Baptist Health Lexington Hospital Clinical Orientation 2017
Welcome to Baptist Health Lexington for those of you who are new and welcome back to those who have been here before. We are glad that we have been given the opportunity to partner with your school in providing clinical experiences.

The Joint Commission requires that students receive orientation information similar to what an employee receives before caring for our patients. Your instructor will review the information in this packet with you and answer any question you may have. As with most things, we have to have documentation that the orientation occurred so there are forms that you will need to sign at the end of the orientation packet. The information contained within this packet will not only help you take better care of our patients, but it also provides the information you need to be safe while you are here. The care you provide must be supervised by an appropriate certified/licensed instructor or healthcare provider. Your documentation of the care you provide must be co-signed by an instructor or a preceptor.

As a student, you are allowed to provide care for patients using the skills you have been taught by your program and successfully mastered with 4 exceptions.

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

Student medication administration and performance of skills must be supervised. Students may only administer medications that are permitted under the appropriate regulating body for your profession. (i.e. Kentucky Board of Nursing, Kentucky Board for Respiratory Care Practitioners, Kentucky State Board of Physical Therapy, Kentucky Pharmacy Practice Act etc.)

Students are often required to complete projects while here at Baptist Health Lexington. Any project requiring access to either patient or employee data or collection of data from either group must go through our Research Office. If you are doing a project while you are here, please complete the questionnaire on page 28 to determine if the project will need to be reviewed by the Research Office. If needed, we have a number of resources available to help students through this process.

We are really excited about the changes we are experiencing at Baptist. We have a beautiful new patient care tower, the North Tower, which opened in December of 2015. All patient rooms at Baptist are now private and we are in the process of refurbishing patient rooms in the South Tower (1740 Building or Building D) so you will find some units in temporary locations until the renovations are complete. In addition to a new building, we also have a new documentation system – EPIC, which allows us to give students a read only view of patient records in addition to full access for obtaining patient information and documenting. Your instructor will decide which level of access is best for you. If you are here doing your preceptorship, we will grant full access so you can become further immersed in the nursing role.

We hope you enjoy your clinical experience here and that you develop a greater awareness and excitement for the profession you have chosen.

Sincerely,

Julia Fultz MSN, RN-BC, CEN, CFRN
Professional Development Specialist
Simulation Lab/Student Placement Coordinator
Mission, Vision & Values

**Mission**: To exemplify our Christian heritage of providing quality healthcare services by enhancing the health of the people and the communities we serve.

**Vision**: To be nationally recognized as the healthcare leader in Kentucky

**Values**: Baptist Health Lexington will live out its mission and achieve its vision guided by faith-based values: Integrity, Respect, Compassion, Excellence, Collaboration, and Joy.

**Nursing Values**: Compassion, Acceptance, Respect, and Empathy (CARE)

General Student Information

**Parking**: Parking for students and instructors will be in the North Garage above the 4th floor. A map is included in the packet on page 5 for those not familiar with the hospital grounds. The easiest way to access the North and South Towers is to exit the North Garage at level 1A, exit the parking garage and walk to Entrance G then follow the signs to the North Tower/1720 Lobby (which connects to the South Tower).

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

**Personal Items**: Storage space for personal items is at a minimum. Money and valuables should be kept 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 left with Security.

**Smoking and Tobacco use**: Baptist Health Lexington is a tobacco-free campus. Tobacco use is prohibited anywhere on the hospital campus including within personal vehicles parked on Baptist Health Lexington property and parking garages. Patients, visitors, medical staff members, vendors, employees, and students will be prohibited from using tobacco of any kind on our campuses including cigarettes, cigars, pipes, herbal tobacco products, e-cigarettes, and chewing tobacco. There are no designated tobacco use areas on the campus and no medical exceptions to this policy.

**Baptist Health Lexington Library**: Will you be writing a paper, looking for journal articles or using the library this semester? Did you know that while most students know how to use the Internet, many are unable to use a health science library? The 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. The librarians at Baptist Health Lexington are interested in helping students, use the library to its fullest potential. We will be happy to schedule time with one of our professional librarians to review how to the print indexes, the electronic databases, cost for printing, hours of the library, and the guidelines regarding student use. The main hospital library is located on the 1st floor directly across from Administration and the Main Elevators. The hours for the library are Monday – Friday 8:00am to 4:30 pm. Please email the manager of library services, Lonnie Wright, MSLS, at lwright@bhsi.com or call him at 859-260-6297 to set up an appointment.
Dress Code

The purpose of Baptist Health Lexington’s dress code is to maintain high standards of dress, hygiene, grooming, and personal appearance by employees; to assure that a professional image is portrayed to patients, families, visitors and co-workers and to comply with safety and infection control standards.

