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Due to the Covid-19 pandemic, <u>ALL STUDENTS</u> are required to follow CDC and public health guidelines including social distancing, wearing a face covering and participating in frequent hand-washing. Please bring a mouth/nose covering to class for your personal use. If you are unable to wear a mouth/nose cover, please contact the Training Center prior to arriving so that we can explore reasonable accommodations. Our training center has additional screening prior to class; per our Covid-19 policies

# 2022 CNA 2 APPLICATION PACKET

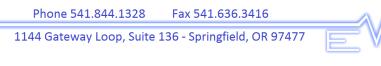
Fill out packet per instructions and make an appointment with EMT Associates to submit your COMPLETED packet, documentation & payment

CNAInfo@emtassoc.comcastbiz.net 541-844-1328

ALL REQUIREMENTS MUST BE COMPLETED BY DEADLINE

<u>WRITE IN BLACK INK ONLY</u>

EMT.Associates@comcast.net





# Thank you for choosing EMT Associates for your CNA 2

Here are some housekeeping items that may be helpful to you in preparing to register for this course.

#### **Class Times:**

Please come to register with EVERYTHING listed on the checklist no later than 3:30pm on the registration deadline. If you need to obtain a HCP CPR card, or do not have a current HCP CPR card, please let us know ahead of time and we will set up a class for you before clinicals. The fee is \$65. We also offer the Two Step PPD [TB Test] for \$25/per test. Please contact the office to schedule

Clinical Scrub requirements are black or navy blue pants and a maroon top. Your maroon scrub top is included with your tuition

Classroom temperature is variable — so dress in layers. There are coffee shops and restaurants within walking distance

\*\*Clinicals begin after classroom completion. They may be any combination of 4 days in coordination with Peacehealth's availability. We may have day or evening options... Therefore it is IMPORTANT for you to allow your schedule for an additional 7 days beyond the scheduled dates\*\*

Please be aware class will be canceled if less than 4 students register. This is rare, but we want students to know of the possibility in advance. A full refund will be given if we cancel.

We hope this will be a great experience for you in furthering you career. We look forward to meeting you!

#### Below are contact numbers for any question of concerns:

CNA 2 Program Director	Mary Ann Vaughan	(541) 430-7149	Mavemtrn@comcast.net
CNA 2 Program Coordinator	Skorpiaa	(541) 844-1328	Skorpiaa.N@emtassoc.comcastbiz.net
CNA 2 Clinical Instructor	Mary Carpenter	(541) 912-2761	

Welcome to Class on behalf of EMT Associates!

Fax 541.636.3416





**From I-5:** Take exit 195-A. Stay in the far right hand lane. At the Gateway Street light turn right. Follow Gateway Street to the second light and turn right. This will put you on Gateway Loop. Gateway Office Plaza is the 4th driveway on the right, in front of Selectemp. Follow the driveway straight back and to the left.

**From Beltline HWY E:** Follow Beltline to the end. Get in the far right hand lane. At the Gateway Street light turn right. Follow Gateway Street to the second light and turn right. This will put you on Gateway Loop. Gateway Office Plaza is the 4th driveway on the right, in front of Selectemp. Follow the driveway straight back and to the left.

Parking: Students may park in the Gateway Office Plaza parking lot. Use West door.

#### **Drug Screen and Background Check Policy**



#### Take this page of your packet with you to Any Lab Test Now

# Drug Screenings & Background Checks must be within 30 days of class... NO EXCEPTIONS

#### Per Policy we will only accept results from:



977 Garfield St., #6 Eugene, OR 97402 Phone: (541) 343-2398 Fax: (541) 344-4597

Call For Current Pricing and to Verify Hours Hours of Operation: Monday - Friday 10:00a - 6:00p and 10:00a to 2:00p on Saturday

#### **Required Testing**

#### 10 Panel Urine Screen Including:

- ✓ Amphetamines
- ✓ Cocaine
- ✓ Methadone
- ✓ Propoxyphene
- ✓ Opiates
- ✓ Cannabinoids
- ✓ Barbituates
- ✓ Methagualone
- ✓ Benzodiazepines
- ✓ Phencyclidine

#### **Criminal Background Check must include:**

- ✓ National Criminal Background Check
- ✓ State and County Criminal Background Check
- ✓ **GSA** (General Services Administration : *Excluded Parties List System*) & and **OIG** (Office of the Inspector General: *List of Excluded Individuals/Entities*)
- ✓ Social Security Verification and Trace
- ✓ FACIS
- ✓ Professional License Certification/Verification (if Applicable)

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THIS FORM WILL BE COMPLETED BY CNA COORDINATOR TO FACE KEEP AND RRING TO INTERVI

	THIS FORIVI WILL BE CON	I LLIED DI CIVA COO	CONTAIL		FICE STAFF US		<u>'</u> .J
Personal Ver	rification		Date of piration	Initial 1	Initial 2	Co-Check 1	Co-Check 2
	Active Oregon CNA 1 License						
	Drivers License						
	Active Health Insurance Card						
	Active AHA BLS CPR Card						
Must be don	e at Any Lab Test Now		te Results eceived	Initial 1	Initial 2	Co-Check 1	Co-Check 2
	Background Check (Date Done:	)					
	Drug Screen (Date Done:	)					
Peacehealth	Forms		te Forms eceived	Initial 1	Initial 2	Co-Check 1	Co-Check 2
	Clinical Application						
	Confidentiality Agreement						
	Orientation Quiz Completed corre	ectly					
Immunizatio		'	Date of Jaccine	Initial 1	Initial 2	Co-Check 1	Co-Check 2
	la (Measels)						
	ıs a						
	a lla						
	 itis B						
	tep Tuberculosis Test						
	B Test 1						
	B Test needs to be read within 48 to		done.				
	B Test 2						
* 2 <sup>nd</sup> T	B Test should be done 3-4 weeks after	er the first complete TST, but	no sooner	than 7 days a	fter the first t	est. Test need	s to be read
within	n 48 to 72 hours or it needs to be red tive Provide One of the Following:			·			
	egative chest x-ray report within the	last 6 months					
	egative QuantiFERON TB Gold in-tub						
	I Influenza Vaccine						
a) O	ctober 1 until March 30 – MUST HA	VE DOCUMENTATION FROM	<mark>PROVIDER</mark>				
		eggs or other vaccine compo	nents (anap	ohylaxis)		one of the two	o medical
	ii) A history of Guillain-Barre Sy	undrome within 6 weeks after	a previous	influenza va	ccination		
Benefits Consu	h REQUIRES that you have current hulting for reasonably priced health in R 97477 E-mail: SALCOLLURA@COLL	nsurance. If needed, please c				_	
	OFFIC	CE STAFF TO FILL IN AT Y	OUR API	POINTMEN	<u>IT</u>		
☐ Your Co	urse is Paid in Full \$995						
☐ You Paid	d the Non-Refundable Registra	ntion fee of \$150					
☐ You are	paying the balance of your tui	tion of \$845					
our first day	of Class is	Clinical's MAY run	from		to		
Printed Name	e: S	taff Printed Name:			Staff Printed N	lame:	
Signature:		taff Signature:			Staff Signature	2:	
f Initial:	S	taff Initial:			Staff Initial:		



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#### **EMT ASSOCIATES CNA2 REGISTRATION** INTENDED COURSE START DATE: / STUDENT INFORMATION Last Name: First Name: M.I. ☐ Male ☐ Female CNA Certification #: Date of birth: Age: SSN: Current mailing address: ZIP Code: City: State: Home Phone: Cell Phone: Other Phone: E-Mail Address: Are you a US Citizen? □Yes □No Have you lived outside of the state of Oregon for 6 months or more in the last two years? If no, How long have you lived in the us? □Yes □No Is English your Primary Language? □Yes □No If English is your secondary language, what is your primary language? Race / Ethnicity [Optional]: ☐ Hispanic or Latino or of Spanish Origin ☐ American Indian or Alaska Native ☐ Bi-Racial/Multi-Racial ☐ Black or African American or of African Origin ☐ Asian ☐ Other ☐ Native Hawaiian or Other Pacific ☐ Caucasian ☐ I Prefer Not To Say **EMERGENCY CONTACT INFORMATION** Emergency Contact 1: Last Name: First Name Phone: Relation: **Emergency Contact 2:** Last Name: Phone: First Name: Relation: EMPLOYMENT INFORMATION (IF APPLICABLE) **Employer Name: Employer Name address:** City: State: ZIP Code: Phone: OTHER INFORMATION Please print your name as you wish it to appear on your certificate: How did you hear about us?



