hard drive. Save files on a Johns Hopkins server.
- Never share your login with another user.
- Never store E-PHI on a handheld device that lacks strong security controls.
- Use only the E-PHI needed to do your job.
- Log off or lock your computer when you are not using it.
- Report computer security problems quickly.

Many computer systems track your actions. Be aware that inappropriate actions on computers can cause damage, and that such actions may be traced to a specific user.

### Authorization to Use E-PHI

To do your job, you may be given access to some computer applications with E-PHI. But first, the security administrator of the computer applications must get authorization from your management. Also, you may have to go to computer training and sign a confidentiality agreement before access is given.

If you change jobs within Johns Hopkins, your computer access may change. You may be given access to other computer applications, and/or your existing access may be increased, reduced or removed.

### User IDs and Passwords

Computer applications ask you to prove who you are before giving access. Proving who you are before you can do something is called "authentication." For most computer applications, authentication consists of a user ID (for example, jsmith1) and a password. Good passwords can be effective security controls when you follow these steps:

- Make passwords that are at least eight (8) characters long.
- Make your passwords hard to guess. Use a mix of letters, numbers and special characters (!@#\$).

- Do not use your user ID, your name, your birthday, or your child's birthday as your password.
- Do not use names or other words found in a dictionary as your password.
- Adding a number at the beginning or end of a word does not make it a hard to guess password.
- Try using the first letters of a phrase that you will not forget and put in some special characters and numbers (e.g., Four Score and Seven Years Ago can become FS^a7YA; My Wife's Birthday is January 1 can become MWBIJ1; etc.).
- Try using vanity license plates, such as UR2COOL, or try combining two words to make a good password (i.e., blue jays and hawks can become bj/hawks)
- Do **not** write down your password in your work area.
- Do **not** share your password with anyone other than your computer or LAN administrator to fix or maintain your computer.
- Change your password at least every 90-180 days.
- Avoid re-using old passwords.
- Change your password if you think someone knows your password or has used it. Also, tell your LAN administrator or Help Desk.

### Preventing Viruses

Computer viruses are designed to damage or destroy a computer, even without you knowing it. It is standard practice to use and maintain anti-virus software on your computer. Follow these steps to help limit viruses:

- Make sure anti-virus software is on your computer. Use the software and update it often.
- Your computer should protect against new viruses or tell you when updates are available.
   Every Johns Hopkins user can get this software at http://www.jhu.edu/anti-virus/.
- Question all e-mail attachments. The attachments ending in .doc and .xls (Microsoft Word or Excel documents) are mostly safe, but virus writers may trick users by using them.
- Do **not** open any e-mail attachments with extensions of .exe, .vbs, .js, .hta, .pif and .shs unless you know the sender and the contents of the file.
- Do **not** assume that all e-mails and attachments are virus free, even if the e-mail appears to come from someone you know.
- Be careful downloading programs from the Internet and ask your LAN administrator if you have questions.

### Reporting Incidents

Even with good security habits, there will be incidents from time to time that need a response. An incident could be:

- Unauthorized access to gain the ability to monitor computer activity
- Unauthorized access to steal or alter data
- Tampering with or destroying a computer, handheld device or server
- A computer virus
- Belief that someone used your account when you were not using it (for example, when on vacation)

Incident reporting is important. You should watch for unusual activity and tell your LAN administrator or HELP Desk.

### What You Can Do

You need to be aware of how you use computers. You need to think of how your actions might create a security issue. Report incidents and unusual activity. And, if you are not sure of what to do, always ask your LAN administrator.

# **JOHNS HOPKINS COMPUTER SECURITY TIPS**

- ★ Keep your user ID and password to yourself.
- ★ Make your password hard to guess and change it frequently.
- ★ Use only the computer systems, programs and files you are authorized and required to access to perform your job.
- \* Make sure others are not looking over your shoulder at the screen while you are accessing PHI.
- \* Avoid sending protected health information (PHI) in e-mails over the Internet.
- **★** Save PHI only to a secure network, not to your local PC drive or portable device.
- \* Beware of downloading or opening software, documents or e-mail attachments from unknown, untrustworthy sources.
- **★** Log off or lock your computer when not in use.
- ★ Promptly get your printed documents from the printer.
- ★ Do not leave unattended printouts in an open area.
- Seek approval from your systems administrator before installing computer programs.
- ★ Use and update antivirus software regularly.
- ★ Report all security incidents to your Help Desk or LAN administrator.



# FIRE SAFETY

Alpha Commons Building, Safety Department Ext. 0-0228

# What should I do if there's a fire in my area?

Rescue everyone from immediate danger.

