



BAPTIST HEALTH

Baptist Health Lexington 2023 Faculty Orientation



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Dear Faculty Member,

Welcome to Baptist Health Lexington (BHLex) hospital! We are happy to have the opportunity to collaborate with your school in providing clinical experiences for your students. In the introductory letter below, you will find orientation updates for 2023 and the information and requirements you need to know to bring your students into BHLex Hospital.

Updates 2023:

PPE

Fit Testing through Employee Health:

Fit testing for a N95 respirator is available through BHLex Employee Health for students who may be assigned to care for COVID patients during a practicum experience or a clinical experience. Generally this includes 2A ICU, 6A, and the ED. (If a surge in COVID patient numbers occurs, there will be additional units that may receive COVID patients.) If any of your students need fit testing, contact me and I will provide directions for initiating this process.

USP 800 – New laws have been enacted to protect workers from the harm of hazardous drugs – this law is called USP (United States Pharmacopeia) Chapter 800. Certain drugs with a therapeutic benefit have been identified by the National Institute for Occupational Safety and Health (NIOSH) as ones that can pose significant potential risks through occupational exposure. This mandates changes to the handling of drugs not previously considered hazardous. A list of these drugs can be found in the USP 800 Tool Kit found on BEN. Type “USP 800 Tool Kit” into the search bar and it will take you directly there. BHLex has divided these drugs into two categories – Yellow and Pink

Yellow – Any staff in contact with these drugs must use designated safeguards and PPE

Pink – Any staff who are pregnant, breastfeeding, or actively trying to conceive (male and female) must use designated safeguards and PPE

Additional information can be found in the Medication section on page 16 of this orientation packet and in the USP 800 Tool Kit on BEN. These changes will go into effect in February 2023.

Reminder:

The 21st Century CURES act increases access to health information for patients, therefore patients can see EMR entries in real time through the patient portal in the Baptist Health MyChart patient portal. Please be aware patients may obtain reports and information regarding their health before a provider has been able to address the results with the patient.

COVID-19 process update:

Up to Date vaccination against COVID-19 is required for attending clinical rotations at BHLex.

Students who are not vaccinated must have an approved exemption for this vaccine by their school.

Students who have received an approved declination from their school, and those who are partially vaccinated will be required to wear a mask at all times while in a Baptist Health Facility and maintain social distancing.

Up to date COVID-19 vaccination means receipt of all COVID-19 vaccines in the primary series and all boosters recommended when eligible (CDC). Anything less is partially vaccinated. Screening is no longer required upon entry to the hospital, however, you should continue to self-monitor for symptoms of the virus or any other illnesses.

Faculty and students must monitor themselves for COVID-19 symptoms. If you have symptoms, you should NOT report to clinicals or your practicum/internship. Students will notify their instructor should symptoms develop. Symptoms may appear 2 – 14 days after exposure to the virus. The CDC has listed the following symptom as potential signs of a COVID-19 infection: fever or chills; cough; shortness of breath or difficulty breathing; fatigue; muscle or body aches; headache; new loss of taste or smell; sore throat; congestion or runny nose; nausea or vomiting; diarrhea.

Directions for Bringing Students into BHLex

Paperwork: It is a requirement of Baptist Health Lexington and The Joint Commission that instructor and student orientations occur before any clinical experiences begin. Prior to the beginning of the rotation, the instructor must review the 2023 orientation content and complete the orientation paperwork. It is the faculty's responsibility to orient students prior to beginning a clinical rotation or practicum experience, ensure the appropriate forms are completed, and the paperwork is turned in to the student placement coordinator.

Both student and faculty orientation packets are online:

Within BHLex Hospital through BEN:

<https://baptisthealth.sharepoint.com/sites/LEXEducationalDevelopment/SitePages/Students-Faculty-SPICEE.aspx>

From outside the hospital through the BHLex website:

<https://www.baptisthealth.com/Pages/careers/our-locations/lexington/faculty-staff-and-orientation.aspx>

Forms required from instructors:

1. Resume yearly (focus on your clinical competence which supports your ability to be a clinical instructor)
2. Clinical Instructor Information form (page 27)
3. Validation of Orientation/HIPAA Signature (page 28)
4. Confidentiality form (page 29 - 30)
5. EPIC Student Request Form if you would like your students to have access to our EMR (Practicum students are required to have an EPIC account) (page 33)
6. Student Clinical Roster (page 34). Individual students can complete the Demographic Form in the Student Orientation packer.
7. COVID Card or declination

Forms required from students:

1. Demographic Form (in student packet) or Roster (instructor provides to students - page 34)
2. Validation of Orientation/HIPAA
3. Confidentiality form
4. COVID Card or declination

Student Practice Guidelines:

Skills

Students are allowed to provide care for patients at BHLex using the skills taught by the program if successful mastery is documented by the school.

Student medication administration and performance of skills must be supervised.

Some specific restrictions related to student practice include:

- 1) Students may not administer any type of blood product
- 2) Students may not accept verbal orders or critical lab values
- 3) Students may not administer IV push medications in an emergency situation
- 4) Students may not administer IV chemotherapy
- 5) Students may not perform vaginal exam

Medications

Students may only administer medications that are permitted under the appropriate regulating body for the profession. (i.e. Kentucky Board of Nursing, Kentucky Board for Respiratory Care Practitioners, Kentucky State Board of Physical Therapy, Kentucky Pharmacy Practice Act etc.)

Patient Falls

Please continue to stress the importance of safety measures to prevent falls with your students. Our research at BHLEX indicates the top three factors contributing to our patients falling are toileting issues, history of falling, and confusion. Students are a vital part of falls prevention. Please review the falls policy with your students: CBH III-A-31 Falls Risk Intervention Guidelines.

EMR - EPIC

Faculty Access

Activation or reactivation of EPIC accounts occurs when completed orientation paperwork is submitted at the beginning of each rotation/semester. Instructors with clinical groups are required to have instructor EPIC accounts. Instructors new to Baptist Health Lexington must attend a one day EPIC training course.

Employees of BHLex cannot use an employee EPIC account when here as an instructor. You must have an instructor account. If you provide patient care as a bedside nurse and use the nurse EPIC template to document patient care, do not need to attend additional training.

Instructor EPIC Training

EPIC training is typically on Tuesdays from 8:30a to 5:00p, every other week (adjustments are made for holiday weeks) and are held in the basement of the 1760 building.

EPIC Training Dates:

December 6th, 2022

December 20th, 2022

January 4th, 2023 Wednesday (Adjusted for the New Year's Holiday on Jan 2nd)

January 17th, 2023

January 31st, 2023 and every 2 weeks thereafter.

To register for an EPIC class, email Vickie Marise at vickie.marise@bhsi.com with your name, school, program, assigned clinical unit, and dates you are available to attend the class. I will request an EPIC account build for you once I receive your signed orientation forms (pages 27 - 30). Accounts take 7 – 10 days to build so please submit paperwork in a timely fashion.

Omnicell: For clinical instructors, I request the instructor Omnicell account with your signed orientation paperwork. To gain instructor access to the Omnicell cabinets, introductory online modules describing cabinet functions are available for you to view. Access to the modules will be available through the Baptist Employee Network (BEN) once you have attended EPIC training and have received access codes. Please print the certificates or take a picture after completing the modules and return them to me so clinical informatics can grant account access. Finger print access to the cabinets is available to instructors and can be set up by any super user on the clinical unit (often the charge nurse).

Student EPIC Access

Two levels of student EPIC access are available – **Full Access** and **Read Only**

Full Access - permits students to access patient information and document with a co-signature

Recommended for students in their final year/final 3 semesters

Required for students in preceptorships

Read Only - permits students to view patient information in the chart but does not allow data entry

Recommended for students in initial semesters of acute care clinicals

The EPIC student account request form can be found on page 33 of this packet. For security reasons, all the requested information on the form is required for each student. You can schedule time in the computer lab to teach students in your clinical group what you would like them to know regarding the documentation system by contacting Natalie Norton at nnorton@bhsi.com. Please include a 1st and 2nd choice for times, your name, and phone number. Precepted/practicum students will be taught to use EPIC by a preceptor.

Additional Information

- Pre and post conferences can be held in the hospital in areas where conversations cannot be overheard by those passing by to maintain patient confidentiality. Meeting rooms are available and can be reserved for the preconference and post conference time frames through Patrick Barnett at patrick.barnett@bhsi.com. Send Patrick your requested dates, times of pre and post conference meetings, the space you would like to reserve, and he will do his best to accommodate your request. Other meetings will be scheduled in these rooms throughout the day so please do not leave personal possessions in the rooms after meeting.
- ◆ Instructor clinical time – If you are new to a unit, please take some time to orient yourself to the patient population, policies and procedures, and introduce yourself to the staff. Contact the director so you can be paired with someone who can facilitate your orientation. Director phone numbers are on page 26.
- ◆ ID Badges – All instructors must have a Baptist instructor ID badge. A badge can be obtained from Security 7 – 10 days after you submit your signed faculty orientation forms to the student placement coordinator. The security office is located in the lobby of the South Tower. Security office hours are M – F 0800 – 1630. The office number is 260-6723. Your badge will allow access into secured areas on the unit (supply room, medication room, nutrition room, dirty utility room etc.).
- ◆ Observational experiences for students can be scheduled directly with the desired site. Contact names and numbers are on the telephone list in the faculty orientation packet. We recognize the value of observational experiences and requests will be accommodated if possible at the discretion of department leadership.
- ◆ Simulation Lab – Instructors are welcome to schedule time in the Simulation lab to help your students with skills or to check them off. Please contact me to schedule a date and time.
- ◆ Continuing education offerings at BHLex of 4 hours or less are offered to faculty free of charge. Please contact the Education Program Coordinator at 859-260-5405.
- ◆ BHLex Library - Students are welcome to use our library. It is located on the 1st floor of the south Tower across from Administration. Our Librarian, Lonnie Wright will be happy to give your students a tour and give temporary access to the library's electronic books and journals.