Name Tags
Name tags must be worn at all times to clearly identify staff and students to patients and visitors, and to comply with regulatory guidelines. Name tags must be worn above the waist. All cloth or other material lanyards are a possible infection control issue and are prohibited.

Facility Wide 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. Natural fingernails must be well groomed, clean and should not extend more than one-fourth inch (1/4”) beyond the fingertips. The hands, including the nails and surrounding tissue, should be free of inflammation.

Hairstyles must be neat and clean. Unconventional hairstyles and colors should be avoided as should other dress styles and trendy apparel that would not be reasonable accepted as cultural norms or be offensive to customers served. 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 into contact with the patient in the course of treatment.

Non-Approved Attire Facility Wide

- Make up, jewelry and cologne should not be excessive
- Ear piercings are permitted but should be simple and tasteful with no more than three earrings per ear.
- Nose, facial, tongue and other visible body piercings are not permitted. They must be removed or covered.
- Offensive Body artwork and/or tattoos must be covered at all times.
- Fingernail piercing is not permitted. Nail polish must be free from chips, cracks, and peeling. Artificial nails, overlays, extenders, and/or hardeners are forbidden in all clinical areas. The hands, including the nails and surround tissue, should be free of inflammation.
- Wearing paraphernalia, i.e., buttons, armbands, pins, etc. are not permitted.
- Hats (including baseball caps) are not permitted unless specifically authorized by department leaders or authorized for special occasions.
- Sweat shirts, sweat suits or any hooded clothing are not permitted.
- T-shirts or sweatshirts, including hospital logo, hospital event, or Baptist Health t-shirts by themselves are not permitted. T-shirts may 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 shorter that 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.
- Shoes that are above 2.5 inch of heel height, or slick soled shoes are not permitted.
- No Flip Flops or rubber sole open toe shoes
- Cloth lanyards or badge straps are not permitted.
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. 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 and clinical areas. Natural fingernails must be well groomed, clean and should not extend more than one-fourth inch (1/4”) beyond the fingertips. The hands, including the nails and surrounding tissue, should be free of inflammation. Nail polish may be worn but free from chips, cracks and peeling.

Approved Attire for Administrative/Clerical (Business Casual)
- Dresses, skirts or split skirts which are no more than one inch above the knee
- Dress 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 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-heel 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
- Artificial fingernails, overlays, bondings, tips, wrappings, and tapes are acceptable. Nail polish must be free from chips, cracks, and any peeling. Loud/inappropriate colors are not acceptable.

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. 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 (unless you have been assigned to care for them)
- 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 question or need to report a security incident contact the Information Security Officer or call the Compliance Hotline at 1-800-783-2318.

Organizational Ethics

Today’s healthcare providers, patients and families often encounter difficult questions regarding medical treatment. The Ethics Committee is one way to address those issues. 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 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.

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.

Any physician, hospital employee, patient or family member may request a consultation with the Ethics Committee. To access the Ethics Committee: Call the Ethics Beeper – (859) 330-3869 (available 24 hours a day, 7 days a week)

Incident Reporting
Risk Occurrence Report (ROR)

**Incident:** Occurrence - a reportable incident, variance or unusual event including, but not limited to (1) permanent or temporary physical impairment arising during the hospitalization of a patient; (2) personal or property injury/damage to a patient, visitor or persons acting for or on behalf of BHLex due to (a) an occurrence inconsistent with routine operation of the hospital; or (b) a deviation from established policy or procedure involving patient care. Incident Reports, also known as Risk Occurrence Report (ROR) can be completed using the Safe Reporting system that can be accesses through EPIC or from BEN in the Misc Apps and Tools box under the Applications tab from the BEN home page.

- When filling out an incident report, complete all appropriate sections of the ROR. 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 are slips/falls, medication errors, medication reactions, refusal of treatment, burns, biomedical device failures, lost or damaged property, near miss incident, etc.

• Report all employee work-related incidents on the Employee Incident Report and to the immediate supervisor of the area on the same day as the incident.
• 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.
• Employee Incident Reports must be printed out, completed and faxed to Employee Health

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. At Baptist Health Lexington the following definitions apply:

- Neonate: Birth to 1 month
- Pediatric: Birth/Toddler – Birth 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.

Being open-minded and respectful toward other beliefs, values and practices are important to making others feel comfortable.

