

## Learner Orientation Packet

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# Our Mission

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

## Our Core Values

### Reverence

We honor the sacredness and dignity of every person.

### Commitment to Those Who are Poor

We stand with and serve those who are poor, especially those most vulnerable.

### Justice

We foster right relationships to promote the common good, including sustainability of Earth.

### Stewardship

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

### Integrity

We are faithful to who we say we are.

This spirituality continually reinforces the belief that caring for people is a “sacred responsibility.”

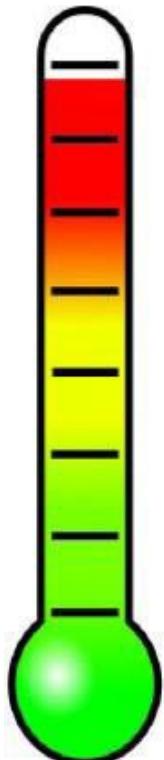
# Security Awareness

The information contained within Trinity Health's network and applications is critical to both our patients and our organization. Each and every one of us should be a guardian in protecting this information. Please refer to the Trinity Health Code of Conduct, Acceptable Use Policy, and other compliance, privacy, and security policies and procedures developed by Trinity Health for more information.

**All users are responsible for the privacy and security of our information and information systems, as well as the ethical utilization of these resources.**

## Different Types of Information Require Different Types of Security

Think about the sensitivity of the information that describes you personally. Consider the potentially negative impact on you if someone gained access to your email address, social security number, the name of your employer, or your credit card number. To adequately protect our information, we have established four levels of data classification which determine the sensitivity of the information and its related security requirements.



### Protected Health Information

Protected health information (PHI) is information related to the physical or mental health or condition of an individual, his or her care, or payment/credit card information. This is the most sensitive information Trinity Health maintains and you should use, disclose, access, transmit and store it on a minimum-necessary basis and only in order to perform your job duties. Federal laws such as the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and the Health Information Technology for Economic and Clinical Health Act (HITECH) aim to protect the security and privacy of PHI. As colleagues of Trinity Health, we must abide by security and privacy laws, regulations and standards. Security standards regulate how PHI is stored and transmitted. Privacy standards regulate how we use and disclose PHI—even if it is spoken. (You can obtain more information on protection and proper handling of PHI from your local Privacy Officer.)

### Confidential Information

Confidential information is highly sensitive and includes benefits, financial information, payroll and personnel records. You should only access and disclose this information on a minimum-necessary basis when performing your job duties.

### Internal Information

The intended use of internal information is to conduct internal Trinity Health business. Internal information is proprietary in nature and could have competitive value to others.

### Unclassified Information

This is information that has been made available for public distribution through authorized Trinity Health channels.

# Social Media and HIPAA

At Trinity Health Of New England, we are committed to building trusting relationships with patients, associates, colleagues, physicians and our communities. One key to maintaining these trusting relationships is protecting the privacy and confidentiality of patient and business information.

***You are responsible for understanding and complying with organizational policies.***

Use of social media is a part of everyday life for many of us. However, it is inappropriate to discuss any patient or business sensitive information on a social networking site. Sharing patient information in any format, including photos, on social media is strictly prohibited by Trinity Health Of New England's Code of Conduct and policies. Even general comments about patients should not be posted. Though the patient may not be specifically identified by name, someone may still be able to identify them. The posting of any patient information on a social media site without proper authorization can result in disciplinary action up to and including termination of employment, impact on medical staff privileges, and termination of educational experience.

## Examples of Violations:

- Taking pictures at work and posting them on social media.
- Connecting with patients on social media absent a pre-existing relationship with the patient.
- Taking pictures of patients, regardless of whether or not you think they can be identified.
- Taking pictures of the Electronic Medical Records or any electronic or written patient information.
- Posting anything that may be considered disrespectful of patients, colleagues, or the organization.
- Posting any sort of protected health information of patients, including names, diagnoses, or even the fact that they are a patient.
- Posting any business-sensitive information without explicit permission, including projects you are working on and proprietary ideas that have come from your department or organization.
- Commenting, liking, or otherwise participating in any of these violations is also against policy.



In some circumstances, colleagues are permitted to post information on social media as part of an approved event. When in doubt, seek guidance to ensure that you have the proper approvals before posting to social media.

You have the responsibility to immediately report any concerns to the Integrity & Compliance Office. You may do this by contacting your supervisor or any member of the Integrity & Compliance Office with any questions about what is and is not appropriate to post to the Internet and social media.