If you have any questions, please contact me.

Sincerely,

Julia Fultz MSN, NPD-BC
Student Placement and Simulation Lab Coordinator
Coordinator Nurse Extern Programs
South Tower, 4th floor
Email address - julia.fultz@bhsi.com
Phone: (859) 260-6379
Fax: (859) 260-4055

Mission, Vision & Values

Baptist Health:

Mission: Baptist Health Lexington demonstrates the love of Christ by providing and coordinating care and improving health in our communities.

Vision: Baptist Health will lead in clinical excellence, compassionate care and growth to meet the needs of our patients.

Faith Based Values: Integrity, Respect, Compassion, Excellence, Collaboration, and Joy.

Baptist Health Lexington Nursing:

Mission: To enhance healing by providing care that honors person's essential unity of body, mind and spirit.

Vision: To provide an environment where caring sustains optimal healing and wellness.

Values: Nursing will fulfill its mission to heal and sustain wellness guided by caring-centered values including Compassion, Acceptance, Respect, and Empathy (CARE)

General Student Information

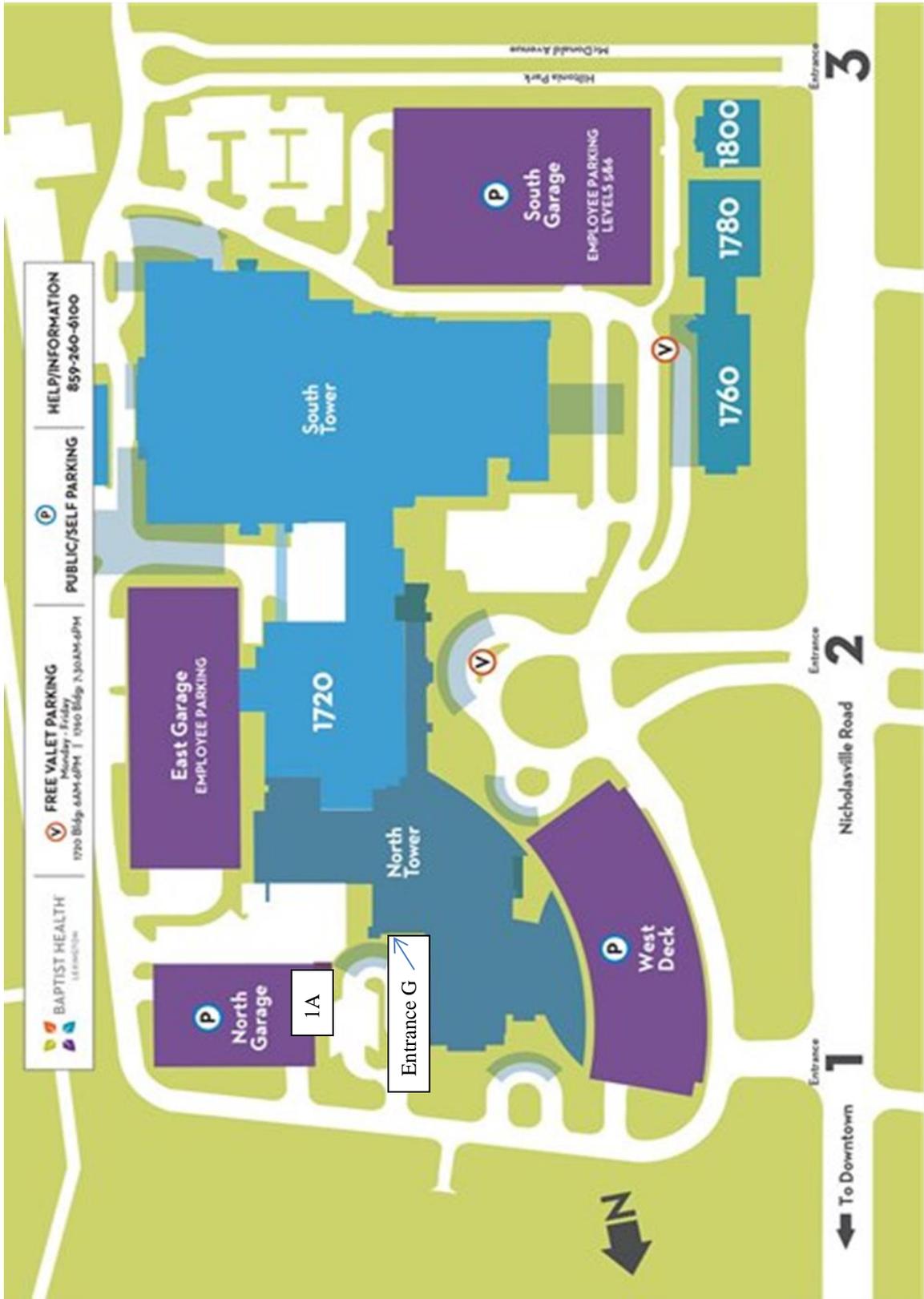
Parking: Parking for students and instructors will be in the North Garage above the 4th level. Please ask students to carpool when possible to ensure we have enough parking spaces for patients and visitors. A map is included in the packet on page 7 for those not familiar with the hospital grounds. The easiest way to access to the North and South Towers is to exit the North Garage at level **1A**, walk to Entrance G, then follow the signs to the North Tower Lobby or 1720 Lobby (which connects to the South Tower).

I.D. Tag: You must wear an ID badge. Students should have a name badge from their college/university identifying them as a student. Instructors will have a BHLex Instructor ID badge obtained from Security. Nametags must be worn above the waist at all times for identification and security purpose. There are no exceptions. Cloth or other material lanyards are prohibited. Nametags must be shown in the cafeteria to receive meal discounts.

Personal Items: Keep money and valuables with you at all times in a safe place. The hospital cannot be responsible for the loss of personal items. Lost and Found items are placed with hospital security.

Smoking and Tobacco use: Baptist Health Lexington is a tobacco-free campus. Tobacco use of any kind (cigarettes, cigars, pipes, herbal tobacco products, e-cigarettes, and chewing tobacco) is prohibited anywhere on the hospital campus including within personal vehicles parked on Baptist Health Lexington property and parking garages. There are no designated tobacco use areas on the campus and no medical exceptions to this policy.

Cell Phone Use: Personal cell phones, music players, and personal laptops may not be worn or carried during clinical time. Personal phone calls of any kind should be limited to emergency calls only. Personal cell phones and personal equipment can be used during breaks and lunch periods only and should not be used in the actual work area such as nurse's stations or on the floor. Use only in break areas. Photography in any patient care area by students is not permitted.



Baptist Health Lexington Library: Will your students be writing a paper, looking for journal articles^[1] or using the library? Did you know that while most students know how to use Google many are unable to use a health science library? The earlier your students develop at least entry-level information literacy—one that provides them insight into the scope and limits of health science databases and information retrieval, as well as resources for systemic reviews and meta-syntheses—the more equipped they will be down the line, since it's the starting point of evidence-based inquiry.

In order for your students (and you) to use the library to its fullest potential, please schedule a library tour with one of our professional librarians. Due to space restrictions please limit your student groups to 8-students. The 30-minute tour will include how to formulate a search, use CINAHL (the nursing database) and other helpful tips for students to know. The library will offer temporary access to all of the library's electronic books and journals (Athens databases) to students who are present for the tour. [2]

The hospital library is located on the 1st floor of the South Tower directly across from Administration and elevator C. The hours for the library are Monday-Friday 7:00am to 4:30pm. Please e-mail the Manager of Library Services [Lonnie Wright, MSLS] at LWRIGHT@BHSI.COM or call 859-260-4364 to arrange a tour of the library.

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1. Baptist Health Lexington library has the largest collection of current nursing journals in the state. The library has over 230 nursing journals in print, microfiche and electronic formats.
 2. Athens is the repository for all of the electronic resources at BH Lexington.

Dress Code

The purpose of the dress code is to outline Baptist Health Lexington's standards of dress, hygiene, grooming and personal appearance by employees while assuring that a professional image is portrayed to patients, families, visitors and co-workers. This policy also sets the criteria to comply with safety and infection control standards.

Identification Badges

Identification badges must be worn at all times above the waist to clearly identify faculty and students to patients and visitors, and to comply with regulatory guidelines. All cloth or other material lanyards are a potential infection control issue and are prohibited.

Appearance Standards

Personal hygiene and neatness is each student's responsibility. Clean nails, hair, teeth, body, clothes, and shoes are expected. Students are asked to dress modestly in attire and appearance.