**Alarm** others. Activate fire pull station. **Dial ext. 0-0222.** Provide the operator with the following information:

- Your name
- Location
- Type of fire (e.g., paper, electrical, gas)
- Phone number you are calling from

**Confine** the fire. Close all doors and windows. Remove combustible material.

# Extinguish the fire or Evacuate.

Extinguish (PASS)	Evacuate
Only fight the fire if it's small and confined to a small area.	Evacuation is horizontal. Move occupants to a safe area (same floor, different wing).
<ul> <li>PULL the ring pin.</li> <li>AIM extinguisher at base of fire.</li> <li>SQUEEZE the handle together to release extinguishing agent.</li> <li>SWEEP the nozzle side to side, using short bursts.</li> </ul>	For ambulatory and/or wheelchair dependent occupants, assist with movement to a safe area.
Choose the correct fire extinguisher. Look for the symbol(s) on extinguisher:  A Use for wood, cloth, paper & rubbish fires  B Use for oil, paint, grease, propane and flammable liquid fires  C Use on electrical equipment fires	For occupants in bed needing assistance for transfer, first transfer to a wheelchair and then transport to a safe area.
A multipurpose fire extinguisher (ABC) can be used on all 3 major types of fire.	For bed bound occupants, transport bed (if possible) with occupant to a safe area.

# RACE...

gives the basic steps that should be taken in the event of a fire. Depending upon where you work, there may be additional steps that are needed.

What fire prevention tips are important for me to remember?

# Make good housekeeping part of your work routine

- Keep passageways and exits clear.
- Don't let furniture or equipment block stairways, halls or exits.
- Keep floors clear of waste and spills.
- Make sure exit paths and doors are well lit and clearly marked.

### Check fire doors

- Be sure nothing is blocking them.
- Never wedge or prop them open. Fire doors close automatically when the fire alarm system is activated. This creates a fire and smoke boundary and also creates safe compartments for horizontal evacuation.

# Dispose of trash safely

- Put waste in approved containers. Keep these away from heat sources.
- Put flammable substances in approved metal cans or containers.



# Keep heat away from things that can catch fire

- Make sure heat-producing appliances are a safe distance from cloth (e.g., linens, mattresses), paper (e.g., magazines, charts), and plastics (e.g., pitchers, trays).

# Help enforce the medical center's smoking policy

- Follow all smoking rules. Remind others to do the same.



# Use electrical equipment safely

 Faulty equipment or improper use of equipment can cause fires and other serious problems.

# Take care around other potential hazards

 Oxygen equipment can catch fire around a spark or heat. Oxygen does not burn but it greatly enhances the items that do. Oxygen will make objects that are normally very difficult to burn, burn easily.



 Flammable and combustible substances such as cleaners, chemicals, gases and other materials can explode or catch fire if not stored properly.



# HAZARDOUS MATERIALS

Alpha Commons Building, Safety Department

Ext. 0-0228

To reduce the risk of illness and injury caused by chemicals, the Hazard Communication Standard was developed by the Occupational Safety and Health Administration (OSHA). It says that you have a "Right to Know" what hazards you face on the job and how to protect yourself against them.

# What is a chemical?

Almost every product we use has chemicals in it. The beverages we drink the food we eat and the products we use everyday, e.g., alcohol, hairspray, toothpaste, hydrogen peroxide, pesticides and cleaning products. Chemicals can be safely used when handled according to instructions.

# What makes a chemical hazardous?

A chemical is considered hazardous if that chemical is likely to cause harm. Chemicals can have two types of hazards:

PHYSICAL HAZARDS	HEALTH HAZARDS
Related to the way that a chemical	Related to the way that a chemical
interacts with other substances or the environment.	interacts with your body.
Can harm you by exploding, igniting, or burning.	Can create short/long-term damage, or death
Examples: flammable liquids and gases,	Examples: lead, mercury,
compressed gas cylinders, and explosive chemicals	formalin and glutaraldehyde.

# How might I become exposed to a hazardous chemical?

Chemicals you handle or those handled by others through a splash, spill or other accident can expose you. The three main methods of exposure are:

- 1) **Absorption**: Many chemicals can burn or irritate the eyes. Some chemicals can burn the skin. Other chemicals can pass through the skin and enter the bloodstream. Injection of hazardous chemicals may occur if you are cut with a tool, instrument, or needle that has been contaminated with a chemical. If the chemical is not immediately washed off, it may be absorbed into the blood stream and produce exposure symptoms at a later time. Gowns, goggles, masks and gloves help protect the eyes and skin from chemical exposures.
- 2) *Inhalation*: Chemicals can become airborne in the form of dust, vapors, smoke and fumes. To prevent inhalation, work in well-ventilated areas and use dust masks and respirators.
- 3) *Ingestion*: This is caused when you eat, drink or smoke on the job. Small quantities of vapors can dissolve in drinks or touching food or cigarettes can absorb chemicals on your hands.