# Confidentiality Agreement

During the course of my work/services with PeaceHealth, its affiliated entities, or entities that have been granted access to PeaceHealth confidential information (collectively referred to as "PeaceHealth"), I may develop, use, maintain, or have incidental contact with or access to patient information, employee information, and/or business information that is confidential.

#### I understand and agree that:

- Information related to patients, caregivers (employees), providers, financial data, and/or any other information pertaining to PeaceHealth business or proprietary information in any form including paper records, oral communication, email, audio or video recordings, and electronic displays ("Confidential PeaceHealth Information") is the property of PeaceHealth and is to be considered strictly confidential unless specified otherwise.
- The obligations set forth in this agreement as well as applicable policies continue beyond the end of my relationship with PeaceHealth.
- This agreement is valid for all individuals with access to PeaceHealth information.
- When my relationship with PeaceHealth is terminated, I will not retain or transfer any PeaceHealth information in any form unless provided permission to do so by PeaceHealth's Vice President for Organizational Integrity.
- Subject to PeaceHealth's Policy for Reporting and Investigating Concerns or Suspected Violations (<u>Document #101.38.36</u>), violation of this Agreement, PeaceHealth policies, policy compliance rules, and procedures regarding the confidentiality, privacy, and security of Confidential PeaceHealth Information may constitute grounds for corrective action, up to and including:
  - o Loss of medical staff privileges,
  - Termination of access to PeaceHealth information systems,
  - o Termination of the contract or other terms of affiliation, and
  - Civil and/or criminal liabilities and penalties.
- I will access only the Confidential PeaceHealth Information needed to perform my work-related responsibilities.
- I may NOT access personal health information related to myself.
- I may NOT access personal health information related to my family members.
- I am NOT authorized to access or review the personal health information of my family members except for legitimate work-related purposes.
- I will electronically review only the type of information permitted through my established user account. I will not make use of another person's user account to gain greater access.

I understand that violations of PeaceHealth's policies and procedures include, but are not limited to:

- Accessing, using, or disclosing Confidential PeaceHealth Information that is not within the scope of the services I provide to PeaceHealth, or otherwise not permitted by written policy.
- Leaving confidential information in any form in an unsecured place or environment.
- Failure to properly secure a computer workstation when leaving the immediate vicinity.
- Disclosing computer system user ID and password combinations to any unauthorized person for any reason or using another person's computer system user ID and password combination.
- Discussing Confidential PeaceHealth Information in a public place or with persons not authorized to receive such information.

I understand and agree that I am solely responsible for knowing, understanding, adhering to and complying with the terms of the above agreement as well as applicable PeaceHealth policies, policy compliance rules, and procedures regarding the confidentiality, privacy, and security of Confidential PeaceHealth Information, and the Notice of Privacy Practices adopted by PeaceHealth.

Last Name (please pl	rint)	
eHealth:		
Medical Staff Member	☐ Clinic/Physician Office Name:	☐ Volunteer or  Board Member
Vendor or Contractor	☐ Other	
	Date)	
	☐ Medical Staff Member ☐ Vendor or	☐ Medical Staff  Member  Vendor or Contractor  ☐ Other

# **Orientation Information Quiz**

Na	me:		
1)	At PeaceHealth, our Code of Conduct is based on what?	_	
2)	I understand that I will be held accountable to the Standards of Behavioral Expecta in the orientation information. (Initial)	tions	s as outlined
3)	PeaceHealth Information in any form (electronic records, paper, oral communication kept strictly confidential. As a student, you may access PeaceHealth Information f		
4)	List the 5 violations of PeaceHealth's policies and procedures related to PeaceHeal  1. 2. 3. 4. 5.		nformation:
5)	Can a breach of the PeaceHealth Information policy/procedure be grounds for terr (Circle		tion? Y N
6)	I have read the Notice of Privacy Practices (NPP) document in the Appendix of materials and will maintain the integrity of PeaceHealth's responsibility regarding information. (Initial)		
7)	What do the acronyms RACE and PASS stand for in regards to a fire?		
8)	Where can you find information about hazardous substances used within your uni	t?	
9)	Standard Precautions are only for patients with a specific illness.	Т	F
10)	You do not need to clean your hands with gels or soap if you wore gloves.	т	F
11)	Blood and/or other bodily fluids can only enter your body through needle sticks.	т	F

- 12) If an exposure occurs, report it immediately to \_\_\_\_\_ and \_\_\_\_\_.
- 13) Where can you find the PeaceHealth patient care policies?
- 14) Match the following emergency codes with their meaning:

Code Purple	Α	Radiation/Hazmat
Code Red	В	Fire
Code Blue	С	Hostage/Weapons
Code Amber	D	Bomb Threat
Code Grey	E	Out of Control Patient
Code Silver	F	Cardiac/Respiratory Arrest
Code Orange	G	Infant/Pediatric Abduction

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# EMT Associates CNA 2 Course Enrollment Agreement, Disclosure Statement, and Policies Document

<b>COURSE BEGINNING DATE:</b>	COUR	SE END DATE:
COUNTED DEGINATION DIVINE		

#### **ADMINISTRATION OF EXAMS**

- 1. Daily quizzes in the classroom may be given covering the material in a written or oral format.
  - a. Grading will be pass/fail.
- 2. Clinical demonstration is graded on a pass/no pass.
- 3. The final exam will be given on the last day of class.
  - a. Exam will be monitored.
  - b. Exam will be an individual effort.
  - c. No cheating will be tolerated on exams.
    - Any cheating or falsification of documentation or skills will result in immediate dismissal without refund, a failing grade, as well as reported to OSBN.
  - d. The student who scores 75% or below will be given the opportunity to take another written final exam after they receive remediation. They will be allowed to retest at the discretion of the instructor.
  - e. Appeals will be handled by the program director whose decision will be final.
- 4. Grading scale is as follows:
  - a. A = 90% to 100%
  - b. B = 80% to 89%
  - c. C = 75% to 79%
  - d. D = 65% to 74%
  - e. F = below 65%

#### **ATTENDANCE**

- 5. Students are required to attend 100% of:
  - a. Classroom/Lab Hours
    - i. 60 Hours
  - b. Clinical Hours
    - i. 28 Hours
- 6. Punctuality is important.
  - a. You are expected to be on time for all classroom and clinical times.
    - i. If you are going to be absent or tardy you must call your instructor as soon as possible.
    - ii. If you miss 30 minutes or more of class time you must make up the time as scheduled with your instructor.
  - b. Make up Time:
    - i. Make up time will be charged at fee of \$50.00 per hour, due on the day of your scheduled make-up time.
    - ii. All make-up time must be completed within the program hours with instructor approval. See iii.
    - iii. In cases of extensive make-up time, you time must be completed within 4 months with director approval. Please see refund policy.

- 3. When working in the clinical area please meet your instructor in the designated area.
  - a. It is against OSBN and EMT Associates policy for you to be on the floor unless your instructor is present.

#### **BEHAVIORIAL EXPECTATIONS**

- 1. Respect and Courteous
  - a. Students will be respectful and courteous to all instructors, clinical supervisors, fellow classmates, clients, visitors, and site staff.
- 2. Honesty
  - a. Honesty is required!
  - b. Any cheating or falsification of documentation or skills will result in immediate dismissal without refund, a failing grade, as well as reported to OSBN.
- 3. Student will actively participate and cooperate with others in both lab and clinical experiences.
- 4. Drug and alcohol use is prohibited and will result in immediate dismissal without refund, a failing grade, as well as reported to OSBN.
- 5. Smoking is only allowed in designated areas.
- 6. Cell phones must be turned OFF during classroom/lab time.
  - a. You will however use your cell phone to contact your instructor in the clinical setting.
- 7. As guests in the clinical site, we will be subject to their behavioral expectation and dress codes.
  - a. You will review these expectations prior to clinicals, and sign you acknowledgement as part of your required file forms.
  - b. Clinical dress code includes:
    - i. All facilities require top in the color chosen by the clinical site and closed toed shoes.
    - ii. Some facilities may require tattoos to be coved at all times and/or facial piercings to be removed during clinical time.
- 8. Professional demeanor is expected at all times in the classroom and clinical sites.
  - This includes clean hair, neatly trimmed facial hair, control of body odor, no use of aromatic products (perfume, strong lotions, etc.)
- 9. HIPPA Confidentiality will be observed at all times.