Hairstyles should be neat and clean. Unconventional hairstyles and colors should be avoided as should other dress styles and trendy apparel that would not be reasonably accepted as cultural norms or be offensive to the customers served. When providing patient care, hair should not restrict vision. Any one in patient care areas with long hairstyles should wear hair back off the face and neck to avoid its interfering with performance of procedures or coming in contact with the patient in the course of treatment.

Approved Attire for Patient Care Clinical Areas

Uniform designated by the school that fits within the Baptist Health Lexington Dress code policy.

Definition: Scrub Sets: Approved scrub dress, or matching skirt/pants/tops or white nursing uniforms. Color coordinated, no logo-ed t-shirt or turtleneck may be worn under scrubs. Non-fleece, color coordinating scrub jacket or sweater may be worn over scrubs. Socks or hose must be worn at all times and must be appropriate and coordinating in color. Shoes must be athletic shoes, nursing duty shoes, clogs with closed toes and no perforations.

Nails/hands:

Artificial nails, overlays, extenders, and/or hardeners are forbidden in all clinical areas. Natural fingernails must be well groomed, clean and should not extend more than one-fourth inch beyond the fingertips. The hands, including the nails and surround tissue, should be free of inflammation. Nail polish including gel, may be worn but free from chips, cracks, and peeling.

Approved Business Casual Attire for Clinical Support Areas:

- Dresses, skirts or split skirts which are no more than one inch above the knee.
- Dress pants, and pants including khaki's, which are no shorter than one inch below the knee.
- Blazers, dress shirts, golf shirts, turtlenecks, sweaters or blouses. Sleeveless shirts, (tops and dresses) are acceptable, but must cover the shoulder. When wearing sleeveless tops, the width of the strap should be no less than mid-shoulder to the shoulder joint.
- Flats, low-heeled shoes, dress boots, and dress shoes with open toes are allowed with or without socks or hose. Heel height should not be in excess of 2.5 inches.

Non-Approved or Restricted Attire Facility Wide

- Make up, jewelry should not be excessive
- Cologne, perfume, after-shave should be of minimal use because of fragrance allergies/sensitivities among internal and external customers.
- Ear piercings are acceptable but should be simple and tasteful with no more than 3 earrings per ear.
- Facial and visible body piercing are permitted if they do not cause a safety issue. Septum Piercings of the nose have been deemed a safety hazard therefore they are prohibited within the workplace.
- Tongue piercings are prohibited and must be removed while working.
- Fingernail piercing is not permitted. Nail polish must be free from chips, cracks, and peeling.
- All visible Body artwork and/or tattoos must be in good taste, not depicting offensive logos, slogans, nudity, or violence. Management reserves the ability to require a tattoo that does not meet these qualifications to be covered.
- Hats, including baseball caps, are not permitted unless specifically authorized by department leaders or authorized for special occasions.
- Sweat shirts, suits or any hooded clothing are not permitted.
- No fleece material jackets
- T-shirts or sweatshirts, including hospital logo, hospital event or Baptist Health t-shirts, by themselves, are not permitted. T-shirts may only be worn under scrub clothing.
- Skintight attire is not permitted.
- Tank tops and tops with straps are not permitted. When wearing sleeveless tops, the width of the strap should be no less than mid-shoulder to the shoulder joint.
- Any article of clothing that exposes bare midriff is not permitted.
- Dresses/skirts shorter than one inch above the knee are not permitted.
- Pants shorter than one inch below the knee are not permitted.
- Leather pants, denim jeans of any color, spandex pants or leggings, pants with the waist band rolled down that reveal underwear and pants that drag the floor are not permitted. Denim jeans of any color are allowed to be worn when attending educational classes/trainings or for staff meetings but not for regular work attire.
- Shoes that are above 2.5 inches of heel height, or slick soled shoes are not permitted.
- No flip flops or rubber sole open toe shoes in clinical areas.
- Cloth lanyards or badge straps are not permitted.

Information Management

Computerized information systems are one of Baptist Healthcare System's most valuable assets. Our success and the privacy of our patients depend on the protection of this information against, theft, destruction or disclosure to outside interests. Our EPIC EMR contains a privacy monitoring program that detects aberrant

patterns of access that may indicate inappropriate EMR entry. Please use the following guidelines while you are here.

Confidentiality of patient information must be protected at all times.

- * Access **only** the patient information that is necessary to do your job.
- * Do not use your student/instructor access privileges to access your health information, your neighbors, or your friends even if they give you permission to do so.
- * Do not share patient information with a patient's family, friends, or an outside agency unless you have been authorized to do so.
- * Do not discuss patient information in any public location: Hallways, elevators, cafeteria, grocery, etc.
- * Ensure the patient's chart is not accessible to a passerby.
- * Ensure patient information is not left for viewing on computer screens. Privacy filters are used in areas where the public can view computer screens.
- * Patient records may not be printed out or copied. It is permissible to hand copy but no patient identifying information can be included (name, address, employer, date of birth, SS#, hospital #, relative's names, etc.)
- * A computer password is your electronic signature. Guard it and so not give it to anyone. **Never share your password with anyone.**
- * You should always **log off** your computer terminal before leaving it unattended
- * All entries in the medical record should be dated and authenticated. Student entries must be co-signed by the instructor or the nurse responsible for the patient.
- * Workstations should be used for business activities. Activities that interfere with your job or compromise the availability, confidentiality or integrity of EPHI (Electronic Protected Health Information) are not permitted
- * Do not bring in media (CD, DVD/Thumb drives) from outside
- * If you have a compliance question, you can contact the BHS Corporate Compliance Department by calling 1.502.896.5021. To report a security incident, you may access an anonymous BHS Compliance Hotline by calling **1-833-204-8787**, or by accessing the Compliance department page on the Baptist Health intranet under the "Our Company" tab. Both methods of communication offer the option of reporting anonymously and are accessible 24/7. At Baptist Health, the **Compliance Hotline** is a reporting mechanism that allows reporting of possible illegal, unethical or improper conduct.

Ethics Committee

The Ethics Committee is not a decision-making body, but is available to provide advice, consultation, mediation and education in ethical issues involving medical treatment. The composition of the Ethics Committee can be different for each issue but includes representation from at least the following: physicians from each medical/surgical department, nurses representing the major service lines of the hospital, social worker, chaplain, patient representative, member of the Administrative Board, a hospital administrator, a representative of the community-at-large, and an attorney. Other members may be added at the committee's recommendation and the Administrative Board's agreement. To access the Ethics Committee call (859) 260-8980.

The Hospital's ethics committee primary functions include:

- Encouraging and providing a forum for dialogue among medical disciplines on biomedical ethical issues.
- Providing a mechanism for ethics consultation for patients, families or surrogates, and healthcare professionals when there are conflicts of ethical concerns in medical decision-making.
- Providing educational programs and forums for hospital staff, medical staff, and the community on biomedical ethical issues and case reviews.
- Advising the hospital's management and Administrative Board of ethical issues in clinical practice and hospital management that are brought to the committee's attention.
- Reviews hospital policies on biomedical ethical issues.

Safe Reports

When anything unexpected or outside the ordinary occurs, even if it is a great catch/near miss that could have resulted in harm, complete a Safe Report. Reports can be initiated through the Safe Reporting system that can be accessed through EPIC or through BEN (Open BEN, Click the Safety & Security tab on the main page, select Safe Reports from the drop down menu, click to open and log in using Baptist instructor log in and password.)

- When filling out a Safe Report, complete all appropriate sections of the report. Provide a narrative with a detailed description and only the facts. Please do not include opinions. Do not use email to report or discuss incidents with other students or your instructor. Do not prepare any “statements” regarding incidents unless directed to do so by Risk Management.
- All reports and related documents are confidential and considered the property of Baptist Health Lexington.
- No incident report shall be provided to persons other than Security, Employee Health or Risk Management.
- Examples of incidents to report are patient or visitor falls, equipment malfunction, dose omission, medication errors, medication reactions, refusal of treatment, burns, lost or damaged property, near miss incident, etc.
- Notify the Employee Health Nurse before medical attention is sought. On nights and weekends, notify the Clinical House Supervisor before going to the Emergency Department for treatment unless it is a severe emergency.

Age-Specific and Cultural Awareness

Age-specific and cultural awareness are tools for learning more about how to best meet each patient’s unique needs as they are cared for. **Being open-minded** and respectful toward other beliefs, values and practices are important to making others feel comfortable. At Baptist Health Lexington, the following definitions apply:

Neonate: Birth to 28 days

Newborn: 29 days to 12 months

Pediatric: Toddler – 13 months to 4 years; School age – 5 years to 10 years; Adolescent: 11-18 years

Adult: 18 – 64 years

Elder: Geriatric – over 65 years

There are many ways to learn about each patient’s specific needs. Depending on the patient and your job, it may be appropriate to:

- Ask the patient questions (and talk with his or her family).
- Look for clues, such as what the patient wears or keeps in his or her room, or how he or she acts around others.
- Check with a supervisor for information.

Each patient is unique. Always keep in mind that:

- Growth and development follow general patterns, but every person grows and develops in his or her own unique way.
- Not every member of a cultural group may share all or its values, beliefs or practices.
- A patient may appear similar to you, but still be different from you in certain ways.
- Avoid stereotyping a patient – consider all the factors that may affect his or her care needs.