# How can I work safely with chemicals?

### Read the label instructions first.



Your primary source of information for most products is on the label. The label makes it easy to find out at a glance about the chemical's possible hazards, and the basic steps you take to protect yourself against those risks.

The label may use words or symbols to tell you:

- Name of the chemical
- Names, address, and phone number of the company that made or imported the chemical
- Physical hazards (Will it explode or catch fire? Is it reactive? Is it radioactive?)
- Any important storing or handling instructions
- Health hazards (Is it toxic? Could it cause cancer? Is it an irritant?)
- The basic protective clothing, equipment, and procedures that are recommended when working with this chemical.

Before you move, handle or open a chemical container, **READ THE LABEL** and follow the instructions. If you're not sure about something, **ASK YOUR SUPERVISOR** before you act. If you request additional information about a chemical product that you are using, your supervisor has <u>one</u> day to verbally get back to you and <u>five</u> working days if you'd like the information in written form.

# Each hazardous product has a Safety Data Sheet (SDS).

The SDS is your guide to workplace safety. Everything that's known about the chemical is here. The SDS covers:

Identity	Who makes it, their address, phone number, and date prepared
Hazardous ingredients	The substance's hazardous components, chemical ID and common names. Worker exposure limits.
Physical and chemical characteristics	Such as boiling point, vapor pressure, water solubility, appearance and odor under normal conditions.
Physical hazards	Such as fire and explosion and ways to handle those hazards.
Reactivity	Whether the substance is stable. Which substances and situations to keep it away from so it won't react.
Health hazards	How the chemical could enter the body, hazards that could come from exposure, signs and symptoms of exposure, emergency and first aid procedures.
Precautions for safe handling and use	Procedures for cleaning up spills and leaks, how to dispose of the substance/equipment and how to handle and store the substance properly.
Control Measures	To reduce harmful exposure, type of personal protective equipment and/or environment needed when handling the chemical. Special work or hygiene practices.

Safety Data Sheets (SDS) can be located online via the intranet.



# EMERGENCY PREPAREDNESS

Alpha Commons Building, Safety Department

Ext. 0-0228



Healthcare organizations must be prepared to respond to disasters and threats. These disasters and threats include:

- Natural disasters (e.g., flood, hurricane, snowstorm)
- Technological disasters (telecommunications failure, hazardous materials spill)
- Major transportation accidents (e.g. multi-vehicle collision, train wreck)
- Terrorism
- · Nuclear, biological, and chemical events

# What's my role in the event of an emergency or disaster?

In an emergency or disaster situation, Bayview currently initiates the **Hospital Incident Command** System (**HICS**). This plan provides guidelines for the operation of the hospital during disaster type situations. The Emergency Management Subcommittee is responsible for managing the medical center's disaster readiness.

An efficient and effective response to emergencies and disasters involves regular training, familiarizing yourself with your role, and knowing to whom and where to report in an emergency. While at the medical center, you'll be notified of a disaster either by overhead page or by your supervisor. Report immediately to your department/unit for instructions. If you are off duty and learn of a disaster situation at the medical center, unless you are scheduled to work, stay at home and wait for a phone call or page.

Disasters are news! During a disaster, all questions either from the media or from any potential victim's family members are referred to the Public Relations Department, extension 0-0128.

Many people's lives may depend on a quick response to any kind of code. Be familiar with the following emergency codes. These codes are found on your "Bayview On Alert" badge and Joint Commission pocket guide.

**Bayview's Emergency Codes** 

Event	Code
Infant/Child/Adult Cardiac Respiratory Arrest	Blue
Fire	Red
Emergency or Disaster Yello	
Infant or Child Abduction Pink	
Person with weapon or hostage situation	Silver

# **ELECTRICAL SAFETY**

Pavilion, Clinical Engineering Ext: 0-0264



Most equipment in the healthcare setting is electric. For example, ECG machines, bedside monitors, adjustable beds, nurse call systems, treatment devices, computers, and lamps all run on electricity. Patients, staff and other healthcare personnel are often in contact with these devices, which creates a risk of electric shock and injury.