**Anonymous Integrity Hotline:** (866) 477-4661

**Integrity & Compliance Direct Line:** (860) 714-4425

**MyComplianceReport.com**  
(Access ID: THO)

# Risk Management and Safety

## Risk Management

Risk Management uses processes, methods, and tools to assess what can occur within the healthcare setting and to guide proactive decisions for implementing strategies to reduce or eliminate those risks.

### ***Key Areas of Focus: Protection of Assets***

This includes:

- Insurance Coverage
- Professional Liability
- Adverse Events
- Product Safety
- Communication
- Medical Records
- Occurrence Reports
- Fall Hot Line
- Grievances



### ***Adverse Events***

- Risk Management is responsible for reporting adverse events to the Connecticut Department of Public Health.
- Possible reportable adverse events include: perforations; falls with serious injury or death; hospital acquired pressure ulcers (Stage III and IV); specific surgical, environmental, or criminal events.
- All potential reportable adverse events need to be reported to Risk Management immediately by phone.

## Hospital ID Badge



- Hospital ID badges are issued by Trinity Health Of New England
- Badges need to be worn at all times and visible to others.
- Badges act as keys to our Hospital doors.
- Notify Security immediately when a badge is lost or stolen.



## Lock Up Valuables

- Avoid bringing valuables to work.
- If you have valuables at work they should be locked up in lockers, drawers, or offices.
- If something is missing notify Security immediately.
- When leaving your work space be sure to log off your computer



## Escort/Personal Safety

- Use the emergency call boxes in the parking areas to contact Security for an escort.
- Press the button once. Pressing twice disconnects the call.

# Mandated Reporters Child/Elder Abuse



## Licensed health care providers are legislatively mandated reporters of suspected abuse

This includes the following:

Physicians, Surgeons, Hospital Residents and Interns, Physician Assistants, Registered and Licensed Practical Nurses, Dentists, Osteopaths, Chiropractors, Podiatrists, Psychologists, Social Workers, all types of Counselors/Therapists, Dental Hygienists, Physical Therapists, Clergymen, Optometrists, Pharmacists, Licensed Emergency Medical Technicians, Teachers, Principals, Patient Advocate and any person paid to care for a child or elder, and other hospital personnel involved in admission, care, examination, or treatment of patients.

Type of Abuse	What is Reported	If you suspect – REPORT
<b>Child Abuse</b>  Suspected child maltreatment of any kind, regardless of the identity of the alleged perpetrator, must be reported. Failure to meet reporting responsibilities may subject the practitioner to criminal prosecution and possible action against the practitioner's license or certificate.	<ul style="list-style-type: none"><li>Neglect (emotional or medical)</li><li>Emotional Physical abuse</li><li>abuse</li><li>Sexual abuse</li><li>Imminent risk of serious harm</li></ul>	<ul style="list-style-type: none"><li>Seek consultation – Social Worker;</li><li>Call the Department of Children and Families (DCF) Hotline within 12 hours hours of the moment the suspected abuse/neglect has occurred at 1-800-842-2288 or a law enforcement agency.</li></ul>
<b>Elder Abuse (age 60+ in Connecticut)</b>  Certain health professionals who have reasonable cause to suspect or believe that any elderly person has been abused, neglected, exploited or abandoned, or is in a condition which is the result of such abuse, neglect, exploitation or abandonment, or who is in need of protective services, shall within 5 calendar days report such information or cause a report to be made in any reasonable manner to the Commissioner of Social Services or to the person or persons designated by the Commissioner to receive such reports. Any person required to report who fails to make such report shall be fined not more than \$500.	<ul style="list-style-type: none"><li>Abuse</li><li>Neglect</li><li>Exploitation</li><li>Abandonment</li><li>Need for protective services</li></ul>	<ul style="list-style-type: none"><li>If you suspect, initiate a report in conjunction and concurrence with the primary physician and social worker</li><li>Call 1-888-385-4225.</li></ul>
<b>Persons with Disabilities</b>  Certain health professionals who have reasonable cause to suspect or believe that any person with mental retardation has been abused or neglected shall, within 5 calendar days, report such information or cause a report to be made in any reasonable manner. Such report shall be followed up by a written report within five additional calendar days. Any person required to report who fails to make such report shall be fined not more than \$500.	<ul style="list-style-type: none"><li>Abuse</li><li>Neglect</li><li>Exploitation</li><li>Abandonment</li><li>Need for protective services</li></ul>	<ul style="list-style-type: none"><li>If you suspect, initiate a report in conjunction and concurrence with the primary physician and social worker</li><li>Call the director of the Office of Protection and Advocacy for Persons with Disabilities at 1-800-842-7303</li></ul>