Infection Prevention & Control

COVID-19 precautions remain in place at BH Lexington. Instructors and students must wear a procedural or surgical mask upon entering and at all times while in the hospital with the exception of when eating or drinking. Cloth masks may not be worn while in the hospital. If the mask becomes wet, soiled, or torn it must be replaced. Protective eye wear must be worn when providing care for patients who have, or are suspected of having COVID-19 and with all patients during substantial to high levels of community transmission. Personal prescriptive lenses are not acceptable as PPE so a face shield should be worn over the face. During low to moderate levels of community transmission, staff will not be required to wear eye protection in patient care areas when caring for patients without suspected COVID-19.

Mask Tips

- It does not matter which side of the mask touches your face, but always wear the mask the same way. (There should be a “clean” and a “dirty” side. The “clean” side should always touch your face).
- Wear mask upon entrance to the facility and remove mask after leaving the facility.
- Do not touch the mask while it is on your face.
- Do not partially cover face with mask (mask should never be pulled down under chin or have nose uncovered).

The Infection Prevention and Control team works to identify, prevent, and reduce the risk of developing and spreading infections. Healthcare Associated Infections (HAIs) are infections that develop when a patient is staying at a healthcare facility and were not present when the patient arrived at the facility. Between 5-7% of patients hospitalized each year in the United States develop HAIs. Many are preventable.

Standard Precautions - “Every Patient Every Time”

Minimum infection prevention practices that apply to all patients regardless of suspected/confirmed infection status. The following should be used with every patient encounter - every time:

- Use of Personal Protective Equipment (PPE)
- Safe handling of potentially contaminated equipment or surfaces in the patient environment
- Respiratory Hygiene/Cough Etiquette

Hand hygiene is the single most important action for preventing the spread of infection.

Use Hand Sanitizer when:

- Before and after direct contact with patient
- After contact with patient environment
- When moving from a contaminated body site to a clean body site
- After glove removal
- Before inserting indwelling urinary catheters and peripheral vascular catheters
- Before and after using PPE, including gloves
- After contact with inanimate objects (including medical equipment) in the immediate vicinity of the patient

Wash your hands when:

- Visibly soiled with proteinaceous material, blood or other body fluids
- Before eating, drinking, handling contact lenses
- After using the restroom
- Before end of shift

Personal Protective Equipment (PPE)

- Gloves
- Fluid resistant gowns
- Masks
- Face shields

Use as little or as much PPE as needed to prevent blood, body fluids, or other potentially infectious materials from getting on your skin, mucous membranes, and clothing. Wear masks and eye protection when suctioning.

Key points when using PPE:

- Don or put on before going into the room or having contact with the patient
- Remove PPE and discard carefully at the doorway
- Remove N-95 respirator outside room
- Immediately perform hand hygiene
- Keep gloved hands away from face
- Avoid touching or adjusting other PPE
- Remove gloves if they become torn; perform hand hygiene before donning new gloves
- Limit surfaces and items touched (Cell phones, IP phones)
- Wearing gloves is not a substitute for hand hygiene!

Environmental Cleaning

- Keeping the patient environment clean is everyone's responsibility!
- Focus is on high-touch surfaces and any surface that is visibly contaminated.
- Use only approved disinfectants.
- Allow to "sit" on surface for correct length of time before using item again (**Alcohol Sani-wipes 2 minutes, Bleach wipes 5 minutes**).

Respiratory Hygiene and Cough Etiquette

- Cover the nose/mouth when coughing or sneezing
- Use tissue paper to contain respiratory secretions and dispose in the waste receptacle
- Perform hand hygiene after contact with respiratory secretions and contaminated objects
- Place a surgical mask on the coughing person when tolerated and appropriate
- Spatial separation, ideally >3 feet between patients

Standard Precautions Linen and Laundry

- Don't shake items or handle them in any way that may aerosolize germs
- Avoid contact with one's body and personal clothing
- Contain soiled items in laundry bag or designated bin
- Do not leave dirty linen on floor, place ASAP into bag and remove from room
- If heavy or bag leaks – use two bags
- Tie the bag shut

Isolation Precautions

Extra Precautions that are used when standard precautions are not enough

Categories of Isolation at Baptist Health: (See page 14 for an **Isolation Quick Guide**)

Contact

Contact Spore

Droplet

Airborne

- Signs will include a laminated sign on Patient's room door, or will be located on the electronic board located just outside of patient's room. Information will include the type of isolation and the required precautions
- Epic header will note infection status and type of isolation
- Explain to the patient and family why patient is in isolation
- For transfers to other department, patient wears a clean gown/sheet, or mask when applicable. Staff should put on new PPE prior to exiting the room.

Isolation Quick Guide for Selected Infections

- ✓ Notify units/departments before transfer and/or testing (i.e. OR, Endo, X-ray, Cath Lab, other patient care areas)
- ✓ Place isolation signs on patient door or activate the electronic whiteboard and update EMR
- ✓ Please refer to the Infection Prevention and Control Policies/Procedures for additional information

Isolation Type	Staff PPE	Hand Hygiene	Out of room and/or Transport Equipment	Patient Room Assignment and Equipment	Germicide and Room Clean	Visitors
Contact Precautions RSV, Scabies, Lice, Bedbugs, MDROs: MDR Acinetobacter, MDR Pseudomonas Arg., ESBLs, KPC, CRE, Candida Auris, COVID-19 (in addition to Airborne Isolation)	Gloves and Gown upon room entry Before leaving room remove PPE at doorway and place in trash in the patient room	Perform hand hygiene before entering and upon leaving the patient room	New Patient Gown and cover sheet Consult IC for patient ambulation outside of room	Disposable Food Tray Disposable stethoscope and thermometer	Oxivir TB (or equivalent) Standard EVS germicide Standard Daily and Terminal Room Clean	Complete hand hygiene when entering and exiting the patient room
Contact Spore Precautions Norovirus, Hepatitis A, Clostridium Difficile (while awaiting final result, positive test, until 1 week following symptom resolution)	Gloves and Gown upon room entry Before leaving room remove PPE at doorway and place in trash in the patient room	Perform hand hygiene before entering patient room Wash hands with soap and water before leaving patient room	New Patient Gown and cover sheet Consult IC for patient ambulation outside of room	Disposable Food Tray Disposable stethoscope and thermometer Clean non-disposable equipment with bleach wipes	Bleach products only in room/outside by door 2-person daily clean with bleach 2-person Double Clean and ultraviolet light at discharge	Hand hygiene before entering room Wash hands with soap and water before leaving patient room
Airborne Precautions Disseminated Shingles, COVID-19 (in addition to Contact Isolation) Chicken Pox, Measles, TB (active, suspected, while awaiting test results)	N-95 Respirator, CAPR, or PAPR Remove Respirator after exiting patient room	Perform hand hygiene before entering and upon leaving the patient room	Patient in regular mask Consult IC for patient ambulation outside of room	Patient door closed at all times Negative Pressure Ventilation Engineering to confirm negative pressure prior to occupancy Regular Food Tray	Oxivir TB (or equivalent) Standard EVS germicide Discharge - Room door remains closed 70 minutes before staff enter to clean (OR, ED, Radiology, Cath Lab – see full policy)	Restrict visitors (see policy for details) Provide surgical mask to wear in room Complete hand hygiene when entering and exiting patient room
Droplet Precautions Influenza, Meningitis, Rhinovirus	Mask upon room entry or within 3-feet of the patient and protective eyewear/face shield as needed. During Source Control period, wear Source Control mask into room, then put on new mask at room exit.	Perform hand hygiene before entering and upon leaving the patient room	Patient in regular mask Consult IC for patient ambulation outside of room	Regular Food Tray	Oxivir TB (or equivalent) Standard EVS germicide	Provide surgical mask to wear in room Complete hand hygiene when entering and exiting patient room

Work Area Restrictions for your protection

- Do not eat, drink, smoke, or handle contacts in area where blood/body fluid present
- Do not eat in patient care areas where you may be exposed to pathogens that could make you sick
- Look for designated food/drink signs & ask the director of the area where drinks are allowed.
- Specimens placed into leak proof container (Ziploc bag)
- Standard Precautions followed with all specimens
- Soiled work clothes-sent to our laundry, hospital will loan you a set of scrubs to wear
- Place dirty/contaminated sharps in sharps container. Wear gloves. Do NOT recap.

Infection Control Policies are located in BEN on the Intranet.

- Blood and Body Fluid Exposure Reporting and Prophylaxis – Policy # 12994.3
- Guidelines for Isolation Precautions and Patient Placement: Policy # IC-V-2

In the event of a blood exposure – IMMEDIATELY Notify Employee Health of the exposure by calling 1-833-743-0528 or 502- 813-7620 and follow the prompts.

Medication Administration

All medication administration must be supervised. Students may administer medications under the direct supervision of licensed personnel (ex. Nursing students under the supervision of a nurse, respiratory therapy students under the supervision of a respiratory therapist).

There are a few things related to medication administration that BHLex restricts students from performing.