Infection Prevention & Control

There is no quick, method of determining which patients may be carrying an infectious disease. Treat ALL patients as though they may be infected. Use Standard Precautions every time you anticipate contact with blood, non-intact skin, mucous membranes, and body fluids. Standard precautions include: washing hands, using hand gel, wearing gloves and/or gown appropriately, and covering mouth, nose, eyes with a mask or face shield when you think you may get splashed/splattered.
Remember: Standard Precautions - “Every Patient Every Time”

Personal protective equipment (PPE) includes gloves, fluid-resistant gowns, face shields and resuscitation devices. You should wear as much or as little PPE needed to keep blood or other potentially infectious materials from getting on your clothing, skin or mucous membranes. PPE are located in clean supply room on clinical units. Gloves reduce hand contamination by 70 percent to 80 percent, prevent cross-contamination and protect patients and health care personnel from infection.

In addition to standard precautions, Baptist Health Lexington uses transmission-based isolation precautions which include: Contact Precautions, Contact Spore Precautions, Airborne Precautions and Droplet Precautions. Isolation precaution signs will be posted on the door to the patient’s room, or electronically outside of the patients’ room. A small sign will be found on the front of the patient’s chart. Isolation and the type of infection will be designated in EPIC within the patient header. Report of precautions occurs during change of shift report. *Please note, with the hospital renovation, all hospital rooms are now private. Electronic isolation signs are outside of the each patient’s room on 4G in the South Tower, and on ALL rooms on the North Tower.

Please be advised that Contact and Spore Precautions require both gown and gloves upon entry to the patient room. Contact Spore Precautions also require soap and water for hand hygiene rather than hand gel, and bleach wipes rather than sanitary wipes in the room.

Hand hygiene is the single most important work practice for preventing the spread of infection. The sooner you wash infectious material off your hands the less likely your chance for infection. Alcohol-based hand sanitizers significantly reduce the number of microorganisms on skin. Hand sanitizers should be used before and after each patient just as gloves should be changed before and after each patient.

Alcohol based hand rubs do not kill the Clostridium Difficile (C-Diff) organism. Hands much be washed with soap and water if the potential for C-Diff is present. Look for a blue “Contact Spore Precautions” isolation sign.

When to practice hand hygiene:

• Before entering the patient’s room and/or having direct contact with patients
• Before inserting indwelling urinary catheters and peripheral vascular catheters
• After contact with a patient’s intact skin (e.g. when taking a pulse or blood pressure, lifting a patient)
• After having contact with body fluids or excretions, mucous membranes, non-intact skin, and wound dressings if hands are not visibly soiled
• When moving from a contaminated body site to a clean body site during patient care
• After contact with inanimate objects (including medical equipment) in the immediate vicinity of the patient
• Immediately after gloves are removed and between patient contacts
• Before eating, drinking, smoking, applying makeup, handling contact lenses or using the restroom
• After you eat smoke, cough, sneeze or use the restroom
• When entering a food preparation area
• Never use hand-washing sinks for food processing.

When health care personnel’s hands are visibly dirty or contaminated with proteinaceous material, blood or other body fluids, hands should be washed with soap and water.

How to wash your hands

When decontaminating hands with an alcohol-based hand rub, apply product to palm of one hand and rub hands together, covering all surfaces of hands and fingers, until hands are dry. When washing hands with soap and water, wet hands first with water, apply soap and rub hands together vigorously for at least 15
second, covering all surfaces of the hands and fingers. Rinse hands with water and dry thoroughly with a disposable towel. Use towel to turn off the faucet.

In the event of a blood spill:
- Warn others in the area and isolate the contaminated area. (Prevent others from walking through or near the spill.)
- Put on personal protective equipment (PPE) appropriate for the spill size. (e.g., gloves, long-sleeved coveralls, safety goggles).
- Remove glass or sharps, if necessary, with forceps, tongs or scoop.
- For a wet spill, cover with disinfectant-soaked absorbent towels, wipe, and remove toweling. (This decreases the likelihood of causing a splash.)
- Any visible blood or body fluid must be cleaned thoroughly before proceeding to the next step.
- Apply appropriate disinfectant to the area. Allow adequate contact time. (Approximately 5 minutes to help ensure all blood borne pathogens are killed.) Pre-soaked wipes may be used for smaller spills.
- Wipe up and clean again with soap and water. Properly dispose of clean-up materials into red biohazard waste bags/containers. Also, place glass, needles, and rigid plastic or other sharps into red biohazard sharps containers. No items are allowed to stick out of any biohazard container. (e.g., mops, etc.) The containers must be kept closed.
- Take the biohazard waste to the closest soiled utility room.
- Wash your hands

To dispose of contaminated (dirty) sharps:
- Wear gloves
- Do NOT recap needles
- Place all sharps in needle box immediately after use

TB patients – suspected or known:
- Negative pressure room is required
- N-95 Respirator required
- Airborne Isolation
- **Instructors and students are not fit tested for the N-95 Respirator and therefore may not enter these rooms.**
- Patient to wear regular surgical mask during transport and in areas where negative pressure are not available. (Such as CT rooms)
- Discourage visitors except for those who have been in the household or in close contact. Visitors may choose to wear one of the N-95 respirators. CDC states no increased risk for additional exposure if already exposed.