# Emergency Preparedness

## EMERGENCY CODES:

**CODE RED** = Fire

**CODE M** = Medical emergency

**CODE BLUE** = Cardiac arrest

**CODE D** = Disaster alert

**CODE 1** = Security alert

**CODE 10** = Bomb threat

**CODE YELLOW** = Surgical

Emergency

**CODE SILVER** = Weapon/hostage situation

**AMBER ALERT** = Infant/child abduction

### Utility Failures – Page or Call Engineering for:

- Electricity
- Water
- Sanitary drain back-up
- Medical gas
- HVAC—heating, AC ventilation

### Disaster Alert

#### *Internal Disaster:*

Any event inside the Hospital which could potentially endanger patients and/or staff. Evacuation or relocation is essential and the need for additional staffing may be present. Examples of internal disasters include fire or loss of utilities.

#### *External Disaster:*

Any event outside the Hospital (natural or man-made) that activates the Hospital's disaster plan. Examples of external disasters include all mass casualty incidents and major weather or climate events.

EMERGENCY	NOTIFICATION BY YOU
<b>FIRE</b>	Pull nearest alarm box - Phone 77
<b>TOXIC/HAZARDOUS SPILL</b>	Engineering SFHMC Campus 44242 Engineering MSH Campus 42930
<b>SECURITY</b>	Security South Campus 44666 Security North Campus 52911
<b>INFECTION CONTROL</b>	Both Campuses call 45472
<b>MEDICAL EQUIPMENT/ELECTRICAL SAFETY</b>	Both Campuses call 44225

# Fire Safety – R.A.C.E.

R escue	<ul style="list-style-type: none"><li>• Remove patients from fire zone</li><li>• Smoke rises</li><li>• Don't become a dead hero – know when to leave</li></ul>
A larm	<ul style="list-style-type: none"><li>• Pull alarm box</li><li>• Call 77 – report the location</li></ul>
C ontain	<ul style="list-style-type: none"><li>• Don't let the fire spread</li><li>• Close doors (fire and smoke doors will automatically close)</li><li>• Shutdown Oxygen: Only those knowing the needs of the oxygen dependent patients can instruct someone to turn off oxygen.</li></ul>
E xtinguish	<ul style="list-style-type: none"><li>• Use fire extinguishers or evacuate</li><li>• Know the location of extinguishers</li><li>• When using extinguishers: <b>PASS</b></li></ul> <p><b>P</b>ull pin <b>A</b>im nozzle <b>S</b>queeze trigger <b>S</b>weep side to side at base of fire</p>

## CODE RED – FIRE – R.A.C.E.

- Code Red in your area (if you hear alarms and see strobes flash, Code Red is in your building)
- Follow RACE
- Clear the corridors
- Adjacent building same floor as Code Red location
- Clear corridors
- Prepare to accept patients/staff from active fire zone
- Prepare to evacuate your area if fire spreads to your area
- 1 floor above/1 floor below Code Red location
- Clear corridor
- Prepare to accept patients/staff from active fire zone
- Prepare to evacuate your area if fire spreads to your area
- Do not use elevators in a "Code Red" building

## Evacuation

### Fire Zones

- Hospital Occupancy – Multiple Fire Zones
- Business Occupancy – Single Fire Zone

### Three Stages of Building Evacuation

- Horizontal Evacuation
- Vertical Evacuation
- Total Building Evacuation

# Hazardous Waste

*Knowledge of use of chemicals and potentially hazardous materials is everyone's responsibility. Always follow label directions when using chemicals of any kind. In compliance with The Hazard Communication Standard, the Hospital's written Hazard communication plan is found on the Infonet – under Policies and Procedures.*

## **Material Safety Data Sheet (MSDS)**

An MSDS provides information on the proper procedures for handling or working with a particular chemical. It includes information on physical properties (melting, boiling, and flash points, toxicity, health effects, first aid, storage, disposal, needed protective equipment, and how to handle spills). MSDSs are not meant for the general public - they are written to inform and protect those who work with the chemical in an occupational setting.

### **An MSDS always has 9 sections**

- I. Product Name, Description, Distributor, Emergency Telephone Numbers
- II. Health Hazard Data (e.g., eye/skin contact, breathing, swallowing)
- III. Hazardous Ingredients
- IV. Special Protection and Precautions (hygienic, ventilation, personal protective equipment PPE)
- V. Transportation and Regulatory Data
- VI. Spill Procedures/Waste Disposal
- VII. Reactivity Data
- VIII. Physical Fire and Explosion Data
- IX. Data (appearance, odor)

## **Spills**

Isolate the area and contact Engineering, not Housekeeping. Engineering will identify the material and the appropriate method (according to the MSDS) for clean-up.