1. **Students may not administer any type of blood product.**
2. **Students may not accept verbal orders from physicians nor critical test results.**
3. **Students may not push IV medications in an emergency situation.**
4. **Students may not administer IV chemotherapy.**

If you are not familiar with BHLex, policies related to medication administration will guide your practice. To locate specific policies, go to BEN, click the POLICIES & PROCEDURES tab (top right), select Baptist Health Policies, make sure LEX is highlighted under the search bar, type in a key word of the policy or the policy number into the Search box, and then click Search. Medication policy examples include:

Medication Administration (CBH III-A-1 LEX Policy; Patient Care)	Pain Management Practice Guideline: CBH II-8
Patient Controlled Analgesia (PCA) Policy # 12526.3	Procedure for Bar Code Medication Administration: Policy # CBH III-B-45
Range Orders for Medications: Policy # III-A-23	Medication Orders: Policy # CBH III-B-73
Controlled Substance Procedures for Patient Care Areas: Policy # III-A-28	Use of Glucomander for Titratable Insulin Drips LEX Policy # III-B-81; Use of Glucomander for Titratable Insulin Drips and Subcutaneous Insulin Delivery SSC Policy # 13111.1

Additional medication information can be found under the Pharmacy Resources. From the BEN home page, hover over Resources on the menu bar and a drop down list will appear, select Pharmacy Resources Team sites at the bottom of the list.

Pharmaceutical Waste Program

BHLex has implemented a pharmaceutical waste program to conform to the Environmental Protection Agency mandate that all hazardous materials (including certain medications) be disposed of in a way that does not harm the environment. Compliance is essential! Medication waste will be disposed of in color-coded bins according to a three-digit code found on the medication packet and in the description of the drug name in EPIC. The three-digit code identifies the appropriate waste container. Charts located on each unit will give additional information regarding matching which containers the waste should be placed.

USP 800

Medications that may pose a toxic effect to healthcare workers if improperly handled have been identified by the NIOSH. New laws have been enacted to ensure the safety of health care workers when handling these medications. Some medications on this list were not previously considered hazardous so please take time to familiarize yourself with the changes. The list of drugs administered at BHLex that have been identified by USP 800 as hazardous can be found in BEN. Type “USP 800 Tool Kit” into the search bar in the top right hand corner. These changes will go into effect at BHLex in February, 2023

Group 1 Hazardous drug - Yellow require PPE for handling

Group 2 Hazardous drug - Pink require PPE for handling if you are pregnant, breastfeeding, or actively trying to conceive (both male and female).

In addition, alerts identifying hazardous drugs will be found in the Medication Administration Record (MAR), on medication labels, in the Accudose dispensing cabinet screen, on posters in the medication rooms, on signs located outside the patient’s room, and in BEN. QR codes to access videos for the Equashield closed transfer devices can be found in the medication room.

Required PPE for Yellow and Pink categories of drugs: (also posted in medication rooms)

	Closed Transfer Device Equashield Closed System = CSTD Scan QR Code for instructions on use	Double gloves/chemo gown (eye/face protection if liquid could splash or working above eye level)	Single pair of gloves (eye/face protection if vomit or spit-up potential)	Standard Precautions Only
YELLOW GROUP 1 IV/IM/SC/Irrigation	✓	✓		
YELLOW GROUP 1 Tablets or Capsules			✓	
PINK GROUP 2 IV/IM/SC/Irrigation Pregnant/breastfeeding/ Actively trying to conceive both male and female	✓	✓		
PINK GROUP 2 Tablets or Capsules Pregnant/breastfeeding/ Actively trying to conceive both male and female			✓	
PINK GROUP 2 IV/IM/SC/Irrigation/ Tablets/Capsules – NOT pregnant/breastfeeding/ Actively trying to conceive both male and female				✓

Chemo gowns are located in the clean supply room. (A Chemo gown is different than an Isolation gown.)
Gloves in our supply rooms and med room are Chemo rated.



Pain Management

Pain management requires an individualized approach, based on the patients' self-report, including the use of pharmacological and non-pharmacological techniques. Pain is a subjective experience and the patient's judgment of the intensity and relief of pain should be accepted. The goal is to maintain or promote the patient's state of comfort by assisting them to reduce their pain to a level of comfort to the patient's well-being, level of function, quality of life, and acceptable to the patient. The patient's personal goal for pain relief and management of side effects may alter the level required for intervention (i.e. patient anticipates visit with family and refuses medication to prevent drowsiness). Please see the Pain Management Practice Guideline Policy # CBH II-8 for additional information on appropriate assessments, interventions, management, and education.

Patient Safety

Patient safety is a priority for BHLex. It is the responsibility of every BHLex employee and all students to ensure that patients remain safe during a hospital stay. The organization commits to undertaking a proactive approach to the identification, handling and prevention of medical errors to foster a safe environment for patients. Baptist Health Lexington also recognizes that the patient is a very important part of the healthcare team.

Patient identification should be confirmed using a two-identifier system, which includes patient name and patient date of birth prior to conducting a healthcare procedure.

Baptist Health Lexington supports an environment that encourages error identification through the minimization of blame or retribution for those involved in an error or in reporting an error.

There are several ways to report medical errors:

1. Online Safe Report
2. Patient Safety Hotline – 502-222-3880
3. Patient Safety Officer – 859-260-5715

Protecting Patients from Falling:

We need your help in keeping our patients safe from falling. We are aware, some patients are impulsive, others are stubborn, and still others overestimate their abilities. Whatever their reason, they do not always follow instructions to call for assistance when getting out of their bed or a chair. Our research here at BHLex demonstrates that the top three factors for patient falls are toileting issues, history of falling, and confusion. Please have your students review our fall prevention policy (**Falls Risk Intervention Guidelines Policy SSC # 12022.4**) so that they are able to implement the measures we have in place to keep our patients safe.

When a patient is assisted to the bathroom or bedside commode, the staff member/student **must** stay within arm's length of the patient until that patient is returned to bed or chair to protect the patient from falling. We find that another important point is to have staff and students use gait belts with patients when they are moving around. The gait belt provides a method for steadying the patient without having to grab clothing or skin, and it helps greatly in preventing injury to patients who do fall, since the belt can be used to lower the patient more gently. Gait belts are available in every patient room.

Finally, it is important that everyone on the team be aware of the patient's capabilities. When getting or giving report, including a handoff to other departments, please be certain everyone is aware of how able the patient is to move around by him/herself. Be sure there's a gait belt on the patient when sending him/her to another department such as radiology or physical therapy. When giving or receiving bedside report, include the patient and family in the conversation. Contract with them to call for assistance prior to getting out of bed.

Suicide Assessment

Each patient identified through screening by a physician and/or nursing to be a suicide risk will be assessed for risk of harm to self or others. A suicide risk assessment should be completed upon admission or as soon as possible thereafter to assist in determining the level of risk to include low, moderate, or high using the Columbia-Suicide Risk Rating Scale (C-SSRS). The C-SSRS level of risk will determine the consideration and implementation of interventions appropriate for each level and Patient Safety Precautions. Any time a patient verbalizes suicidal ideations; the nurse must rescreen the patient and implement any additional precautions indicated. Interventions based on the level of risk can be found in our suicide Risk Assessment Precautions policy (**CBH III-A-29 Suicide Risk Assessment Precautions**).

Patient Rights and Responsibilities

Baptist Health Lexington encourages respect for the personal preferences and values of each individual. We consider each patient a partner in their hospital care and believe the patient should be well informed, be able to participate in treatment decisions, and be able to communicate openly with health care professionals providing their care. A complete list of patient rights and responsibilities are given to each patient upon admission and can be found in all patient care areas. Open and honest communication, respect for personal and professional values, and sensitivity to differences are important to provide the best care for our patients.

2023 Hospital National Patient Safety Goals

The purpose of Joint Commission's National Patient Safety Goals (NPSGs) is to improve patient safety. The goals are listed below along with the solutions BHLex has implemented to address each goal. All patient care providers need to be aware of the patient safety goals and what BHLex is doing to meet these goals.

Goal 1: Identify Patients Correctly

- Use at least two patient identifiers when providing care
 - BHLex uses the patients name and birth date - when administering medications or blood products, taking blood samples and other specimens for clinical testing, or providing any other treatments or procedures.

Goal 2: Improve Effectiveness of Communication among Caregivers

- Report critical results of tests and diagnostic procedures on a timely basis to responsible licensed caregiver. (Policy VII-11)
 - Critical results/value should be reported to a nurse by the individual performing the test immediately upon determination that the value is critical, stating the call is for a "Critical Result".
 - The nurse receiving the critical result should document the results in the EMR then read back the results to the individual calling the findings to verify accuracy.
 - The nurse receiving the critical result should take action if a standing order or protocol is in place based on nursing assessment. If standing order or protocol is not available, the nurse will report the results to the LIP ordering the test within 30 minutes of receiving the critical results.