Isolation
For any isolation, signs should be posted on the door, or electronically, and on the chart. Explain to the patient and family why the patient is in isolation. Teaching sheets are in EPIC. For transfers from isolation rooms – put a clean gown/sheet on the patient. Staff should put on new gloves prior to exiting the room/unit.

Multi-Drug Resistant Organisms (MDROs), i.e., MDR Pseudomonas aeruginosa, ESBL, CRE, MDR Acinetobacter, etc.
- Wear gloves and gown when entering the room and for all contact with the patient or anything in the room.
- Use mask and eye protection when suctioning.
- Patient should be in a private room (All rooms at BH Lexington are now private)
- Maintain strict adherence to good hand hygiene (Hand washing or Hand gel)
- Clean any item before use on another patient with Sani Wipes disinfectant.
Contact Spore Precautions (Clostridium difficile or antibiotic-related diarrhea)
- Strict adherence to good hand washing. Only use bleach wipes in this room; ONLY bleach Dispatch wipe will kill the germ so to avoid any confusion or mix up remove the Sani wipes from the room.
- Place a blue ‘Spore Precaution’ sign on door, chart. DO NOT use Gel sign on gel dispenser in room as reminder to wash hands
- Notify Environmental Services that daily room clean to be done twice and at discharge
- Patient should be in a private room on any unit or floor

Droplet Precautions (Flu, Chicken Pox, Meningitis)
- Regular Surgical mask to be worn by all entering room
- Strict adherence to good hand hygiene. With Meningitis, if antigen panel on spinal fluid is positive for Neisseria meningitidis, notify Clinical House Supervisor or Infection Prevents/Employee Health Nurse immediately. May need to give antibiotics to staff & family

Shingles
- Patient should be in a negative pressure room if lesions or sores are NOT dried or crusted and the lesions are on more than two dermatomes. Isolation category is Airborne Isolation for disseminated shingles. Main concern: pregnant women and/or healthcare workers who have not had chicken pox or been vaccinated for chicken pox should receive the vaccine. NOTE: The Varicella virus that causes shingles may be transmitted via airborne route or by direct contact with lesions. An exposed, non-immune person may develop chicken pox, but not shingles.

Personal Protective Equipment (PPE)
- All necessary PPE is provided. Available outside the room in PPE holders and in rooms. Remember to also protect your eyes and mouth with mask with face shield.
- At Baptist Health Standard Precautions are practiced.
- Use of Gloves and if needed gown for all blood and body fluids.
- Hand Hygiene before and after patient contact

Infection Control Policies are located in BEN on the Intranet.
- I.C.E. Protocol – Policy # IC-V-22
- Blood Borne Pathogen Exposure Control Plan – Policy # IC-II-1
- Guidelines for Isolation Precautions and patient Placement: Policy # IC-V-2

Please make sure you use standard precautions and comply with donning the appropriate attire when entering an isolation room. It is your responsibility to follow the isolation precautions deemed necessary by our policies and procedures.

The blood borne pathogen exposure control plan can be found in the Infection Control Manual on the Intranet. In the event of a blood exposure – IMMEDIATELY call the Employee Health Nurse (260-6503) or by pager 859-330-3852, or the Clinical House Supervisor (pager 77-268) so testing of the patient’s blood can begin immediately.

Medication Administration

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).

Student Practice Guidelines - students may perform patient care skills at Baptist Health Lexington under supervision after they have learned and successfully mastered the skill according to your
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Schools criteria. There are just a few things Baptist Health Lexington 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.

All medication administration must be supervised. The following policies are related to medication administration and will guide your practice. Please review these policies which can be found on BEN.

- Medication Administration: Policy # III-A-1
- Patient Controlled Analgesia (PCA) Administration: Policy # III-A-19
- Medication Reconciliation Policy # III-A-1b
- Range Orders for Medications: Policy # III-A-23
- Labeling Medications/Solutions During Bedside Procedures: Policy # III-A-34
- Intravenous Therapy for Adult Patients: Policy # III-A-3b
- High Risk Medications: Policy # 11107.2
- Patient Identification for Clinical Care and Treatment: Policy # III-A-25
- Unacceptable Abbreviations List: Policy # VII-5a
- Guidelines for an Insulin Drip: Policy # III-A-7
- Procedure for Bar Code Medication Administration: Policy # III-B-45
- Heparin dosing Policy: Policy # PH 29

**Pharmaceutical Waste Program**

Appropriate pharmaceutical waste management is critical for both patient and employee safety. Baptist Health Lexington 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! Waste will need to be disposed of in designated containers based on the category of waste. 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 HARx. The three-digit code identifies the appropriate waste container. Charts located on each unit will give additional information regarding which containers the waste should be placed in.