#### **COURSE REQUIREMENTS**

- 1. Prerequisites: must be turned in 14 days before class begins.
  - a. Personal Verification
    - i. Unencumbered Oregon CNA 1 certificate.
      - 1. Your name is listed and Active on the registry.
    - ii. Drivers License
    - iii. Active Health insurance
      - 1. \*\*Peace Health REQUIRES that you have current health insurance coverage during your clinical time. We have made arrangements with Collura Benefits Consulting for reasonably priced health insurance. If needed, please contact him at 541-654-0598. He is located at 1126 Gateway Lp, St 116, Springfield, OR 97477 E-mail:
        - SALCOLLURA@COLLURABENEFITS.COM
    - iv. Active American Heart Association BLS CPR Card
  - b. Background Check and Drug Screen
    - i. Must be initiated prior to the first day of class
    - ii. Must be done at Any Lab Test Now
      - 1. Other companies will NOT be accepted
  - c. Clinical Rotation Forms Completed
    - i. Clinical Application

- ii. Confidentiality Agreement
- iii. Quiz
- d. Vaccination Records
  - i. MMR
  - ii. Varcilla
  - iii. Tdap
  - iv. Hepatitis B
  - v. Two Step TB Test
    - 1. 1st TB Test needs to be read within 48 to 72 hours or it needs to be redone.
    - 2. 2<sup>nd</sup> TB Test should be done 3-4 weeks after the first complete TST, but no sooner than 7 days after the first test. Test needs to be read within 48 to 72 hours or it needs to be redone.
    - 3. If your test reads positive you must obtain one of the following:
      - a. Negative chest x-ray report within the last 6 months
      - b. Negative QuantiFERON TB Gold in-tube (GFT-IT) Lab
  - vi. Annual Influenza Vaccine
    - 1. October 1 until March 30 MUST HAVE DOCUMENTATION FROM PROVIDER
    - Per our clinical site, you do have the option of declining the vaccine you have provider documentation of one of the two medical contraindications:
      - a. A severe allergic reaction to eggs or other vaccine components (anaphylaxis)
      - b. A history of Guillain-Barre Syndrome within 6 weeks after a previous influenza vaccination

#### 2. Classroom/Lab

- di. Attend 100% of classroom/lab time 60 Hours as defined by EMT Associates and OSBN.
- dii. Syllabus
  - i. Day 1 8:00AM to 6:30PM
    - 1. Topics Covered:
      - a. Interpersonal Skills
      - b. Communication
      - c. Pain Assessment
      - d. Documentation
      - e. Person Centered Care
    - 2. Skills Practiced:
      - a. Communication
      - b. Manual and Electronic Vital Signs
      - c. Orthostatic Blood Pressure
      - d. Pain Assessment
      - e. Documentation
      - f. Abbreviations and Medical Terms
      - g. Role Play Person Centered Care
  - ii. Day 2 8:00AM to 6:30PM
    - 1. Topics Covered:
      - a. Circulatory System
      - b. Respiratory System
      - c. Nervous System
    - Skills Practiced:
      - a. Telemetry and 12 Lead EKG
      - b. Incentive Spirometer
      - c. CPAP
      - d. Sx Nose and Oral Pharynx

- iii. Day 3 8:00AM to 6:30PM
  - 1. Topics Covered:
    - a. Mental Health
    - b. Immune System
    - c. Infection Control
  - 2. Skills Practiced:
    - a. Personal Protective Equipment
    - b. Obtaining rectal and nasal swabs
    - c. Setting up a sterile field
- iv. Day 4 8:00AM to 6:30PM
  - 1. Topics Covered
    - a. Digestive System
    - b. Promoting Nutrition and Hydration
    - c. Endocrine System
    - d. Diabetes
  - 2. Skills Practiced
    - a. Oral Suction
    - b. Tube Feedings
    - c. Ostomy Care
    - d. CBG
    - e. NG disconnection and reconnection
    - f. Hemocult
- v. Day 5 8:00AM to 6:30PM
  - 1. Topics covered:
    - a. Integumentary System
    - b. Musculoskeletal System
    - c. Promoting Functional Abilities
  - 2. Skills Practiced
    - a. Traction
    - b. Cast Removal
    - c. CMP Machine
    - d. Hot and Cold Compress
    - e. Use of Adaptive Devices
    - f. Changing Wound Vac Canisters
- vi. Day 6 8:00AM to 6:30PM
  - 1. Topics Covered
    - a. Care of the Surgery Patient
    - b. Urinary System
    - c. Reproductive System
  - 2. Skills Practiced
    - a. Empty, Measure, and Record Output of JP and Hemovac
    - b. SCD's
    - c. UC from Catheter Port
    - d. Discontinue Foley
    - e. Bladderscan

- c. Students are expected to actively participate in all classroom/lab activities.
- d. Assignments are to be completed.
  - i. Home work as assigned.
  - ii. Small group participation
- e. Quizzes (pass/fail)
- f. Skills check list (pass/fail)
- g. Final exam (75% or more as per Administration of Exams policy).

#### 3. Clinical Experience

- a. Attend 100% of classroom/lab time 28 Hours as defined by EMT Associates and OSBN.
- b. Students are expected to actively participate in all clinical experiences.
- c. Skills checklist (pass/fail)
- 4. Maintain patient confidentiality per HIPPA standards.
- 5. No disciplinary actions of dishonesty.

#### **BACKGROUND CHECKS**

1. Background checks will be evaluated per the clinical site policies and procedures.

#### 2. Criminal history check:

- a. Application to be submitted to Any Lab Test Now.
- b. EMT Associates will accept all results from Any Lab Test Now.

#### 3. Drug screen:

- a. Application to be submitted to Any Lab Test Now.
- b. EMT Associates will accept all results from Any Lab Test Now [under special circumstances We will accept results from an approved Lab]
- 4. Drug screen and background fees are the responsibility of the student. EMT Associates has no input as to the policies of the company conducting the screening. Any disagreement in findings is between the student and the company providing the service.
- All results will be released to EMT Associates which will hold the information in confidence.
   Students will be notified if their background check does not meet the clinical site policies and procedures.
- 6. Failure to pass the drug screen or background check will result in a refund of tuition if paid prior to the beginning of class.

#### **DRESS CODE**

- 1. Good personal hygiene
  - a. Controlled body odors
  - b. Good oral hygiene
  - c. Short, neat, clean fingernails. NO acrylics
  - d. No odor of tobacco
- 2. No perfume/cologne or highly scented lotions or deodorants
- 3. Conservative makeup
- 4. Long hair must be contained. Please wear it up, pulled back in braids or pony tail.
- 5. Limited jewelry
  - a. Watch with second hand encouraged
  - b. Engagement ring/wedding band and small post earrings are allowed
  - c. Facial rings/loops/studs are not allowed per hospital policy.
- 6. Uniform required for clinical.
  - a. Maroon scrub top
  - b. Black or navy blue pants.
  - c. Shoes cannot have open heels or toes.
- 7. Photo name tag to be worn at all times in the clinical practice site.
- 8. Clean, neat casual dress is appropriate for classroom and lab
  - a. (Uniforms are not required in the classroom)

#### **Meals and Breaks**

- 1. Classroom/Lab
  - a. There will be two fifteen minute breaks.
  - b. Lunch break is 30 minutes.
  - c. There are restaurants nearby, or you may bring your own to class.
    - i. There is a refrigerator and microwave on site.
- 2. Clinical Area
  - a. There will be two fifteen minute breaks.
  - b. Lunch break is 30 minutes.
  - c. You are required to take you break when your CNA does.
  - d. If you plan to leave the building you MUST inform your instructor.

#### **PARKING**

- 1. Classroom
  - a. There is free parking at the Gateway Office Plaza.
- 2. Clinical
  - a. Parking is available in the employee parking lot at the south end of RiverBend with parking permit.
  - b. You will be given a form called VEHICLE PARKING REGISTRATION. Return completed form to Security and Parking Services to receive your temporary parking permit. This department is located in the main lobby of RiverBend.

#### Safety in the Clinical Setting

- 1. Do not get a patient up by yourself. You must work with your assigned preceptor.
- 2. Wear PPE as appropriate
- 3. Hand washing for all possible C-Diff is mandatory
- 4. Gel before and after patient care
- 5. Never wear gloves out of the room clean or dirty.