Goal 3: Improve the Safety of Using Medications

- Label all medications, medication containers, and other solutions on and off the sterile field and other procedural settings that are not immediately administered.
- Reduce the likelihood of patient harm associated with the use of anticoagulant therapy. It is important to note that anticoagulation medications are more likely than others to cause harm due to complex dosing, insufficient monitoring, and inconsistent patient compliance. Use approved protocols and evidence based guidelines. .
- Maintain and communicate accurate patient medication information (**Policy # PH-49**)

Goal 4 & 5 have been retired and added to the required TJC standards

Goal 6: Improve the Safety of Clinical Alarm Systems

- Ensure alarms on medical equipment are heard and responded to on time
 - Baptist has identified the most important alarm signals to manage (**Policy # III-B-72**)
 - Ensure Alarms on medical equipment are heard and responded to on time (Cardiac Monitoring Safety Guidelines)

Goal 7: Reduce the Risk of Health Care-associated Infections

- Use the CDC guidelines for hand hygiene.
- Implement evidence-based practices to prevent multi-drug resistant organism (MDRO) infections, prevent central line-associated bloodstream infections, surgical site infections, indwelling catheter-associated urinary tract infections (CAUTI).
 - Limiting use and duration to situations necessary for patient care
 - Using aseptic techniques for site preparation, equipment, and supplies
 - Securing catheters for unobstructed urine flow and drainage
 - Maintaining the sterility of the urine collection system
 - Replacing the urine collection system when required
 - Monitoring compliance with evidence-based guidelines or best practices
 - Evaluating the effectiveness of prevention efforts
 - Remove as soon as possible using Urinary Catheter Removal Protocol

Goal 15: Identify patient safety risks

- Identify patients at risk for suicide. Patients identified to be a suicide risk will be screened using the Columbia-Suicide Risk Rating Scale and any interventions implemented accordingly.

Universal Protocol for Preventing Wrong Site, Wrong Procedure, and Wrong Person Surgery:

- Conduct a pre-procedure verification process for correct procedure, correct patient, correct site – utilize checklists and involve the patient when possible
- Mark the correct place on the patient's body where surgery is to be done.
- Perform a "time out" prior to invasive procedures (surgical/procedural and bedside procedures) Perform time out using consent form. Review within moments of procedure occurring.

Additional information regarding the NPSGs for hospitals can be found on The Joint Commission web site at https://www.jointcommission.org/-/media/tjc/documents/standards/national-patient-safety-goals/2023/npsg_chapter_hap_jan2023.pdf

Restraints

Please review the Restraint Guideline policy (**Policy # I-2**). Non-physical techniques are preferred when intervening to manage a patient's behavior. Alternative interventions should always be considered prior to restraint use. Restraints will be used in limited circumstances with appropriate clinical justification based upon the assessed needs and behaviors of individual patient. Restraints should be used only with a physician order when necessary to improve the patient's wellbeing or to ensure the safety of the patient or others. Restraints should be used in the least restrictive manner possible and only when less restrictive interventions have been determined to be ineffective.

There are two classifications of restraint recognized at BHLex: Non-violent, non-self-destructive restraints and violent, self-destructive behavior management restraints.

- Non-violent, non-self-destructive restraint - used to limit mobility or temporarily immobilize in relation to acute medical-surgical care and/or post-surgical procedure. The primary reasons for use directly support the medical healing of the patient and prevention of patient injury (ex. pulling tubes, pulling IV lines etc.)

- Violent, self-destructive behavior management restraint – an emergency or crisis in which a patient’s behavior becomes aggressive or violent or self-destructive; the behavior presents an immediate, serious danger to the safety of the patient, other patients, staff or others.

Nursing evaluation and documentation for non-violent, non-self-destructive restraint will occur at a minimum of every 2 hours. For violent, self-destructive behavior management restraint, evaluation and documentation will occur at a minimum of every 15 minutes. If the patient one of your students is caring for is in restraints, please review the restraint policy (**Policy # I-2**), by accessing the Policy and Procedure tab on BEN.

Sentinel Events

A sentinel event is an unexpected patient occurrence involving death or major permanent loss of function not related to the patient’s illness or underlying condition. Some examples of Sentinel Events include:

- Surgery on wrong patient or wrong body part
- Infant abduction or discharge to the wrong family
- Rape of a patient
- Patient suicide
- Hemolytic transfusion reaction

What do you do when one occurs?

Contact the unit manager, unit charge nurse, or Clinical House Supervisor (#2330 – North Tower; #3251 South Tower) and they will call the Director of Risk Management.

Hospital Safety - Environment of Care

Safety is everybody’s business.

The Environment of Care (EOC) is critical to patient care in hospitals and home care organizations. All hospital personnel play a critical role in protecting the patient and breakdowns in the EOC can put patients at risk. The Safety Officer coordinates BHLex’s safety plan and can be reached at **(859) 260-5715**.

Security Management

Security management - Security officers are available 24 hours per day through the operator at 6291 or 260-6077. Security should be called in the event of an emergency situation, injury to visitors, bomb threats, hostage situations, weapons, locking patient valuables, lost and found items, missing patient, escorting employees and visitors to their car, jumpstarting cars, parking issues and workplace violence.

Weapons are not allowed in BHLex hospital.

Hazardous Materials and Waste Management (HAZMAT)

You have a right to know of the chemical hazards that may exist in your work place. BHLex identifies these items for your safety.

Safety Data Sheets (SDS)

- Located on Intranet in BEN, click the Safety and Security Tab, select SDS from the drop down menu, type the product into the search bar
- Contains product information, first aid procedures, and emergency phone numbers
- Every chemical product used in the hospital has a SDS

- Hard copies of the SDS are maintained in Administration and the Emergency Department
- Check Environment of Care Manual for spill cleanup procedures.

Regulated Medical Waste (RMW)

- Biohazard Waste, Red Bag Waste
- Chemotherapy Waste
- Pathological Waste
- Pharmaceutical Waste

This type of waste needs treating separately from the regular waste stream. Regulated Medical Waste is known throughout the hospital as **Red Bag Waste, Biohazardous Waste, and Bio Trash**. It is very important to know the difference between Regulated Medical Waste (RMW) and Regular Trash. The following RMW lists will help you to decide what is and what is not RMW.

Regulated Medical Waste should be placed in RED waste containers only

- Saturated or grossly contaminated disposables
- Microbiology Waste/Pathology Waste
- Liquid blood/blood products/body fluids not otherwise discarded or flushed
- Personal Protective Equipment (worn and soiled with blood and/or body fluids)
- Dialyzers
- Wound Drains/Tubes

Sharps are placed in needle boxes

- Disposable Needles
- Syringes
- Scalpels/Blades
- Pipettes/Lancets/Slides or Glass Tubes
- Staples
- Wires
- Broken Glass (i.e. Glassware containing blood and/or body fluids)
- Disposable Surgical Instruments and Electrosurgical Tips

Regular Waste

- Wrappers, packaging, boxes, paper, office waste
- Unused medical products and supplies
- Personal Protective Equipment (worn but not soiled with blood and/or body fluids)
- Food products and waste
- IV Bags and Tubing without Needles
- Empty bottles and bags
- Sanitary napkins/tampons
- Disposable Drapes, Lab Coats, Paper Towels, Band-Aids
- Disposable Basins, Bedpans
- Aerosol Pressure Cans
- Suction canisters that have been emptied and rinsed

Medical Equipment Management

If a piece of medical equipment fails, remove the device from service and contact Central Dispatch at 6291. Adverse or unexpected results with normal medical device operation shall be reported to the unit director or unit charge nurse immediately.

Utilities Management

Utilities consist of electrical services, water, sewage, telephones, medical air/gases, elevators, heating, ventilation & air conditioning. The use of patient-owned electrical equipment is strongly discouraged. The hospital is equipped with emergency generators for use during power failures in selected areas. A **red outlet**

cover designates the plug as an emergency outlet. In the event of failure, medical gases will be provided through portable tanks. For an equipment malfunction, service, or questions call 6291 or MAX-1.

Fire Prevention Management

If you detect a fire in the hospital, the proper procedure is as follows;

RACE

- **R**escue persons in immediate danger and transport to a safe area
- **A**ctivate the nearest fire alarm and call **CODE (2633)** to report the location of the fire. (Offices outside the hospital will call 911.)
- **C**ontain the fire by closing all doors and windows
- **E**xtinguish the fire with the nearest appropriate portable fire extinguisher

To extinguish a fire, the proper procedure is as follows:

PASS

- **P**ull the safety pin
- **A**im the nozzle at the base of the fire
- **S**queeze the handles together
- **S**weep the nozzle from side-to-side

Only use an extinguisher if you feel it is safe to do so! While using an extinguisher is encouraged, no employee or visitor is required to do so.

Who do you call if there's a fire in the hospital? # 2633 (CODE)

Who do you call if there's a fire outside the hospital? # 911

When you get to your unit/department, do the following:

1. Locate Fire extinguishers
2. Locate Fire Alarm Pulls
3. Locate exit route signs
4. Locate the smoke barriers
5. Ask about areas of refuge for your unit in the event of evacuation

Emergency Preparedness – Incident Command System (Code Yellow)

The hospital maintains a comprehensive program to respond to a variety of emergencies, which could occur in the hospital, or in the local community. When the Incident Command System has been activated, refrain from making outside calls.

Disaster Situations and the Student Role

A disaster can be announced at BHLex for a variety of internal (i.e. bomb threats, utilities failure, fire) and external reasons (tornados, severe weather, ice storms). The operator will announce, "The Incident Command Plan is now in effect." Please refrain from making outside calls. In conjunction with the instructor or preceptor, a student must decide if it will be safer to stay at BHLex (tornado), or safer to leave BHLex. If your preceptor or instructor leaves, then students should also. Inform the charge nurse/supervisor of the department or unit of your decision. Inform your school.

Remember: No matter what the nature of the disaster, a student **cannot perform any duties beyond the scope of practice as a student.** Tasks that you do perform must continue to be performed under supervision.