- Blue: Non-hazardous such as ointments, capsules, creams. If no code the item defaults to the blue container
- Purple: refers to dual waste, contaminated sharps plus live vaccine. Waste Code DW
- Black: Hazardous waste
- Yellow: Trace Chemotherapy (empty syringes, vials, IV bags PPE etc.)
- Red: Non chemotherapy medication vials – empty and empty non chemotherapy medication syringes

For these and other policies:

Go to BEN, click the Documents tab, click the “Policies and Procedures” link in the Baptist Health Policies box, type in a key word of the policy of the policy number into the Keyword Search box, Select “All Words” directly below the Keyword Search box, and then click Search.
Patient Safety is a priority for Baptist Health Lexington. It is the responsibility of every Baptist Health Lexington employee and all students to ensure that patients remain safe during their 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. Therefore, patients will be educated about their role and responsibility in preventing medical errors upon admission whenever possible.

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. Risk occurrence report (paper format or electronically in Care Manager)
2. Medication Event report (paper format or electronically in Care Manager)
3. Patient Safety Hotline Ext. 3680
4. Patient Safety Officer- 260-5569

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.

Patients have a right to:
1. Receive fair and compassionate care at all times and under all circumstances.
2. Be treated equally and receive the same level of care regardless of race, color, national origin, religion, sex, age or disability.
3. Retain their personal dignity and privacy, receive care sensitive to their personal feelings and need for bodily privacy, receive care in a safe setting, and to be free from abuse and harassment.
4. Have family members, representatives, and physician of choice notified promptly of admission
5. Receive personalized treatment, through an individual treatment plan and to participate in the development and implementation of the treatment plan. This institution values each patient’s cultural, racial and religious heritage as part of that plan.
6. Confidentiality of clinical records and to be able to access information contained in the medical record within a reasonable time frame.
7. Consent to receive visitors unless such visits harm your medical condition, negatively affect recovery or are not consistent with hospital policy. Consent can be withdrawn at any time.
8. Send and receive mail without interference from hospital personnel or other parties
9. Examine and receive and explanation of your bill
10. Be informed of hospital rules and regulations that affect your activities and behavior as a patient.
11. Formulate advance directives (living will, durable power of attorney, health care surrogate, etc.) and to have hospital staff and practitioners comply with these directives in accordance with federal and state law.
12. Be free from restraints and seclusion, of any form, that are not medically necessary or used as a means of coercion, discipline, convenience or retaliation.
13. Receive appropriate control and management of pain
14. Receive information in a clear manner and to request assistance if you have difficulty reading, hearing or speaking English.

Patients and/or their designated surrogate have the right to:
15. Be informed of their rights before the furnishing or discontinuance of care, whenever possible.
16. Make informed decisions regarding care, including being informed of their health status, be involved in care planning and treatment, be able to request or refuse treatment to the extent permitted by law, and be told of the medical consequences of their actions.

17. Know the identity of the doctor, psychologist or other practitioners responsible for your care.

18. Be told of any medical procedures and test to be performed, the reason for the procedure and test, and the identity of those who will be performing them.

19. Expect reasonable continuity of care to assure that they are advised of any outpatient care options, requirements and of follow-up care needs.

20. Be informed of disease appropriate clinical research studies available by contacting the National Library of Medicine at 1-888-346-3656 or searching online at www.ClinicalTrials.gov.

21. Communicate problems or concerns with the hospital to the Patient Relations department, (859) 260-6168 or hospital administration at (859) 260-6015.

Patients are responsible for:

1. Providing to the best of their knowledge, accurate and complete information about their health including present complaint, past illnesses, hospital stays, use of all medications and other pertinent matters relating to your health.

2. Asking questions when they do not understand information or instructions.

3. Reporting unexpected changes in their condition to the physician or hospital staff member.

4. Understanding instructions for ongoing treatment and informing the physician if they cannot follow through with treatment.

5. Showing consideration for the needs of other patients, staff members and physicians involved with your care and to assist with the control of noise, smoking and number of visitors.

6. Following hospital rules and regulations including safety and infection control guidelines.

7. Providing information regarding insurance and working with the hospital to arrange payment for services.

8. Making decisions in daily life and dealing with the effects of those decisions on your personal health.

9. Arranging for advance directives and communicating them to hospital staff.

10. Communicating problems or concerns relating to care to hospital management.

National Patient Safety Goals

The purpose of Joint Commission’s National Patient Safety Goals is to promote specific improvements in patient safety. Hospitals must implement system wide solutions to meet these goals and are evaluated for continuous compliance during the Joint Commission survey. The goals are listed below along with implementation expectations. All patient care providers need to be aware of the patient safety goals and what Baptist Health Lexington is doing to meet these goals.