<b>Waste Management</b>	
<b>Red Bags</b>	<b>Regulated Medical Waste</b> <ul style="list-style-type: none"><li>• Items soaked or dripping with blood or body fluids</li><li>• Tissues, organs, body parts (pathological waste – special packaging required)</li><li>• Containers of blood or body fluids that cannot be easily emptied</li></ul>
<b>Opaque Containers</b>	<b>SHARPS / Non-Hazardous Waste / Pharmacy Waste</b> <ul style="list-style-type: none"><li>• Needles and syringes</li><li>• Scalpel blades, surgical staples, etc.</li><li>• Any contaminated item that can puncture skin or Red Bag</li></ul>
<b>Clear Bags</b>	<b>Non-Regulated / General Waste</b> <ul style="list-style-type: none"><li>• Items with small amount of blood or body fluids</li><li>• Items contaminated with urine or fecal matter</li><li>• Food or related items</li><li>• All other items that are not recyclable</li><li>• IV Tubing – NO BLOOD</li></ul>
<b>Yellow Bags</b>	<b>Chemotherapy / RCRA-Regulated Waste</b> <ul style="list-style-type: none"><li>• White or yellow containers with Chemotherapy label</li><li>• Black or blue &amp; white containers for RCRA (pharmaceuticals)</li><li>• Any material contaminated with a Chemotherapy agent</li></ul>
<b>Blue Bags</b>	<b>Recyclables</b> <ul style="list-style-type: none"><li>• White paper – place in blue containers</li><li>• Newspapers – place in labeled containers</li><li>• Cardboard – clean, no packing debris</li><li>• Glass, plastic and metal food containers</li></ul>

# Back Safety

## It's Not a Little Problem Anymore

- ▶ Approximately 8 out of every 10 individuals will experience back pain
- ▶ Back pain is the most common reason for lost work and second most common reason to for visits to a physician (first is upper respiratory problems)
- ▶ It is estimated that almost 90% of back pain is not caused from a single event. Most cases of back pain are due to everyday wear and tear on the back and may be preventable
- ▶ Many healthcare workers put as much stress and strain on their backs as construction workers



## This means we:

- ✓ Commit to use proper body mechanics
- ✓ Pay attention to posture
- ✓ Gather appropriate equipment and additional staff needed
- ✓ Know what assistive lift equipment is available, how it works, and **use it**
- ✓ Plan your lift
- ✓ Get help

# Infection Prevention



## **HOW DOES EXPOSURE OCCUR?**

- Needlesticks (most common) – 600,000 needle stick related injuries occur annually in the U.S.
- Cuts from other contaminated sharps (scalpels, broken glass, etc.).
- Contact of the eyes, broken skin or mucous membranes with contaminated body fluid including blood.
- Respiratory exposures to include but not limited to influenza and Tuberculosis

### **Standard Precautions**

- Recommended work practice for protection against transmission of pathogen
- Always assume body fluid of any patient is infectious
- Recommends Personal Protective Environment (PPE) and other infection prevention practices to prevent transmission in any healthcare setting
- Decisions about PPE is determined by type and risk of transmission

### **Key Points about PPE:** Gloves, Masks, Eye Protection, Face Shields, Gowns, Aprons

- Worn when splashes, spray or droplets of blood or Other Potentially Infectious Material (OPIM) may be generated or in work areas where there is a reasonable likelihood of occupational exposure.
- Wear before contact with the patient, generally before entering the room.
- Remove and discard at the doorway or immediately outside patient room.
- Remove respirator outside room.
- Perform hand hygiene before and after use.

### **Symptoms of HBV & HCV**

- Flu-like Symptoms: fatigue, fever, muscle and joint aches, stomach pain, nausea and weight loss. HBV & HCV can cause long term liver damage. HBV vaccine is available for all employees. There are no vaccines for HCV and HIV.

### **Hand Hygiene**

- Hand Hygiene is the single most effective means of preventing the spread of infection
- “Foam in foam out” is the policy at Trinity Health Of New England. All health care workers are expected to perform hand hygiene before entering and after exiting any patient care areas.
- Soap and water should be used for hand hygiene for hands that are visibly soiled and when caring for a patient diagnosed with or suspected of Clostridiooides difficile (C-Diff).