6. Use Gait Belt when transferring or ambulating a patient, unless contraindicated.

#### **TUITION AND CLASS FEES**

- Tuition

 Includes non-refundable registration fee of \$150, textbook, face shield or safety goggles & 1 surgical mask daily for class

\$995

Drug Screen and Background Check

\$ 95

Vaccines and TB Test

\$ 25 - \$100 \*Approximately

*TOTAL*: \$1,090 - \$1,190

- 1. No refunds available for absences, but makeup sessions may be arranged for valid reasons such as: Illness, family emergency, prearranged absence per attendance policy.
  - a. Make up Time:
    - i. Make up time will be charged at fee of \$50.00 per hour, due on the day of your scheduled make-up time.
    - ii. All make-up time must be completed within the program hours with instructor approval. See iii.
    - iii. In cases of extensive make-up time, you time must be completed within 4 months with director approval. Please see refund policy.
- 2. Refunds
  - a. 100% refund if written cancellation is received 3 business days prior to start of class
  - b. NO refund on the first day of class or if you no show to class
  - c. NO refund if you are dismissed from class per Administration of exams policy
- 3. Drug screen and background fees are the responsibility of the student. EMT Associates has no input as to the policies of the company conducting the screening.
  - a. Drug Screens are to be obtained per the Drug Screen Policy.
  - b. Background Checks are to be obtained through the Criminal History Checks Policy.
  - c. Failure to pass the drug screen or background check will result in a refund of tuition if paid prior to the beginning of class.

#### **CONTACTING OSBN:**

You can reach the Oregon State Board of Nursing by phone (971-673-0685) or

at: Oregon State Board of Nursing:

17938 SW Upper Boones Ferry Rd.

Portland, Oregon 97224-7012

www.oregon.gov/OSBN



# **Student Acknowledgment of EMT Associates CNA 2 Course Enrollment Agreement, Disclosure Statement, and Policies Document**

l,	nave received, read a	and understand the disclosures	statement,
(Print Name)			
enrollment agreement, and progr	am policies of EMT Associa	ates.	
Signature		Date	
Print Name			

# Student Orientation Welcome to PeaceHealth

The need for healthcare providers in the future continues to grow. New technologies and medical breakthroughs are broadening the skills needed in the workforce. It is an exciting time to pursue a career in healthcare!!

Thank you for considering PeaceHealth as part of your educational experience. We appreciate the opportunity to serve our community by encouraging and supporting the development of future healthcare workers!

The following material is to assist in orienting you to our organization prior to participating in a clinical experience. If you have any questions as a result of reviewing this information, please contact your placement coordinator for assistance.

Again...Welcome!

#### **Our Mission**

We carry on the healing mission of Jesus Christ by promoting personal and community health, relieving pain and suffering, and treating each person in a loving and caring way.

#### **Our Core Values**

#### Respecting Individual Human Dignity and Worth

We respect the dignity and appreciate the worth of each person as demonstrated by our compassion, caring, and acceptance of individual differences.

#### **Stewardship**

We choose to serve the community and hold ourselves accountable to exercise ethical and responsible stewardship in the allocation and utilization of human, financial and environmental resources.

#### Collaboration

We value the involvement, cooperation and creativity of all who work together to promote the health of the community.

#### **Social Justice**

We build and evaluate the structures of our organization and those of society to promote the just distribution of health care resources.

#### **Our Vision**

Every person receives safe, compassionate care; every time, every touch.

#### PeaceHealth Code of Conduct

#### Organizational Integrity helps you align values and conduct by:

- Creating a desirable workplace in which you feel respected and valued
- Providing ethical standards for business and clinical practice
- Offering education so that you understand your ethical, professional and legal duties
- Providing a process to address your questions and report concerns
- PeaceHealth's Code of Conduct is based on our Core Values:

#### Respect

To respect the inherent dignity and value of every person. To live out this value, we will:

- ✓ Listen to and consider the suggestions and ideas of our coworkers.
- ✓ Maintain and protect the confidentiality of patient, employee and business information.
- ✓ Treat each other equally and avoid discrimination against any person for any reason.
- ✓ Refuse to tolerate any form of harassment or workplace violence.
- ✓ Always act in accordance with this PeaceHealth Code of Conduct.

#### Stewardship

To be mindful of our limited resources while sustaining the earth. To live out this value, we will:

- ✓ Exercise responsible stewardship of human, physical, financial and environmental resources.
- ✓ Protect and prevent misuse of PeaceHealth's assets for the good of the healthcare ministry.
- ✓ Refrain from using PeaceHealth business information for our personal gain.

#### **Social Justice**

To provide health care service to all even if they cannot pay. To live out this value, we will:

- ✓ Advocate for a just system.
- ✓ Create a healthy workplace that fosters community and promotes the common good.
- ✓ Provide care for all persons regardless of their ability to pay.

#### Collaboration

Partnership, teamwork, cooperation. Collaborative caregivers allow all to express their viewpoints and do not criticize others as having "bad ideas." To live out this value, we will:

- ✓ Encourage caregiver participation.
- ✓ Share our knowledge and expertise with others.
- ✓ Support and respond to organizational needs.
- ✓ Encourage a team approach in accomplishing objectives.
- ✓ Involve caregivers in the planning and decision making process who will be affected by current and future decisions.

# PeaceHealth at a Glance



PeaceHealth, based in Vancouver, Wash., is a notfor-profit Catholic health system offering care to communities in Washington, Oregon and Alaska. PeaceHealth has approximately 16,000 caregivers, a multi-specialty medical group practice with more than 800 physicians and providers, a comprehensive laboratory system, and 10 medical centers serving both urban and rural communities throughout the Northwest. In 1890, the Sisters of St. Joseph of Peace founded what has become PeaceHealth. Today, PeaceHealth is the legacy of its founding Sisters and continues to serve communities when invited to do so with a spirit of collaboration and stewardship. This is The Spirit of Health—The Spirit of PeaceHealth. For more information, visit www.peacehealth.org.

## Our Mission and Values

#### **OUR MISSION**

We carry on the healing mission of Jesus Christ by promoting personal and community health, relieving pain and suffering, and treating each person in a loving and caring way.

#### **OUR CORE VALUES**

#### Respect

We respect the dignity and appreciate the worth of each person as demonstrated by our compassion, caring and acceptance of individual differences.

#### **Collaboration**

We value the involvement, cooperation and creativity of all who work together to promote the health of the community.

#### **Stewardship**

We choose to serve the community and hold ourselves accountable to exercise ethical and responsible stewardship in the allocation and utilization of human, financial and environmental resources.

#### **Social Justice**

We build and evaluate the structures of our organization and those of society to promote the just distribution of health care resources.



# Our Networks of Care

#### **Northwest Network**

- 1 PeaceHealth St. Joseph Medical Center Bellingham, Washington
  - Licensed beds: 253
  - Level II Trauma Center
- 2 PeaceHealth Peace Island Medical Center

Friday Harbor, Washington

- Critical Access Hospital
- Licensed beds: 10
- 24-hour Emergency Room
- 3 PeaceHealth United General Medical Center

Sedro-Woolley, Washington

- Critical Access Hospital
- Licensed beds: 97
- Level IV Trauma Center
- 4 PeaceHealth Ketchikan Medical Center

Ketchikan, Alaska

- Critical Access Hospital
- Licensed beds: 25
- Long-term care beds: 29

#### Columbia Network

5 PeaceHealth St. John Medical Center

Longview, Washington

- Licensed beds: 346
- Level III Trauma Center
- 6 PeaceHealth Southwest Medical Center

Vancouver, Washington

- Licensed beds: 450
- Level II Trauma Center

#### **Oregon Network**

7 PeaceHealth Sacred Heart Medical Center at RiverBend

Springfield, Oregon

- Licensed beds: 338
- Level II Trauma Center
- **8** PeaceHealth Sacred Heart Medical Center, University District

Eugene, Oregon

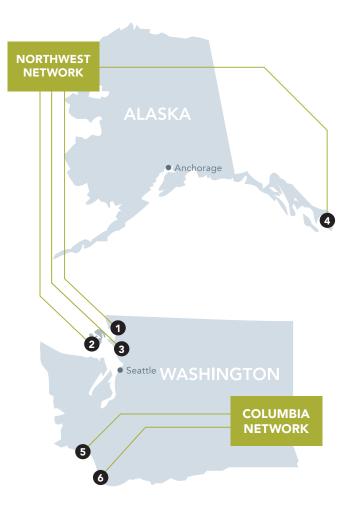
- Licensed beds: 104
- **9** PeaceHealth Cottage Grove Community Medical Center

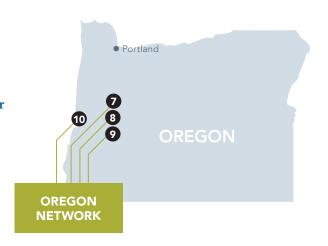
Cottage Grove, Oregon

- Critical Access Hospital
- Licensed beds: 14
- 10 PeaceHealth Peace Harbor Medical Center

Florence, Oregon

- Critical Access Hospital
- Licensed beds: 21
- Level IV Trauma Center





# PeaceHealth Sacred Heart Medical Center University District

1255 Hilyard Street Eugene, OR 97401 541-686-7300



PeaceHealth Sacred Heart Medical Center, University District provides community-based health services, including 24-hour emergency medical care, rehabilitation and inpatient medical and behavioral health treatment. The PeaceHealth Sacred Heart University District campus recently relocated its Behavioral Health Services unit, to a new 25,684-square-foot facility with 35 private rooms, 20 of which are secure. University District is the site for some of our most groundbreaking programs, including a medical education collaboration with Oregon Health & Science University and Intensive Outpatient Behavioral Health Services programs.