2017 Hospital National Patient Safety Goals

Goal 1: Improve the accuracy of patient identification.
- Use at least two patient identifiers (Baptist Health Lexington 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.
- Label containers used for blood and other specimens in the presence of the patient
- Eliminate transfusion errors related to patient misidentification.
  - Match the blood or blood component to the order
  - Match the patient to the blood or blood component
  - Use two-person verification process by licensed (RN, LPN) personnel

Goal 2: Improve the effectiveness of communication among caregivers.
- Report critical results of tests and diagnostic procedures on a timely basis to responsible licensed caregiver. (Policy VII–11)
Goal 3: Improve the safety of using medications.

- Label all medications, medication containers including syringes, medicine cups, basins and other solutions on and off the sterile field in perioperative and other procedural settings. Labeling occurs when any medication or solution is transferred from the original packaging to another container. Labeling should include medication name, strength, quantity, diluent and volume, expiration date when not used within 24 hours, expiration time when expiration occurs in less than 24 hours. (Date and time are not necessary for short procedures, as defined by the hospital)
- Verify all medication or solution labels both verbally and visually. Verification is done by two individuals qualified to participate in the procedure whenever the person preparing the medication or solution is not the person who will be administering it.
- Label each medication or solution as soon as it is prepared unless it is immediately administered.
- Immediately discard unlabeled medications or solutions.
- Remove all labeled containers on the sterile field and discard contents at the conclusion of the procedure.
- All medications and solutions both on and off the sterile field and their labels are reviewed by entering and exiting staff responsible for the management of medications.
- Reduce the likelihood of patient harm associated with the use of anticoagulant therapy.
  - Use only oral unit-dose products, prefilled syringes, or premixed infusion bags when available.
  - Use approved protocols for the initiation and maintenance of anticoagulant therapy.
  - Assess patient’s baseline coagulation status prior to warfarin therapy; use International Normalized Ratio (INR) to adjust therapy
  - Administer heparin infusions using programmable pumps to provide accurate and consistent dose.
  - Provide education regarding anticoagulation therapy to prescribers, staff, patients and families.
  - Use authoritative resources to manage potential food and drug interactions with patients receiving warfarin.
  - Written policy addresses baseline and ongoing lab tests that are required for anticoagulants.
- Maintain and communicate accurate patient medication information.
  - Accurately and completely reconcile medications across the continuum of care. (Policy # III-A-1b)
  - Perform medication reconciliation upon admission, transfer, and discharge; compare current and newly ordered medications.
  - A Transfer Medication Reconciliation Report should accompany the patient when transferring the patient within Baptist Health Lexington. Communicate medications to the next care provider.
  - Upon discharge, a Discharge Medication Reconciliation Report should be prepared, reviewed with the patient and appropriate education provided, and a copy should be faxed to the primary Care provider.
  - Explain the importance of managing medication information to the patient.

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 (Cardiac Monitoring Safety Guidelines Policy # X-1)
- Identification of the most important alarm signals to manage (Policy III-B-72)

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. [methicillin-resistant staphylococcus aureus (MRSA), clostridium difficile (CDI), vancomycin-resistant enterococci (VRE), and multiple drug-resistant gram negative bacteria.] (Policy # IC-V-22; IC-V-24)
- Prevent central line-associated bloodstream infections by implementing policies and practices that meet regulatory requirements and are aligned with evidence-based standards such as those issued by the CDC and/or professional organization guidelines. (Policy # IC-VII-8)
Prevent surgical site infections by implementing policies and practices that meet regulatory requirements and are aligned with evidence-based standards such as those issued by the CDC and/or professional organization guidelines. (Policy # IC-VII-10)


- 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

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 procedure site
- 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.

National Patient Safety Goals that were added to the required Joint Commission Standards:

- “Read back” telephone/verbal orders and critical test results
- Standardized hand off process – SBAR (Situation, Background, Assessment Recommendation) is used at Baptist Health Lexington
- Measuring timeliness of receipt of critical test results and calling to an LIP
- Annual list of look-alike, sound-alike medications
- Hand Hygiene requirements
- Health care-associated infection sentinel events
- Falls risk reduction program
- Patient’s active involvement in their own care (CODE H)
- Recognition and response to changes in patient’s condition (RRT)

Additional information regarding the National Patient Safety Goals for critical access hospitals can be found on The Joint Commission web site at https://www.jointcommission.org/assets/1/6/NPSG_Chapter_CAH_Jan2017.pdf

Restraints

Please review the Restraint Guideline policy (I-2). 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 well being 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. The hospital staff shall strive to respect, protect, and preserve the patient’s rights, dignity and well-being while implementing this policy.