Although electrical hazards can cause serious injury, they can usually be avoided by following the precautions and procedures of electrical safety. Through use of periodic inspections, checking equipment when used, and safe handling, electrical hazards can often be detected before problems occur.

# Electrical Safety: The Basics

Electricity always takes the easiest path to return to its source. Electric current flows easily through moist body tissues. Inside a piece of equipment, electricity is slowed down by having to do work. Therefore, electricity would much rather travel through a person than a piece of equipment!



Electric shock happens when a person becomes a shortcut for electricity that is meant to return to its source *after* powering a piece of equipment. There are many factors that can make a person a better <u>conductor</u>. These factors include wet clothes, high humidity, sweating and standing in a puddle of water. All of these factors increase the risk of injury if the person is shocked. Electric shock can cause burns, muscle spasms, abnormal heartbeats, stopping of breathing and electrocution.

On the other hand, <u>insulators</u> (i.e., rubber, plastic, glass) make a person a bad conductor. For example, rubber-soled shoes make it difficult for electric current to pass through a person's feet directly into the ground. A person wearing rubber-soled shoes may no longer be such an easy path for electricity to take! This person is less likely to be injured if he or she is exposed to electricity.





Most electrical hazards are easily visible and obvious warning signs are often present. If you suspect a piece of equipment is not working properly, take it out of service and contact Clinical Engineering. Put an "out of service" tag on the equipment until it can be checked. Equipment is hazardous if it:

- Does not work correctly
- Shows signs of damage
- Has a loose switch or knob
- Gets too hot when used
- Produces a burning smell and/or strange noise
- Has an out of date inspection sticker
- Been dropped or banged
- Has had liquid spilled on it.

# To help prevent electrical accidents, follow these best practices:

Learn how to use the equipment properly.



- Visually inspect the equipment for damage. For example, check for cracks, holes, and other damage; and check to make sure all device covers are in place. Equipment brought in by patients also should be inspected before use.
- Do not use electrical equipment if liquid has been spilled on it, if the floor is wet and you are standing in the wet area, or if your hands are wet.
- Do not stack anything on or behind electrical equipment.
- Turn equipment off before plugging it in or unplugging it.
- Adverse events caused by clinical equipment are documented and reported to the FDA as required by the Safe Medical Device Act. All equipment incidents must be reported to your manager, Risk Management, and the Clinical Engineering department immediately.
- Check power cords for fraying, splicing, and wear.
- Do not jerk cords from outlets. Pull on the plug to remove a cord from an outlet.



- Do not rest equipment on power cords.
- Use only power cords with three-prong plugs. Never use adapters, two-prong plugs, or broken three-prong plugs.

# Johns Hopkins Bayview Medical Center 2017 Orientation Checklist

*Instructions*: Place a ☑ after each topic. Read and sign the HIPAA Confidentiality Agreement.

Orientation Topic	V
About Hopkins Bayview (Mission, Values, Vision, History)	
Patient Experience (Patient Centered Care, Patient Satisfaction, Language of Caring, Performance Improvement)	
Patient Safety (National Safety Goals, Standard Fall Precautions, Professional Assistance Committee, Abuse, Neglect, Domestic Violence)	
Patient Services  (Patient Rights/Responsibilities, Spirituality/Pastoral Care, Advance Directives, Patient Safety Partnership, Organizational Ethics)	
Corporate Compliance (Compliance Hotline, Workplace Concerns, Code of Ethics)	
Diversity & Inclusion (Respect, Inclusion, Understanding, Communication)	
Employee Relations & FASAP (Confidentiality, Policies, Kronos Procedures, Meals & Breaks, Employee Assistance Program)	
Healthy at Hopkins (Services, Awareness, Fitness Center, Back Safety) (N/A to BSI & JHU employees)	
<b>Benefits</b> (N/A to BSI & JHU employees)	
Security (Services, Awareness, Theft and Violence)	
Infection Control (Bloodborne Pathogens, Standard and Transmission-based Precautions, Exposure Control Plan)	
HIPAA & Information Security (Hopkins Responsibilities, Confidentiality, Patient Rights, Information Security)	
Environment of Care (Fire Safety, Hazardous Materials, Electrical Safety, Emergency Preparedness)	

I have read the information on each of these topics and I understand the information presented.