#### **Major Medical Services**

- Emergency Department
- Inpatient Medical Unit
- Acute Care for Elders
- Regional Infusion Center
- Oregon Rehabilitation Center
- Behavioral Health Services
- Home Care and Hospice

#### Facts & Figures, July 2014 to July 2015

Licensed beds
Medical staff and other providers 866
Employees
Volunteers
Inpatient admissions 2,750
Outpatient clinic visits
ED visits

#### Reporting

Visit the PeaceHealth Community Health Needs Assessment webpage



# Community

Eugene-Springfield is the second-largest metropolitan area in Oregon. Home of the University of Oregon, Eugene boasts cultural amenities typical of much larger cities, from the Jordan Schnitzer Museum of Art to the world-famous Oregon Bach Festival.



# PeaceHealth Sacred Heart Medical Center at RiverBend

3333 RiverBend Drive Springfield, OR 97477 541-222-7300



PeaceHealth Sacred Heart Medical Center at RiverBend is a state-of-the-art tertiary care medical center located in Oregon's picturesque Willamette Valley. PeaceHealth Sacred Heart at RiverBend provides a patient-centered, healing environment with a strong focus on patient safety and clinical outcomes. The private patient rooms are designed to maximize access to the 181-acre site's spectacular views of the McKenzie River, tree groves, hills and farmland.

#### **Major Medical Services**

- Bariatric Center
- Cancer Care
- Childbirth Services and Neonatal Intensive Care
- Emergency & Level II Trauma Center
- Oregon Heart & Vascular Institute (comprehensive cardiac and vascular care, with hybrid OR)
- Hyperbaric Center and Surgical Critical Care
- Orthopedics, including ortho trauma and joint replacement programs
- Pediatric/Adolescent Care Unit
- Primary Stroke Center Certification
- Gamma Knife Center
- Trauma and a broad range of Surgical Services, including minimally invasive

#### Facts & Figures, July 2014 to June 2015

Licensed beds	34/
Labor and delivery suites	16
NICU capacity	36
Operating rooms	25
Medical staff	959
Inpatient admissions	26,394
Outpatient clinic visits	106,377

#### **Awards**

- Recognized by the American College of Surgeons
  National Surgical Quality Improvement Program for
  meritorious outcomes for surgical patient care for the
  last three consecutive years.
- Ranked one of the 97 best hospitals in the United States for joint replacements by the Centers for Medicare and Medicaid Services (CMS).
- Received the American Heart Association/American Stroke Association's "Get with the Guidelines" Gold Plus Quality Achievement Award for 2015.
- ↑ Named one of the top 100 hospitals in the nation for women's health by Becker's Hospital Review.



# Community

Eugene-Springfield is the second-largest metropolitan in Oregon. Home of the

University of Oregon, Eugene boasts cultural amenities typical of much larger cities, from the Jordan Schnitzer Museum of Art to the world-famous Oregon Bach Festival.



# **Our History**

# **Margaret Anna Cusack**

"A Christian must have a very vocal political character, out justice, make peace...feed the hungry to live out the Gospel of Jesus Christ."

Sister Margaret Anna Cusack was born to an aristocratic family of English origin in Coolak, County Dublin, Ireland. Her father was a doctor who was dedicated to the service of the poor.

seek

Margaret Anna Cusack Foundress of the Sisters of St.. Joseph

She was raised under the precepts of the Church of England and viewed social justice through Christian concepts. In 1853 she joined the Anglican Sisterhood. She quickly became disillusioned with the petty concerns of the group. Upon leaving five years later she wrote, "I do not believe in offering the gospel of talk to starving people."

In 1858 she became a convert to the Roman Catholic Church. One year later she entered the Order of Poor Clare nuns and took the name Mother Francis Clare.

The year 1861 brought Mother Clare to Kenmare in Ireland where she founded the first convent of the Poor Clares in the west of Ireland. A talented writer, she published on the issues of social injustice. Her writings and actions focused on advocacy of women's rights including equal pay, equal opportunity for education and legal reform to give women control of their own property.

The Irish Famine of 1879 plunged the country into crisis. Margaret Anna responded by raising great sums of money to feed the poor. By now her outspoken ways and success at feeding the poor made her the target of government and church leadership. Church and public resistance forced her to shut down her Famine Relief Fund and look to England for support of her vision.

Her next effort was to establish another convent and to propose development of an industrial school for women...complete with a day center for their children.

In 1884 Margaret Anna founded the Sisters of St. Joseph of Peace. Seeking funds to support her sisters' work with women and children, in 1885 she set off for America. Soon after arriving, she established a home for migrant women who, upon arrival in New York, often found themselves to be homeless and jobless.

The success of the Sisters of St. Joseph of Peace spread. By 1890 the Sisters were being asked to go west to serve the needs of frontier settlements springing up in the Pacific Northwest. It was in August of this year that four Sisters set off from Jersey City, New Jersey on what was to be the beginning of PeaceHealth, and the continuation of the vision of Margaret Anna Cusack.

# The Sisters of St. Joseph of Peace

A rich heritage and mission dating back to the late 1800's stands behind PeaceHealth. The timeline below summarizes the evolution of the health care ministry of the Sisters of St. Joseph of Peace in the Pacific Northwest.



## **Historical Timeline**

1923	Margaret Anna Cusack founds the Sisters of St. Joseph of Peace in Nottingham England
1885	Sisters come to America (New Jersey) committed to alleviating injustices, providing health care to the sick and injured, and educating young women
1890	Two sisters go west to Fairhaven, Washington (now Bellingham)
1891	St. Joseph Hospital opened in Fairhaven, Washington (now Bellingham)
1896	Mater Misericordiae Hospital founded in Rossland, British Columbia (closed 1969)
1901	Sacred Heart Hospital founded in Greenwood, British Columbia (closed 1918)
1916	Seward General Hospital established in Seward, Alaska (closed 1919)
1916	St. Anthony's Hospital established in Wenatchee, Washington (Sold in 1974 to Central Washington Deaconess and is now Central Washington Hospital)
1922	Little Flower Hospital founded in Ketchikan, Alaska
1936	Sacred Heart General Hospital established in Eugene, Oregon
1943	St. John's Hospital established in Longview, Washington
1963	Ketchikan General Hospital leased from the City of Ketchikan, Alaska
1976	Hospitals incorporated under the Sisters of St. Joseph of Peace, Health and Hospital Services Corporation- later to be renamed PeaceHealth System.
1984	St. Helen's Hospital, St. Helen's Oregon (discontinued in 1990)
1984	Snoqualmie Valley Hospital, Snoqualmie, Washington (discontinued in 1991)
1986	Marianwood established, Issaquah, WA. (transferred to the Sisters of Providence Health System in 1996)
1989	Peace Harbor Hospital, Florence Oregon
1999	Cottage Grove Community Hospital, Cottage Grove, OR
2000	El Salvador Health Mission
2005	Building began at RiverBend, Springfield, Oregon
2008	Sacred Heart Medical Center at RiverBend opened in Springfield, Oregon
2009	PeaceHealth officials announce they have signed a purchase agreement on a 22-acre site near Friday Harbor Airport where they plan to build a new Integrated Medical Center and Critical Access Hospital, scheduled to open in the summer of 2012

# **Safety Orientation Information**

## **General Security and Safety**

# **Objectives**

- Introduce information regarding our security and safety programs that ensures the safety of patients, visitors and caregivers.
- Know how to locate security and safety policies and procedures.
- Describe the procedure for documenting incidents or accidents.
- Understand your role in identifying security and safety hazards.



#### **Security**

Participants should make sure to secure all personal valuable (purses, etc.) while on site. Leave valuables not required for the performance of duties at home. If you have a security issue, contact our Regional Security Communication Center

Emergency: 541-222-7111

Non-emergency: 541-222-6555

## Safety Programs

PeaceHealth has a safety program in place to ensure a safe environment for patients, visitors and caregivers. This program is in compliance with federal and state laws in addition to our accrediting organization.