There are two classifications of restraint recognized at Baptist Health Lexington: 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
Baptist Health Lexington

- 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 situation 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.

Non-physical techniques are preferred when intervening to manage a patient’s behavior. Alternative interventions should always be considered prior to restraint use. 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 a patient one of your students is caring for is in restraints, please go to the restraint policy # I-2, by accessing BEN on Baptist Health Lexington’s intranet web page.

**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 or Clinical House Supervisor (pager 77-268) 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 Baptist Health Lexington’s safety plan and can be reached at 260-6477.

**Security Management**

Security management - Security officers are available 24 hours per day through the operator at 6291 or 6077, or by pager at 77-787.

- Security should be called in the event of an emergency situation, unauthorized 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 Baptist Health Lexington.
- All outside doors will be locked at 9PM and unlocked at 5 AM except the main entrance of building D, which will remain open.

**Hazardous Materials and Waste Management (HAZMAT)**
You have a right to know of the chemical hazards that may exist in your work place. Baptist Health Lexington identifies these items for your safety.

**Safety Data Sheets (SDS)**
- Located on Intranet in BEN, under Applications / Misc. Apps / Tools
- 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

**Hazardous Chemicals found in the Hospital**
- Formalin & Xylene are found mostly in the Laboratory
- Check Environment of Care Manual for spill cleanup procedures.

**Personal Protective Equipment (PPE)**
- Personal protective equipment (PPE) includes gloves, fluid-resistant gowns, face shields, and resuscitation devices. You should wear as much or as little PPE needed to keep blood or other potentially infectious materials from getting on your clothing, skin or mucous membranes. PPE are Located in clean supply room on clinical units. Baptist Health Lexington provides all necessary PPE.
- At Baptist Health Lexington we practice standard precautions. Standard precautions include: washing hands, using hand gel, wearing gloves appropriately, covering mouth, nose, eyes then you think you may get splashed/splattered by using goggles or mask with face shield.

**Regulated Medical Waste (RMW)**
- Biohazard Waste, Red Bag Waste
- Chemotherapy Waste
- Pathological Waste
- Pharmaceutical Waste
This type of waste needs to be treated 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 isn’t 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
Baptist Health Lexington

- 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

Pharmaceutical Waste

Pharmaceutical waste will need to be disposed of in designated containers based on the category of waste. Medication waste will be disposed of in color coded bins (Blue, Black, Purple, Red, and Yellow) according to a three digit code identifying the appropriate waste container. The information identifying the appropriate waste container will be included in the description of the drug name in EPIC. Charts are located on the units with information regarding the types of waste designated for each container.

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. Clinical Engineering must be notified and an incident report must be completed and forwarded to the Patient Safety Department.

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 malfunctioning equipment, 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
- Rescue persons in immediate danger and transport to a safe area
- Activate the nearest fire alarm and call CODE (2633) to report the location of the fire. (Offices outside the hospital will call 911.)
- Contain the fire by closing all doors and windows
- Extinguish the fire with the nearest appropriate portable fire extinguisher

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

PASS
- Pull the safety pin
- Aim the nozzle at the base of the fire
- Squeeze the handles together
- Sweep 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 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 Baptist Health Lexington 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 Baptist Health Lexington (tornado), or safer to leave Baptist Health Lexington. If your preceptor or instructor leaves, then students should also notify 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)**

**KY Regional Codes:**
- Code Blue - Respiratory/Cardiac Arrest Adult or Pediatric
- Code Red - Fire
- Code Yellow - Incident Command
- Code Orange - Hazardous Material Spill/Release Internal or External
- Code Black - Bomb/Bomb Threat

Weather alerts will be in plain speech warnings

**Baptist Health Lexington Specific Codes:**

**Code PINK** - 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.

**Code 19** – “Stroke Team” activation - Immediately upon witnessing any signs and symptoms of a stroke in a patient or visitor activate Code 19. (Dial 2633 and ask the operator to call Code 19 – give location) Stroke team will respond within 10 minutes.

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

**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.

**Pediatric RRT** - Pediatric Rapid Response Team - Team responds rapidly to manage a significant change in pediatric patient (16 years or less). (Dial 2633 and ask the operator to call Pediatric RRT give location)
**Baptist Health Lexington**

**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.

**Code White** - Behavioral crisis involving patient, family or visitors. A rapid response team will be activated to verbally de-escalate the situation.