### **Tuberculosis**

- Spread by tiny airborne particles expelled when a person with infectious TB:
  - Speaks
  - Sneezes
  - Coughs
  - Laughs
  - Sings

# Diversity and Inclusiveness in Healthcare

*The relationship between patients and clinicians has a significant impact on how healthcare is provided and how it is received. This sheet highlights important principles about diversity and inclusiveness that impact care and offers resources for learning more.*

## **Patients are People First**

Developing partnerships with our patients and maintaining cultural humility can help us learn and better understand the varied contexts (emotional, physical, spiritual, environmental) in which our patients live. This allows for creating tailored approaches to care.

- As clinicians, we need to be introspective and become aware of personal attitudes, beliefs, biases, and behaviors that influence (consciously or unconsciously) our care of patients. Our beliefs also impact our interactions with professional colleagues and staff from diverse racial, ethnic and sociocultural backgrounds.
- Pre-scripted approaches to working with patients from diverse sociocultural backgrounds should be used with caution as they may lead to potentially dangerous stereotyping and overgeneralization.
- Important intergenerational differences exist and diversity is often greater within groups than between them

*(Adapted from: Robert C. Like, MD, MS, Director of the Center for Health Families and Cultural Diversity, Department of Family Medicine, Robert Wood Johnson Medical School)*

## **Three Things to Keep in Mind**

**1. Think About Communication:** Communication is a fundamental clinical skill. Our ability to develop trust with patients and families impacts every encounter we have and, ultimately, influences the outcome of our interactions. An awareness of our own communication style and how we may adapt to the specific needs of each patient is critical. Moreover, we must be careful not to let time constraints become an excuse for poor communication.

**2. Understand Health Disparities:** Realize that health disparities, although exacerbated by limited income, education and resources, exist in healthcare across the board. For example, even when researchers controlled for access-related factors including patient's insurance status and income, racial and ethnic minorities were less likely to receive appropriate diagnostic care and necessary treatment.

**3. Avoid Stereotypes:** We should work to recognize the pervasiveness of stereotypes in our society, acknowledge their damaging impact, and explore our own stereotypes. It helps to understand that social inequities affect people's health and their choices about how to use health and human service resources.



# NOTICE TO OUR PATIENTS

## FREE LANGUAGE SERVICE

Trinity Health Of New England Corporation, Inc. and its affiliates, including Saint Francis Hospital and Medical Center, provide equal access to all persons, including those who have Limited English Proficiency (LEP), those who are deaf, hard of hearing, visually impaired or have other special communication needs.

To make sure everyone is understood, we provide 3 interpretation options (telephone, video remote and in-person), which include sign language, oral interpretation, TTY telephones, assisted-listening devices, and other auxiliary aids; plus translation of written materials. All services will be provided in a timely manner and are FREE of charge to patients and their companions who are deaf, hard of hearing, LEP or have speech or other communication disabilities. Telephone and video remote interpreters are available 24 hours a day, 7 days a week, in more than 210 languages. You have the right to FREE language assistance. Please tell our staff if you require help, or call 860-714-4000 and we will arrange it for you.

If you believe that we have failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance by calling 860-714-4573, (TTY 860-714-4447), emailing [RiskManagement@TrinityHealthOfNE.org](mailto:RiskManagement@TrinityHealthOfNE.org), or writing to the Regional Director of Risk Management, Trinity Health Of New England, 114 Woodland Street, Hartford, CT 06105. If you need help filing a grievance, please contact the Regional Health Equity Program Coordinator by calling 860-714-5748.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue, SW, Room 509F, HHH Building, Washington, D.C. 20201 | 1-800-368-1019, 800-537-7697 (TDD) Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>

# High Reliability

Saint Mary's Hospital is a High Reliability organization. We participate in a statewide Connecticut Hospital Association patient safety initiative called Safety Starts with Me. All new colleagues and students at Saint Mary's Hospital must complete the Mandatory High Reliability training video and the corresponding test at the link below:

## High Reliability Videos

- \* Choose the first video.

### Test sign in:

Full name: Enter colleague name

Access Code: safety

(\*\*Please choose the physician test)

Tests should be returned to Kathie or other school representative coordinating the student placement at Saint Mary's Hospital.

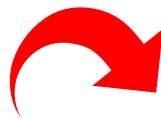
Click the links below to access the Institutional Code of Conduct booklet and for the Language Services Training available here.

[Code of Conduct](#)

[Language Services](#)

[Training Presentation](#)

Scan with  
your smart  
device or click  
on the QR  
code to  
complete  
policy review  
questionnaire  
(required)



THONE - St. Mary's Hospital -  
Dept. of Surgery