Print Name:	Signature:
Department/Unit:	Date:

### CONFIDENTIALITY AGREEMENT FOR WORKFORCE MEMBERS--GENERAL

I understand that I require information to perform my duties at the Johns Hopkins University or Johns Hopkins Health System entity by which I am employed or for which I am volunteering ("Johns Hopkins"). This information may include, but is not limited to, information on patients, employees, plan members, students, other workforce members, donors, research, and financial and business operations (collectively referred to as "Confidential Information"). Some of this information is made confidential by law (such as "protected health information" or "PHI" under the federal Health Insurance Portability and Accountability Act) or by Johns Hopkins policies. Confidential Information may be in any form, e.g., written, electronic, oral, overheard or observed. I also understand that access to all Confidential Information is granted on a need-to-know basis. A need-to-know is defined as information access that is required in order to perform my work or volunteer duties. If my duties change, my need-to-know also may change.

By signing below, I agree to the following:

- I will review the applicable Notice of Privacy Practices and the Johns Hopkins policies on confidentiality and privacy, including any policies that are specific to the entity and department in which I conduct my activities. I understand that these will be made available to me by my manager.
- I will access, use and disclose Confidential Information in keeping with the abovementioned policies and only on a need-to-know basis.
- I will contact my supervisor or manager (if applicable) in order to obtain proper permission before I make any other use or disclosure of Confidential Information. If I have no manager or I am the manager, I will seek advice from the Health System or University Legal Counsel or the Johns Hopkins Privacy Officer to assure that the use or disclosure is within the law and Johns Hopkins policies.
- I will not disclose Confidential Information to other patients, other plan members, friends, relatives, co-workers or
  anyone else except as permitted by Johns Hopkins policies and applicable law and as required to perform my work
  or volunteer duties.
- I will not post or discuss Confidential Information, including pictures and/or videos on my personal social media sites (e.g. Facebook, Twitter, etc.). Likewise, I will not post or discuss Confidential Information on Johns Hopkinssponsored social media sites without the appropriate approval in accordance with established Johns Hopkins policies and procedures.
- I will not access, maintain or transmit Confidential Information on any unencrypted portable electronic devices (e.g. Blackberries, Androids, iPhones, iPads, etc.) and agree to use such devices, with respect to Confidential Information, in accordance with Johns Hopkins policies only.
- I will protect the confidentiality of all Confidential Information, including PHI, while at Johns Hopkins and after I leave Johns Hopkins.

All Confidential Information remains the property of Johns Hopkins and may not be removed or kept by me when I leave Johns Hopkins except as permitted by Johns Hopkins policies or specific agreements or arrangements applicable to my situation. If I violate this agreement: if I am an employee, I may be subject to disciplinary action, up to and including discharge, under applicable human resources policies; if I am a volunteer, I may be subject to termination of my right to volunteer, under applicable program policies. In addition, under applicable law, I may be subject to criminal or civil penalties. I have read and understand the above and agree to be bound by it. I understand that signing this agreement and complying with its terms is a requirement for me to work or volunteer at Johns Hopkins.

Name:	Signature:	
Johns Hopkins Entity/Dept/School:		
Johns Hopkins Badge #:	Daytime Phone:	Date:

### **Use of Confidential Information at Johns Hopkins**

It is important that the entire Johns Hopkins Health System and Johns Hopkins University community share a culture of respect for Confidential Information. To that end, if you observe access to or sharing of Confidential Information that is or appears to be unauthorized or inappropriate, please try to make sure that this use or disclosure does not continue. This might include advising the person involved that they may want to check the appropriateness of the use or disclosure with the Johns Hopkins Privacy Office or the Health System or University Legal Counsel. It may also involve letting your manager (if applicable) or others in authority at the Health System or the University know about the issue or possible issue. Use of the Compliance Hotline (telephone #: 1-844-SPEAK2US (773-2528) allows this to be done anonymously, if need be.

Place original signed copy of this Agreement in the Workforce Member's personnel file. For temporary personnel – retain original signed copy of this Agreement in the office of the primary Johns Hopkins unit engaging such persons.

# ACKNOWLEDGMENT OF HIPAA SECURITY AWARENESS And AGREEMENT TO COMPLY FOR GENERAL WORKFORCE MEMBERS

I am, or in the future may become, a user of one or more Johns Hopkins information technology devices or systems that may include Electronic Protected Health Information ("E-PHI"). I hereby certify that:

- 1. I have reviewed the "Johns Hopkins HIPAA Security Awareness" handout and the "Johns Hopkins Computer Security Tips" handout.
- 2. I recognize the importance of maintaining the confidentiality and integrity of the E-PHI that I may work with for my job duties.
- 3. I agree to abide by Johns Hopkins policies and procedures as explained in the Johns Hopkins HIPAA Security Awareness handout.

Signature	Printed Name
Date	Name of Johns Hopkins organization with which you are principally affiliated
Department	

Witness my signature as of the date set forth below.