Important Codes - Dial **CODE (2633)**

You may hear the following codes called overhead:

Medical Alerts

MA Code Blue - Respiratory/Cardiac Arrest Adult or Pediatric, code team responds.

MA Rapid Response - Rapid Response Team – Clinical House Supervisor, Critical Care Nurse, Respiratory Therapist respond to help manage a significant change in a patient’s condition.

MA Code Stroke – “Stroke Team” activation - Immediately upon witnessing any signs and symptoms of a stroke in a patient or visitor activate Code Stroke. (Dial 2633 and ask the operator to call Code Stroke – give location) Stroke team will respond within 10 minutes.

MA Code H (help) - Patient/Family Response Request - Patient/family activated system that may be used to respond and manage any change in patient condition. Clinical House Nursing Supervisor, ICU nurse, Respiratory Therapist, Chaplin, and Patient Relations respond.

MA Code Crimson – Maternal Hemorrhage - activated by the Labor and Delivery staff

MA Code AMI - ST Segment elevated MI Response – Provides rapid response to decrease “door to balloon” time when patient is diagnosed with an Acute Myocardial Infarction. Includes notifying Cath lab staff, on call cardiologist, Clinical House Supervisors, and Rapid Response Team if needed. This is activated when a patient is coming to BHLex with this condition.

Security Alerts

SA Bomb Threat – Provide location and description of what you are observing.

SA Active Shooter – When calling 2633, provide your current location and the direction of movement of the shooter. If you remember any descriptive details of the shooter, provide those, too.

SA Code White (Violent patient/Visitor) Behavioral crisis involving patient, family or visitors. A rapid response team will be activated to verbally de-escalate the situation.

SA Code Abducted Infant or Missing Children/Person - Activation of Infant or child abduction. It is everyone’s responsibility to respond to corridors and exit points for visual patrol and to report suspicious person(s) or activity.

SA – Hostage Situation

Facility Alerts

FA Fire Alarm -

FA Severe Weather - plain speech warnings

FA Internal/External Hazardous Materials spill

FA Internal/External Event

Important Telephone Numbers

Safety Officer - 260-6790,

Administration - 260-6108

Pharmacy - 260-6659

Security - 260-6077,

Compliance Hotline 1 (800) 783-2318

Patient Safety Hotline (859) 260-3680

Risk management/ Compliance/HIPAA - 260-5596

Emergency Department – 260-6180

Clinical House Supervisors - #260-2330 – North Tower; #260-3251 South Tower;

HIPAA for Students, Instructors, and Observers:



What you need to know . . .

As a guest performing a clinical rotation at Baptist Health Lexington, you will have access to confidential medical information.

Federal and state laws protect this confidential medical information.

It is illegal for you to use or disclose this confidential medical information outside the scope of your clinical duties at BAPTIST HEALTH LEXINGTON.

Guidelines for the use of this information:

- ◆ **You may use this information as necessary to care for your patients.**
- ◆ **You may share this information with other health care providers for treatment purposes.**
- ◆ **Do NOT photocopy patient information.**
- ◆ **Access the minimum amount of information necessary to care for your patient or carry out an assignment.**
- ◆ **Do not record patient names, dates of birth, address, phone number, social security number, etc., on the assignments you will turn in.**
- ◆ **You may only access the confidential information of patients for whom you are caring.**
- ◆ **Be aware of your surroundings when discussing confidential information. It is inappropriate to discuss patients in elevators, cafeteria, etc.**
- ◆ **If you have questions about the use or disclosure of confidential health information, contact your instructor or the student coordinator.**

Support Services - Contact Information

Area	Contact Person	Number/Email	Location
Case Management	Sherri Norton - Director	260-6331	1740 Bldg
Diabetes	Kathleen Stanley - Coordinator	260-6674	S. Tower
Dialysis	Monica Stahl - Director Nicholas Cress – Charge Nurse	260-6459 260-6475	S. Tower
Educational Development	Margaret Kramer - Director	260-5408	1800 Bldg
Education Center Reservations Ed Center and Glass Rooms	Patrick Barnett	patrick.barnett@bhsi.com	1720 Bldg
Education – Med Surg/Tele,	Shanda Sutherland	639-4109	N. Tower
Education – Med Surg/Tele	Charity Arthur	260-6454	S. Tower
Education – Med Surg/Tele	Tina White	260-6664	S. Tower
Education – ICUs & CV lab	Brittany Smoot	639-6497	N. Tower
Education – Certification courses, Preceptor Class, Transition to Practice New Grads	Allison Rogers	260-6075	1720 Bldg
Education –Nurse Externs Student Placements, Simulation Lab	Julia Fultz	260-6379	S. Tower
Education – Peds, Transition to Practice Experienced Nurses	Kim Kjelland	639-5168	N. Tower
Education – Maternity	Maggie Spagnolli	639-5148	N. Tower
Education – OR	Krista Spore	260-2687	S. Tower
Education – Outpatient Onc	Kiera Hobbs	260-6578	N. Tower
Education - Emergency Dept	Heather Little	260-6180	S. Tower
Employee Health	Beth Almes	260-6503	1800 Bldg
Home Health	Pamela Heissenbuttel – Director Marcia Adkins–Clinical Education	260-5159 260-6569	2100 Nicholasville Rd
Human Resources – Nurse Recruiters	Cameron Horseman Cameron.Horseman@bhsi.com Kathy Bellfield Kathy.Bellfield@bhsi.com Emily Lewis Emily.Lewis@bhsi.com	260-6128 Cameron. 260-6122 Kathy 260-4392 Emily	1800 Bldg
Infection Prevention and Control	Kathy Cruise Brittany Hammond	260-6683 260-4575	S. Tower
Institutional Review Board	Michelle Moseley Kimberly Dacey	260-6074 260-4135	
Library	Lonnie Wright	260-6297	S. Tower
Perf. Improvement Coordinators Quality Resources	Kat Costanzo Regina Winner	260-4566 260-6443	
Simulation Lab	Julia Fultz	260-6379	S. Tower
Speech & Language Pathology	Jill Kobak - Manager	260-6142	S. Tower

Clinical Area Contact Information

Unit	Unit Number	Unit Contact	Number	Tower
2 F 2 G	260-7295 260-7290	Whitney Heet - Director	260-6394	S. Tower
2 H ICU	260-6285	Chris Havens - Director	260-6290	S. Tower
3 E	260-7393	Melissa Perry - Director	260-2167	S. Tower
3 F	260-7395	Kayla Ollish - Director	260-7397	S Tower
3 G/H	260-6504 260-6504	Monica Stahl – Director Ryan Linville - Manager	260-6459 260-6504	S. Tower
4 G & 4H	260-6404	Trena Skidmore – Director Julia Masters - Manager	260-6596	S. Tower
5F	260-6860	Clint Bollinger – Director	260-6309	S. Tower
5 G/H	260-6412	Tiffany Banks - Director Joe Musto - Manager	260-3259 260-6695	S. Tower
2 A ICU	639-6475	Donita Cantrell - Director	639-3358	N. Tower
2 B ICU	639-6630	Chris Havens – Interim Director	639-6530	N. Tower
3 A L&D Antepartum	639-2198 639-2176	Jenny Graves – Director Kim Jarvis – Manager	639-2112 639-2113	N. Tower
4 A & 4B M/B	639-2100 639-3200	Lorelei Fray – Director Hyewon Cooper - Manager	639-3108 639-3112	N. Tower
5 A NICU	639-6576	Holly Nieves - Director	639-6579	N. Tower
5 B	639-6230	Tara Bucher – Director	639-6415	N. Tower
6 A	639-6640	Carole Bales – Director	639-6051	N. Tower
6 B	639-6510	Jess Walling - Director	639-6444	N. Tower
OR	260-2687	Krista Spore – Educator	260-6584	OR
Pre-Op	260-6270	Tina Chapman - Coordinator	260-6478	S. Tower
PACU	260-6780	Michal Moore - Manager	260-6780	S. Tower
Cardiovascular Lab		Ruth Johnson – Director Cardiovascular Services	260-4472 260-4401	1720 Bldg.
Emergency Department		Adam Ogle - Director	260-6590	S. Tower
Emergency Department		Heather Little - Educator	260-	S. Tower
Endoscopy – In-patient		Amanda Rawlings - Coordinator	260-3506	S. Tower
IRA/ Observation		Whitney Heet - Director	260-6394	S. Tower
Pre-Admission Testing		Charlie Howard - Coordinator	260-3251	S. Tower
Respiratory Therapy		Curt Hohenecker – Manager Nicole Wells - Manager	260-6136 260-6142	S. Tower
Wound, Ostomy, Continence		Thomas Gallivan; Reece Schenkenfelder; Meghan Cawood	260-2546 260-2545	S. Tower

Clinical Validation of Orientation to Baptist Health Lexington

Initial each line below indicating you have received the information on the topics pertaining to your clinical rotation.