Each unit/department has a safety representative and a safety notebook that contains all region-wide and unit specific safety policies and procedures. Check with your unit preceptor for the location of this information.

# Response for Experience-related Injuries And Exposures to Blood and Body Fluids



If you sustain an injury or exposure, follow these steps:

- Treat the injured area immediately. If further evaluation and treatment is needed, go to the Emergency Department or Urgent Care. Services from these departments will be delivered at established Clinical Facility charges.
- Report the injury immediately to your direct supervisor of the clinical area you are assigned and to your instructor, whether or not medical attention is required.

**Instructors:** Notify Learning and Development at 541-686-7125 of any injuries or incidents as soon as possible. Leave your name, school affiliation, students name, type of injury and any treatment needed. Clinical placement coordinators will follow-up with you and the student.



Follow-up will be directed by PeaceHealth Learning and Development in collaboration with the student, instructor, affiliate and others as necessary.

# Hand Hygiene

The single most important measure to reduce transmitting microorganisms.

#### **Hand Washing**

#### Alcohol-based hand rubs

Required if hands have contact with . blood, body fluids, or are visably soiled

More effective in reducing number of viable bacteria and viruses\*.

Required after contact with patients with diarrhea or vomiting

More accessible at the point of care, i.e. inside and outside every patient room, in hallways of patient care areas, etc.

After use of the restroom

Causes less hand irritation and dryness

Done before eating and afterward

\*Exception: Clostridium difficile must wash with soap and water.

Students must use appropriate techniques when cleansing their hands. To be optimally effective, an appropriate volume of alcohol-based hand rub or soap must be applied to cover all surfaces of the hands and fingers.

Hand washing	Alcohol-based hand rubs	
Scrub with friction and soap produce lather for 20 seconds before rinsing	Cleanse before and after contact with patients, patients' environment, and using gloves (if hands are not visably soiled)	
Dry hands with clean paper towel Use paper towel to turn off hand operated faucet	Rub over all surfaces of both hands, thumb, and fingers until dry	

Hand hygiene is a must to prevent infections in patients, visitors and healthcare providers - including yourself!



# **Personal Protective Equipment**

Personal Protective Equipment (PPE) protects you from contact with potentially infectious materials. The appropriate type of protective equipment for a given task depends on the degree of exposure anticipated. Under normal work conditions, PPE must not allow potentially infectious materials to contact your work

clothes, street clothes, skin, or mucous membranes.

PeaceHealth will provide you with PPE and in addition, will clean, repair, replace, or dispose of PPE at no cost to you.

## Types of protective gear include:

- 1. <u>Gloves</u> wear gloves any time contact with blood, other body fluids, mucous membranes or nonintact skin is likely.
  - Masks. Face and Eye Protection use these when splashes or sprays
    of blood or other body fluids are likely. Use respiratory protection
    when caring for patients who have or may have an infection that
    can spread through the air. Students- including nursing

students- are NOT to be assigned patients with airborne infections!

 Gowns and Protective Apparel – if splashing of blood or other body fluids is likely, wear a gown and appropriate apparel, such as boots or leg coverings.

# **Proper Use of Personal Protective Equipment:**

Be sure to use PPE correctly for maximum protection.

- You must use appropriate protective equipment each time you perform a task.
- Your gloves and other PPE must fit properly.
- Your equipment must be free of physical flaws that could compromise safety.
- If, when wearing equipment, your equipment is penetrated by blood or other potentially infectious materials, remove it as soon as possible.
- Before leaving the work area, remove all protective equipment and place it in a designated area or container for washing, decontamination, or disposal.

# Hazard Communications (MSDS) Material Safety Data Sheets

# **Objectives**

- Know how to locate information on hazardous substances in your work area
- Know what specific information you need to review and remember from the MSDS
- Know what OSHA requires regarding container labeling

#### <u>MSDS</u>

Information provided on the MSDS includes:

- Product name
- Hazardous ingredients
- Physical & chemical data
- Health hazard data
- Fire, reactivity & explosive data
- Primary routes of entry
- Permissible exposure limits
- Cancer hazards
- Precautions, spill/leak procedures
- Personal Protective Equipment (PPE)
- First aid & emergency procedures



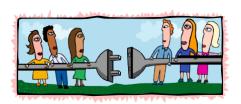
# **Participant Responsibilities**

- Required to read unit appropriate MSDS policies when necessary
- Remember information that is pertinent to materials handled frequently
- Know location of unit MSDS manual

# **Electrical Safety**

#### **Bio-Med/PHMG Engineer Inspection**

All electrical equipment brought into the facility by staff or patients (radios, hair dryers, fans, heaters, etc.) must be checked out by the unit Safety Representative prior to its use. When it has been approved for use, a dated and signed sticker is affixed.



Any electrical equipment purchased for patient care use must be checked out by Bio-Med or PHMG Engineering Staff.

#### **Lock-Out Tag**

If any electrical equipment malfunctions or shocks someone, Bio-Med or the PHMG Engineers will place a LOCK-OUT/tag out label on it. Do net remove a LOCK-OUT/tag out label or use any equipment that has been tagged as a LOCK-OUT.

LOCK -

## **Medical Safety Device Act (MSDA)**

A medical device is broadly defined to include nearly everything that we use to care for or treat patients, for example, gauze pads, lasers, and CAT scanners.

# <u>Participant responsibilities in the event of an injury caused by a medical</u> device:

- Remove faulty equipment from service and send it for repair **before** it can cause an injury.
- In the event of an injury, notify your immediate supervisor and instructor.
- Keep the involved device set up for further review (keep the item set up exactly as it was when the event occurred).

# **Emergency Codes**

Critical Information! Know these code designations.

#### **Code Blue Code Gray** To call a code: **Code Amber** Code Red Dial 7111 (and/or, for fire, pull a red fire alarm station). Give the code and location. STAY ON THE LINE and confirm the code and location. Cardiac/Pulmona Patient or Infant/Pediatric abduction · Take fire extinguisher ry Arrest Visitor Most codes are and go to the location · Leave the room. · Get help. announced in this When calling the · Call 7111 and cancel the · Shut hallway and patient format: Code and code, give · Begin CPR alarm OR.. approximate age of Location. Code Amber · Rescue those in danger. · Special code · Call 7111 child. includes the child's age. · Alarm: confirm at 7111 or Code Gray-Patient team responding Go to your assigned pull a red fire alarm pull Code Gray-Patient Team responds which includes Examples: to call will assume position. station. Code Red, 4 Main ACLS role. - Contain the fire: close Ask suspects to stop, house supervisor, charge Code Amber, 2 (child's doors, windows and shut do not physically nurse, security and others age), Pediatrics. off medical gases. Code Gray-Visitor for all detain. · Extinguish and/or individuals who are NOT Report description prepare to Evacuate. patients and direction to Security responds security. · Remain at your post until all clear. Disaster Plan Trauma Alert **Code Purple Code Orange** Internal or Bomb threat. Radiation/Hazmat Weapon/Hostage External Trauma Alert · If NOT on your Do NOT attempt · Leave the room. Internal; inside hospital Can only be called unit, do NOT go to clean up. such as flooding or · Shut hallway & by the ED Charge power outage the location. · Shut hallway and patient doors. External; Nurse or House patient doors. · If on your unit, be · Security responds. catastrophic event Supervisor. available to aid in a · A Hazmat team outside hospital such as · Trauma Team search. will respond. plane crash, earthquake · Called only by a House responds. · Security responds Supervisor. and directs the · Know your unit disaster search. Come to work at your normal time unless · Report to your supervisor. Don't "call in" to get information.

# Fire Procedures General Instructions

- 1. Code Red is the code used for a fire, smoke, or the smell of something burning.
- 2. All persons must be familiar with the location of fire alarm pull boxes, indicator panels, fire fighting equipment, and medical gas control valves in their working area. Participants should also be aware of the evacuation route in their work area.
- 3. All persons are expected to participate in monthly fire drills by closing all doors that enter corridors and familiarizing themselves with the fire procedures at their facility. Doors are to remain closed until the "ALL CLEAR" is given.
- 4. The senior person takes charge until Fire Response Team or Eugene Fire Department personnel arrive.
- 5. Avoid use of telephone and elevators.
- 6. Do not use elevators in building where fire is suspected under any circumstance until the "ALL CLEAR" is given.
- 7. Send one person with an extinguisher to assist if the fire is in a patient care area in an adjacent unit or department. If you have only one extinguisher in your department you are exempt from this support requirement. —Adjacentll includes the floors above, below, and on either side. Personnel sent should remain on the scene until the "ALL CLEAR" is given or the person in charge releases personnel.
- 8. Personnel not assisting at the scene of a fire should remain in the work areas until the "ALL CLEAR" is announced.
- 9. The fire alarm system will automatically page the location of an alarm. The page will contain a dual announcement tone, repeated three times, followed by a location announcement, repeated three times. The page will emanate from both the red fire alarm speaker/strobe units and the hospital paging system volume controls will affect the volume of that part of the fire announcement.