**Code Silver** - Notification of a hostile individual with a firearm on hospital premises - The operator will notify the Clinical House Supervisor and Security.

### Important Telephone Numbers

Safety Officer - 260-6790, Pager 330-2176  
Administration - 260-6108  
Pharmacy - 260-6659  
Security - 260-6077, Pager 77-787  
Compliance HIPAA Hotline  1 (800) 783-2318  
Patient Safety Hotline (859) 260-3680  
Risk management/ Compliance/HIPAA - 260-5596, pager 330-0272  
Emergency Department – 260-6180
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.
Initial each item indicating you have received the following information 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
  - Standard Precautions
  - Types of Isolation
  - Blood spills/exposures
- Information Management Guidelines
- Smoking Policy
- Patient Rights and Ethics
- Age Specifics/Cultural awareness
- Patient Safety
- Restraints
- Incident Reporting (Risk Occurrence Report)
- Environment of Care – Hospital Safety Information
  - Security Measures
  - Hazardous Materials and Waste Management
    - Material 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: ___________________________

Read and sign the “Baptist Health Lexington Confidentiality Agreement”

I have read and understand the information in the HIPAA brochure. 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 ___________________________

2017 BHL Clinical Orientation Packet (JHF)
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:**

Signature________________________________________

Name: (Print)____________________________________

Date:____________________________________________

**BAPTIST HEALTH LEXINGTON APPROVED CLINICAL INSTRUCTOR:**

Signature________________________________________

Name: (Print)____________________________________

Date:____________________________________________
Nursing Research/IRB Criteria for Students at BHLex

Instructions: If answer “Yes,” to either of the below questions, the student must complete this form and contact the Nursing Research Office as soon as possible (ext. 3343).

(Note to students & faculty: If answer “yes”, please understand that completing the IRB application/project can take up to six weeks or more. It is important for students and faculty to submit their application in a timely manner to prevent delays regarding completion of project(s), etc.)

1. I am required to conduct a project this semester (e.g., research project, pilot project, EBP project, capstone, interviews, surveys, etc.) that involves collecting or reviewing data/information regarding patients, employees, or visitors.
   - □ Yes
   - □ No

2. I plan to collect or review data/information by/from:
   - □ Reviewing charts
   - □ Distributing questionnaires
   - □ Conducting interviews
   - □ Observing activities
   - □ Other: __________________________________

If you answered “yes” to question #1 above, please complete the following and turn in with orientation paperwork.

Name________________________________________ Date: ____________________________

Email Address: ____________________________ Phone/Cell: _______________________

Desired BHLex Unit or Population for Project: _______________________________________

College/University:________________________________________________________________________

Academic Program:_________________________ Degree at Completion: ______________

Note: Data collected from publically available sources/websites (i.e. www.healthgrades.com) do not require the student to contact Nursing Research Office/IRB.

Data at the unit-based or departmental level are NOT considered publically available (only organizational level data). Examples of data publically available at the organizational level include (please see website):

- Hospital acquired pressure ulcers
- Respiratory failure, development of deep vein thrombosis or mortality post-surgery
- Patient experience/satisfaction measures
- Hospital readmissions related to pneumonia, myocardial infarction and heart failure.
- Timely and effective care related to pneumonia, myocardial infarction, heart failure
- and/or surgery.
Dear Student/Observer,

Thank you for choosing Baptist Health Lexington as your clinical site. In order for us to continue as a clinical site, we must retain certain information on all students. Please complete the requested information and return it with the above forms.

Name: ____________________________ Current BHLex Employee: Y / N

Address: ____________________________ (Street) ____________________________ (City) ____________________________ (State) ____________________________ (Zip)

Telephone: (____)__________________ E-Mail: ____________________________

School you are representing: ________________________________________________

Program name (ex. NSG, Pharmacy, Paramedic, SLP) ____________________________________________

Anticipated Graduation Date: _____ / _____ / ______

Instructor Name: ____________________________________________

Clinical area requested: ____________________________ Total # of clinical hours needed: ______________

Clinical start date: _____ / _____ / ______ Clinical end date: _____ / _____ / ______

Department preceptor: ____________________________________________

Each year the Commonwealth of Kentucky asks for the total number of students that have performed clinical rotation here. Also, they ask that this number be broken down into designated groups. Please indicate which of the categories you should be counted in.

Check the appropriate box:

- African American
- American Indian
- Asian
- Caucasian
- Spanish Surnamed American
- Other (please specify)

Date of last TB skin test (must have been within the past year) __________________ Please submit copy of results if you will be at Baptist Health Lexington.

Return all signed forms to:

Julia Fultz
Educational Development
Simulation Lab, 4th Floor, Main Hallway South Tower