- _____ Baptist Health Lexington Mission, Vision and Values statement
- _____ Dress Code
- _____ Parking/ID badges
- _____ Infection Control
 - Hand Washing
 - Personal protective equipment
 - Types of Isolation
 - Blood spills/exposure
 - COVID-19 processes
- _____ Information Management Guidelines
- _____ Smoking Policy
- _____ Patient Rights and Ethics
- _____ Age Specifics/Cultural awareness
- _____ Patient Safety/Falls Prevention Risk
- _____ Restraints
- _____ Incident Reporting (Risk Occurrence Report)
- _____ Environment of Care – Hospital Safety Information
 - Security Measures
 - Hazardous Materials and Waste Management
 - Safety Data Sheet
 - Red Bag waste vs. regular waste
 - Procedure for contaminated (dirty) sharps
 - Pharmaceutical Waste
 - Medical Equipment Management
 - Utilities Management
 - Fire Safety – RACE, PASS, Fire Extinguishers, Alarm Pulls, Evacuation Routes
 - Emergency Preparedness - Student role in a disaster

I have read and understand the Baptist Health Lexington Orientation information. All my questions have been answered satisfactorily.

First name (print) _____ MI _____ Last Name _____

Signature _____ School Affiliation _____

Unit _____ Clinical Start date: _____ Clinical End Date: _____



I have read and understand the HIPAA information on page 25. I realize that there are civil and criminal penalties for the unauthorized use and disclosure of confidential patient information. I will abide by the guidelines when completing my clinical rotation.

Signature _____ Date _____

BAPTIST HEALTH LEXINGTON CONFIDENTIALITY AGREEMENT

THIS CONFIDENTIALITY AGREEMENT is between BAPTIST HEALTHCARE SYSTEM, INC. d/b/a/ BAPTIST HEALTH LEXINGTON ("Baptist Health Lexington") and _____ from _____.

In consideration of Baptist Health Lexington's relationship with the Student continuation of such relationship, as the case may be, and for other valuable consideration, the parties agree as follows:

1. **PURPOSE OF AGREEMENT.** Baptist Health Lexington recognizes the importance of protecting confidential information concerning parties, their families, medical staff members and employees in the operation of the hospital as well as the importance of protecting the proprietary information of the hospital. Each student interviewer, in the performance of his or her duties as an interviewer at Baptist Health Lexington may have access to confidential patient information, confidential medical staff information, confidential employee information or proprietary hospital information. The purpose of this agreement is to document the understanding and agreement of Baptist Health Lexington student interviewers to maintain the confidentiality of such information at all times, both at the hospital and outside the hospital. More specifically, patient information should only be relayed to those persons involved with the patient's treatment; persons designated by Baptist Health Lexington who are responsible for quality improvement; or as requested by Risk Management, BHS Legal Department and/or the hospital's defense firm as necessary for Risk and Claims Management activities. Furthermore, this Agreement is to obtain acknowledgement of the Student Interviewer that he or she may be given a security code in order to access from authorized terminals a variety of confidential information and that such security code must be maintained by the Student as confidential information.
2. **STATUS OF STUDENT.** Student has an at will relationship with Baptist Health Lexington and the execution of this Agreement does not change that status or create any contractual relationship or employment agreement between Student Interviewer and Baptist Health Lexington. Student Interviewer acknowledges that she is executing this Agreement, not as an employment agreement, but as a condition of and in consideration of Student's relationship with Baptist Health Lexington.
3. **SCOPE OF AGREEMENT.** Student agrees to follow all policies and procedures, rules and regulations of Baptist Health Lexington including, but not limited to the following:
 - a. Student will protect the confidentiality of patient, medical staff, employee and proprietary hospital information as well as any privileged or confidential information obtained during the course of investigation of a hospital incident, claim or lawsuit. The Student will not release such confidential information to any unauthorized source.
 - b. Student understands and agrees not to access or attempt to access information unless Student has authorized access and access to the information is needed to perform his or her employment duties.
 - c. Student agrees not to disclose any security code he or she may be given by Baptist Health Lexington for access to computer information to anyone, including any other employee of Baptist Health Lexington.
 - d. Student agrees not to use any security code of any other person.
 - e. Student agrees not to write down passwords or security codes that would make them accessible to other individuals.
 - f. Student will report breaches of this Confidentiality Agreement by others to the Manager of Human Resources. Student understands that failure to report breaches may subject Student to a discontinuation of relationship with the hospital.

g. Student understands that any security codes he or she may be given by Baptist Health Lexington to obtain access to patient medical records is his or her electronic signature on such medical records.

4. **BREACH OF AGREEMENT**. Student understands that breach of any provision of this Agreement may result in immediate termination of relationship, at the option of Baptist Health Lexington, in addition to any other rights and remedies available at law, which Baptist Health Lexington may pursue.
5. **SEVERABILITY**. If a court of competent jurisdiction holds any provision of this Agreement invalid such invalidity shall not affect the enforceability of any other provisions contained in the Agreement and the remaining portions of this Agreement shall continue in full force and effect. The obligations in Section 3 of this Agreement shall survive termination of relationship.
6. **JURISDICTION**. Student agrees to be subject to the jurisdiction of the courts of Fayette County in the Commonwealth of Kentucky in connection with the performance and enforcement of this Agreement and further agrees that the provisions of this Agreement shall be governed by, interpreted and construed in accordance with the laws of the Commonwealth of Kentucky.

ACKNOWLEDGMENT

STUDENT HAS READ AND AGREED TO ADHERE TO THE CONDITIONS OF THIS CONFIDENTIALITY AGREEMENT AND ACKNOWLEDGES THAT ANY VIOLATION OF THE AGREEMENT CAN RESULT IN IMMEDIATE TERMINATION OF RELATIONSHIP.

IN WITNESS WHEREOF, the parties have set their hands effective as of the day and year first set forth hereinabove.

STUDENT:

**BAPTIST HEALTH LEXINGTON APPROVED
CLINICAL INSTRUCTOR:**

Signature _____

Signature _____

Name: (Print) _____

Name: (Print) _____

Date: _____

Date: _____

Baptist Health Lexington **Instructor** Clinical Site Evaluation

Date _____ School _____

Level of student _____ Clinical Location at BHLex _____

Please respond to the following statements according to your level of agreement or disagreement:

Statement	Strongly Agree	Agree	Disagree	Strongly Disagree	Not Applicable
Orientation provided the information needed to participate in a clinical rotation at this hospital.					
Staff were committed to fostering student development.					
Staff on this unit demonstrated professional behavior.					
This unit provided the opportunity for students to gain new knowledge and skills.					
Day to day issues/concerns/problems were satisfactorily resolved through communication with staff, charge nurse, or director.					
The RN staff was helpful and supportive of students.					
Learning experiences were available to meet clinical course objectives.					
Overall, it was a good clinical experience for the students.					
I would recommend using this unit for student clinical experiences in the future.					

For any disagree or strongly disagree answers, please give additional information explaining your response.

What staff member(s) would you recognize as being helpful and supportive during your experience here this semester?

Do you have any suggestions for ways in which Baptist Health Lexington hospital could improve your clinical experience?

Thank you for completing this form and providing input about your experience at Baptist Health Lexington.



Baptist Health Lexington **Student** Clinical Site Evaluation

Date _____ School _____

Level of student _____ Clinical Location at BHLex _____

Please respond to the following statements according to your level of agreement or disagreement:

Statement	Strongly Agree	Agree	Disagree	Strongly Disagree	Not Applicable
Orientation provided the information needed to participate in a clinical rotation at this hospital.					
Staff were committed to fostering student development.					
Staff on this unit provided positive nursing role models.					
This unit offered the opportunity for students to gain new knowledge and skills.					
Overall, the rotation on this unit was a satisfactory experience.					
I would recommend Baptist Health Lexington hospital to other students for clinical experiences.					

For any disagree or strongly disagree answers please give additional information explaining your response.

What staff member(s) would you recognize as being helpful and supportive in your clinical learning experiences at Baptist Health Lexington?

Do you have any suggestions for ways in which Baptist Health Lexington hospital could improve your clinical experience?

Thank you for completing this form and providing input about your experience at Baptist Health Lexington.

Baptist Health Lexington Student EPIC Account Request Form

Instructor requesting accounts: _____ **Email:** _____ **School:** _____

Circle the level of access requested: **Read Only Access** **Full Access**

Instructors please provide the following information on your students at least ten (10) working days prior to training. Incomplete forms cannot be processed. **(Middle initial is necessary – if no middle initial please write NMI.)** Please **PRINT** information to ensure we have accurate information.

Student's Last Name Please Print Legibly	Student's First Name	Middle Initial	Start Date	End Date	Currently or previously employed by any Baptist Health facility?	Have you been a student at a Baptist Health facility in the past?	Assigned Clinical unit
1.			/ /	/ /	Yes No	Yes No	
2.			/ /	/ /	Yes No	Yes No	
3.			/ /	/ /	Yes No	Yes No	
4.			/ /	/ /	Yes No	Yes No	
5.			/ /	/ /	Yes No	Yes No	
6.			/ /	/ /	Yes No	Yes No	
7.			/ /	/ /	Yes No	Yes No	
8.			/ /	/ /	Yes No	Yes No	
9.			/ /	/ /	Yes No	Yes No	
10.			/ /	/ /	Yes No	Yes No	
11.			/ /	/ /	Yes No	Yes No	
12.			/ /	/ /	Yes No	Yes No	

Please return this form to Julia Fultz, Simulation Lab, 4th floor, Main Hallway, South Tower or fax to Julia at 859-260-4055.