# Fire Safety – "Code Red"

If You See Significant Smoke or Fire:

# **RACE**

- R = <u>Rescue</u> all people in immediate danger. Always evaluate the risk and determine if you can rescue the victim without becoming a victim yourself.
  - Rescue and Alarm can happen simultaneously. If you are involved in a detailed Rescue, be sure someone sends an alarm to get the help you need quickly.
- A = <u>Alarm</u>: pull a Red Fire Alarm Pull Station (if it has not already been pulled), or call 7111 (or your location's emergency phone number) to confirm the event. If possible, perform this step at the same time as the Rescue. Alert your co-workers in the area by using the term "Code Red." Do <u>not</u> shout, "FIRE!"
- C = <u>Contain</u> the fire by closing doors and windows, and shutting off Medical Gas (oxygen, air, nitrogen, and nitrous oxide). Attend to patients who need oxygen.
  - Shut off the medical gas only for the room in which fire or smoke appears. A manager, the local fire department, EMS, or someone from the hospital's Incident Command System will turn off larger medical gas valves located in hallways.
- E = <u>Extinguish</u> the fire if it is small (e.g., a small trash can fire in a patient's room).

or

**Evacuate**: If the fire is too large to extinguish, evacuate yourselves, visitors, and patients from the area.

- Administrative (non-patient care) areas should be evacuated in the presence of an ongoing alarm, significant smoke, or fire.
- Patient care areas should be made ready for evacuation ordered by a manager, the local fire department, EMS or someone from the hospital's Incident Command System.

# How To Initiate A Fire Alarm (Code Red)

Pull a Red Fire Alarm Pull Station, OR call 7111 (or your location's emergency phone number) and tell the operator there is (or could be) a fire at your location.

- If you smell smoke, investigate before you initiate an alarm.
- STAY ON THE LINE and confirm the code with the operator.

#### Alarms can also be initiated automatically or accidentally:

- A child or prankster pulls a pull alarm.
- Sensors detect smoke, but the smoke is from a benign source (e.g., popcorn burned in the microwave).
- Smoke detectors react to excessive dust.
- Someone accidentally knocks a sprinkler head.

#### How to Respond:

If the Code Red alert is in your unit or department:

- Grab a fire extinguisher.
- Go to the location of the alert.
- Investigate.

At SHMC RiverBend: If the alert is from an adjacent unit (above, below, in front, in back, to the left or right of your unit), send one person with a fire extinguisher to assist.

At SHMC University District: If the alert is from another unit (anywhere on the UD campus), send one person with a fire extinguisher to assist.

Note: At either campus, if your unit has only one fire extinguisher, your unit is exempt from this requirement.

- If the event is clearly NOT a fire emergency (e.g., smoke from burned popcorn), call 7111 (or your location's emergency phone number) and tell the operator what you see.
- If you are <u>not sure</u> there is a fire emergency, call 7111 (or your location's emergency phone number) and tell the operator what you see.
- If the event clearly IS a fire emergency (you see flames or a significant amount of smoke), then R A C E.

## **Evacuation**

- Under most circumstances, evacuation from a unit or department is extremely unlikely. However, you should always be prepared with a plan, and know your evacuation route!
- The —R in R A C E (Rescue, Alarm, Contain, Extinguish or Evacuate) involves evacuating anyone in immediate danger.
- A manager (or their designee), the local fire department, EMS or anyone from the hospital's Incident Command System can call for evacuation.
- Non-patient care areas should evacuate immediately in the presence of an ongoing alarm, fire, or significant smoke.
  - If you hear an evacuation order, evacuate —horizontallyll first, to an adjacent —smoke compartment.ll

## **Adjacent Smoke Compartment**

- —Smoke Separation II is a building design that breaks the building up into —Smoke Compartments. II
  - If you see double doors between units, you know you are in separate —smoke compartments. If Fire stops, firewalls, and fire doors are intended to contain a fire, thus limiting the spread of fire and smoke for a limited period of time. If smoke is penetrating through smoke compartments, evacuate —vertically II down stairwells.
    - 1. Evacuate ambulatory patients and guests first.
    - 2. Use special equipment called —stair sleds | to evacuate non-ambulatory patients.
  - If you are in an adjacent unit, begin to prepare patients for evacuation until you hear an —all-clear. Il This means taking action to prepare for evacuation without compromising patient safety.
    - 1. Avoid using the phones, if possible.
    - 2. Avoid using the elevators. If fire or smoke is detected within a few feet of the elevators, they immediately go to the ground floor. Only fire crews can reactivate them.

#### Fire Extinguishers

Remember **PASS** when using a fire extinguisher:

**P** = Pull the pin

 $\mathbf{A} = Aim$ 

**S** = Squeeze

**S** = Sweep

**P**ull the pin. Some fire extinguishers may require you to release a lock or to press a puncture lever. Hold the extinguisher upright and pull.

**A**im. Stand back from the fire. Aim at the base of the fire. If there are several fires, work on the one closest to you.

**S**queeze. Keep the extinguisher upright. Squeeze the handles together to discharge.

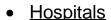
**S**weep. Sweep the spray from side to side. Focus on spraying the base of the fire.

# **Emergency Preparedness/Disaster Plan**

#### <u>Participant</u>

#### **Responsibilities** On

#### Site:



- 1. Remain on duty until excused.
- 2. Report to person in charge of department for assignment.
- 3. Department heads and others with specific HEICS (Hospital Emergency Incident Command System) responsibilities assume roles.

#### Medical Groups and Clinics

- 1. Urgent Care may need to accommodate larger numbers of patients with minor illnesses or injuries.
- 2. Physicians may need to report to the hospital if requested by the medical director.
- 3. All others will respond as needed. PHMG is **not** designated to receive disaster victims.

# During an emergency, remember to:

- 1. Use stairways.
- 2. Know where exits are and what the posted evacuation plan is for your area.
- 3. Limit use of phones as much as possible.
- 4. Wear ID badge.

#### If not on site:

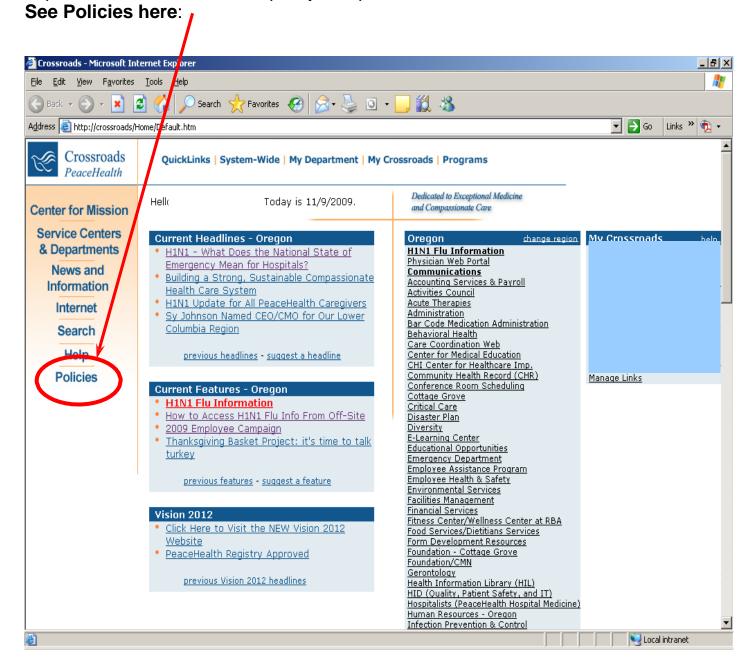
- 1. Listen to the Emergency Broadcast System for updates and instructions.
- 2. Do not come in unless called and instructed to do so.
- 3. Otherwise, report at the next scheduled time.



# **Quality and Safety**

# **Locating Patient Care Policies**

For information about safety policies and procedures or clinical policies and procedures, visit the hospital intranet site —Crossroads. In addition, some departments have unit-based policy and procedure.



# **Notice of Privacy Practices**

The Notice of Privacy Practices (NPP) describes for patients how we use and/or disclose their health information.

All PeaceHealth workforce members (employees, volunteers, students, etc.) with access to patient information must read this information (see appendix).

# **Our Responsibilities Regarding Patient Health Information**

We are required by law to: maintain the privacy and security of patient health information; give patients this Notice of our legal duties and privacy practices with respect to the information we collect and maintain about them; and follow the terms of the Notice that is currently is effect.

<u>Students:</u> To ensure privacy and security of patient health information, do not include any of the following patient identifiers in any paperwork you submit to your instructor or share in class:

Names (initial are acceptable)
Street address and/or city
Birth date (age is acceptable)
Admission and/or discharge dates, as well as date of death Telephone numbers
Electronic mail addresses
Social Security numbers
Medical Record numbers
Account numbers

Full face photographic images or any comparable images

# **Organizational Integrity**

#### **Email**

PeaceHealth E-mail system users shall use PeaceHealth's e-mail in an ethical, lawful, respectful, and appropriate manner. E-mail messages are subject to other PeaceHealth policies, including those relating to harassment and discrimination.

Users should consider that e-mail messages can be forwarded, intercepted, printed, and stored by persons other than intended recipients.

Misdirected e-mail communications containing confidential information shall be reported to your preceptor, instructor and the Department of Learning and Development immediately.

PeaceHealth's e-mail shall not be used in a manner that is inconsistent with its mission and values, or violates PeaceHealth policies. Unacceptable uses include any use to:

- Harass, intimidate, or threaten another person.
- Access or transmit copyrighted materials, trade secrets, proprietary financial information, or confidential information including protected health information without proper authorization. Sending confidential information outside the PeaceHealth system is prohibited unless the encryption system is utilized.
- Further unlawful or inappropriate uses such as commercial purposes, personal gain, or the advancement of individual views.
- Bypass or breach security measures, or attempt to intercept an e-mail without proper authorization.
- Impersonate another user or mislead a recipient about your identity.
- Access or distribute obscene, sexually explicit, abusive, libelous, or defamatory material, in graphic or text form.
- Solicit, initiate, or transmit chain e-mail, except as provided for by PeaceHealth and regional policies. E-mail will not be used for private or commercial business, benefit, or gain.

Engage in a use that interferes with the operation of PeaceHealth computer network services, with work performance, or the operation of a department.

Any other use that is determined to be contrary to the mission and values of PeaceHealth or violations of any laws or regulations.

All messages and documents created, sent, received, and stored on PeaceHealth email are the property of PeaceHealth. PeaceHealth reserves the right to access and monitor electronic communications, including e-mail communications.

Students who engage in unacceptable practices while using PeaceHealth's e-mail system, or who violate policies relating to personal use, may be subject to corrective/disciplinary action up to and including discharge from clinical experience.

#### **Internet use**

PeaceHealth provides Internet access as a business tool to connect users to the most current work-related information, to facilitate access to knowledge resources, and to improve job performance. Internet access and use shall be consistent with PeaceHealth's mission and values, and comply with regional and system-wide policies.

**Unacceptable Uses.** Internet access shall not be used in a manner that is inconsistent with PeaceHealth's mission and values, or violates PeaceHealth policy. Unacceptable use of PeaceHealth access to the Internet includes, but is not limited to:

- a. Messages, documents and images from Internet sites that may contain, but are not limited to, sexually suggestive or explicit material, racial slurs, or content that may be harassing, or offensive to a person's gender, age, sexual orientation, religious beliefs, political affiliation, national origin, disability, veteran's status and any other basis prohibited by local, state, or federal law.
- Sending (uploading) or receiving (downloading) confidential information, copyrighted materials, trade secrets, proprietary financial information, or similar materials without prior authorization by department Manager or Director.
- c. Sending protected health information (PHI) that is not encrypted. Until encryption is commonly available for transmission of information sent outside the PeaceHealth system, confidential information shall not be sent over the Internet. Communications sent to the Centers for Medicare and Medicaid Services shall be encrypted in accordance with HCFA Internet Security Policy.
- d. Any use for personal benefit or gain, sales purposes, or the advancement of individual views including partisan political views, using your PeaceHealth affiliation. An example is running a private business using PeaceHealth resources including time.
- e. Use that interferes with work performance or the operations of a department.

f. Unauthorized downloading of software.

**Violations**. Students who access Internet sites in a manner that is inconsistent with limited personal use, or contrary to PeaceHealth's mission, values, and policies, or productivity expectations, will be subject to corrective/disciplinary action, up to and including dismissal from clinical experience.

## **Confidentiality information**

The delivery of high quality patient care and the maintenance of an efficient healthcare organization requires the accumulation, transmission, and reporting of a wide variety of information. PeaceHealth's core values direct us to safeguard the confidentiality of this information. Information related to patients, employees, providers, financial data, and /or any other information pertaining to PeaceHealth business or proprietary information is to be considered strictly confidential unless specified otherwise. Access to confidential information is permitted only on a need-to-know basis and as permitted by law.

- 1. Access to clinical patient information shall be limited to the time period during which the user is directly involved in the patient's care, or as otherwise or necessary for their job duties.
- 2. When accessing confidential information, access should be limited to the minimum necessary to perform the intended task.
- 3. Special considerations and/or precautions may be required related to certain types of protected information as defined by state and federal law. These include, but are not limited to: HIV, mental health, chemical dependency, and genetic testing.
- 4. Confidential information released to third parties should be limited to the minimum necessary to accomplish the intended purpose.
- All students whom have access to PeaceHealth confidential information are required to comply with all applicable procedures and related policies of PeaceHealth that support, implement and enforce this policy.
- 6. Even with written authorization, access to any person's online health information, except your own, is prohibited other than for purposes related to legitimate work-related tasks. This applies to family members' or friends' information, and that —surfingl online health records for supposedly educational purposes are prohibited.

PeaceHealth confidential information is contained in different media including, but not limited to:

- Paper records
- Microfilm/microfiche
- Verbal communications
- Audio or video recordings
- Electronic Displays and electronically-generated reports

# Social Media

In the age of Facebook, YouTube, LinkedIn, Plaxo, Twitter, MySpace, delicious, Google Buzz, sports blogs, political blogs, mommy blogs and all the other Internet social networking soap boxes that stand ready to record your every rant for the whole world to read. Again, and again, and again — 24/7.

**So here's an important reminder:** Every PeaceHealth caregiver, contractor and student is obligated by PeaceHealth policy and the federal Health Insurance Portability and Accountability Act (HIPAA) to protect the confidentiality of patient information. Here are some things to think about before unloading onto your Facebook page (or any other social networking forum):

- Although access to specific Facebook pages may be limited to "friends," be aware that the content you post can easily be copied and redistributed widely.
- Angry patients and family members can go to Facebook, indicate that they are employed by PeaceHealth and then get a listing of all PeaceHealth employees with a Facebook page.
- If PeaceHealth becomes aware of content posted on a social networking site by a PeaceHealth employee, contractor or student that can be determined to apply to a specific patient, it will be pursued as a breach of confidentiality.
- If a patient learns about a specific posting and complains to the federal Office for Civil Rights, the OCR is obligated to conduct a thorough investigation.
- If you are found to have violated HIPAA privacy regulations by posting patient information on social networking sites (even without names!), you are personally liable for fines up to \$50,000 for each violation.
- Even if a specific HIPAA violation is not found, you are still at risk for a civil lawsuit if patient identity can be guessed from a specific posting.

Speaking of civil lawsuits, statements made on Facebook or other social networking websites are not privileged and, therefore, not protected from discovery in a lawsuit. Such statements can be used against the offending person and against the hospital as evidence of breach, negligence or whatever wrongful conduct is being claimed in the lawsuit.

Our Code of Conduct addresses our need to be stewards of PeaceHealth's reputation. Caregivers may be viewed as ambassadors of PeaceHealth even in off-duty hours in those situations where a caregiver's behavior directly connects to their work life and/or reflects negatively on PeaceHealth.

Please think carefully before discussing workplace issues and events on FaceBook and other social networking sites. Maintaining professional discretion is the right thing to do, and it's what our patients and coworkers expect of us.

#### ALSO:

Your personal cell phone should be off duty while you are on a unit or in a department. Unless you are on a break, use of a personal cell phone — for conversation, texting, updating your Facebook page or whatever — is not allowed.

Thank you for taking the time to read the orientation material. While in a PeaceHealth facility, you will be responsible for this information at any time. If you have any questions, please ask your instructor first before calling us at 541-686-7125.

We hope you enjoy your clinical experience. Good luck!