Get to Know Parkview

Helping you feel more comfortable at Parkview
Welcome to Parkview

Parkview Health is northeast Indiana’s largest healthcare provider, serving a population of more than 820,000. We’re also one of the region’s largest employers, with more than 8,000 employees.

More important than our size, is our mission: to improve the health and well-being of our communities. Parkview Health is a not-for-profit health system. This means we put our patients and our community first.

Our dedication to this mission is evidenced in our eight hospitals, including our newest, the Parkview Regional Medical Center. More than just a hospital, this newly constructed, nine-story facility includes a 446-bed hospital and multiple specialty centers, including heart, cancer, women’s and children’s health, and orthopedics. This revolutionary facility, and its health-centered campus, will improve access to healthcare for the entire region. It’s a shining example of what happens when a healthcare system invests in the community for generations to come.

We are glad you are here. At Parkview we value our students and see you as future professionals, as you build your knowledge and talents to serve the families in our region. Thanks for giving us this opportunity to invest in your development. We invite you to learn about our organization and get to know our dynamic team of physicians, co-workers and associates. And most importantly, get to know our patients.

This Student Orientation Handbook contains essential information that will help guide and prepare you for safe, high-quality, and rewarding student experiences. Your success is our success. Please carefully study this handbook and all other assigned materials so that you will be best equipped to function and thrive in our dynamic environment. Please remember to take the required Student Orientation Test at the end of this handbook. You will be glad you invested your time. We look forward to learning with you. Welcome to Parkview.

www.parkview.com | Not for profit, all for you.
We are a *family* of outstanding facilities serving Northeast Indiana and Northwest Ohio.

- Parkview Regional Medical Center
- Parkview Hospital Randallia
- Parkview Behavioral Health
- Parkview Ortho Hospital
- Parkview Home Health & Hospice
- Parkview Huntington Hospital
- Parkview LaGrange Hospital
- Parkview Noble Hospital
- Parkview Whitley Hospital
- Parkview Oaks & Parkview Pointe
- Parkview Physicians Group
MISSION
Parkview Health will improve the health and well-being of our communities.

VISION
Parkview Health will be your partner in health.

VALUES
Trust - We have mutual respect and confidence in others.
Quality - We put trusted care into action through technology, education, and best practices in medicine.
Flexibility - We accept change in innovative and proactive ways.
Teamwork - Working together, we actively and respectfully listen to each other’s ideas. We communicate openly, honestly, and constructively.
Stewardship - We manage the care of our patients as if they were members of our family and we manage financial and material resources as if they were our own.
I am Parkview Health
   We are proud of our association with Parkview and the mission to serve our community.

Resolve Issues
   We prevent and resolve issues to maintain customer confidence.

Exceed Expectations
   We seek to understand and exceed our customers’ service expectations.

Service Excellence
   We consider individual customer needs and provide service with respect, compassion and integrity.

Professionalism
   We demonstrate pride in the professionalism of our personal appearance and our facility.

Enhance Performance
   We improve the processes that deliver service to our customers.

Confidentiality
   We guarantee confidentiality and respect all aspects of customer privacy.

Together, We’re Better
   We partner together to enhance the quality of service we deliver to our customers.
Core Measures

At Parkview, we address patient needs with a quality approach to achieve the best outcomes for patient care. We apply and monitor *Core Measures* for the following conditions:

- **AMI** (Acute Myocardial Infarction)
- **CHF** (Congestive Heart Failure)
- **SCIP** (Surgical Care Improvement Project)
- **CAP** (Community Acquired Pneumonia)
Diversity is…

…the multiple ways in which we, as individuals and groups, identify ourselves and are identified by others.

…an extension beyond our gender, race, ethnic origin and nationality to encompass how we also differ in terms of our age and generational influences, lifestyles, religions, thinking styles, physical abilities, education, and development.

…about people themselves … their differences, similarities, and unique characteristics as groups and individuals.  

--Eduardo Gonzalez, Jr., Cornell University
Dimensions of Diversity

Each person

- is unique and multifaceted
- displays primary and secondary dimensions of diversity
- displays multiple characteristics within each dimension
Obvious Differences

Diversity encompasses obvious differences among us such as:

- Age
- Gender
- Race
- Eye Color
- Hair Color
- Abilities/Disabilities
- Education
- Values
- Culture
- Marital Status
- Religion
- Geographic Location

Not-so-Obvious Differences

Diversity also reveals differences among us that are not so obvious:

- Education level
- Ethnicity
- Sexual orientation
- Religion
- Political views
- Family structure
- Veteran status
- Socio-economic status
- Learning style
Other Cultural Differences

Other significant cultural differences among us include…

- Language
- Practices
- Customs
- Food
- Clothing
- Superstitions
- Holiday Celebrations
- Dating Rituals
- Art
- Music
- World View
Cultural Considerations

What we need to understand about patients:

- How they understand life processes
- How they define health and illness
- What they do to maintain wellness
- What they believe is the cause of illness
- How healers cure and care for them
- How the cultural background of the caregiver influences the way care is delivered.

Adapted from the American Nurses Association
Our Communities Are Diverse

- Northeast Indiana has:
  - an established Amish community
  - a growing Hispanic community
  - a large and expanding Burmese community
  - relocation services for international refugee groups
  - over 85 different native languages spoken among student families in the local school districts
  - A multigenerational workforce and customer base
A Culture of Inclusion

Inclusion is…

…fosters working together in harmony around a common belief and value system…**teamwork**

…about the extent to which people both have the opportunity and feel welcome to fully be a part of and contribute to an organization.

--Eduardo Gonzalez, Jr., Cornell University
Your Need to Know Info

Information to keep you and your coworkers safe on the job

PARKVIEW
Emergency Codes

Blue  cardiac arrest
Red   fire
Green bomb threat
Gray  violent behavior
Pink  infant/child abduction
Orange  disaster
White severe weather
Yellow (38500)  info system failure

Report to Ext. 1911

FIRE

R Rescue
A Alert
C Contain
E Extinguish
P Pull (the pin)
A Aim (Nozzle at the base of the fire)
S Squeeze (the handle)
S Sweep (towards the base of the fire)
**Badges**

As is appropriate for your area, you may be issued a Parkview Student ID Badge. Please wear your Parkview Student ID Badge at all times in addition to your school ID Badge.

- Badges should be worn above the waist and be visible to customers and coworkers.
- Badges must be returned by the end of your last day to your school instructor, Parkview Student Services, or the Human Resources office at your location. A fee will be charged for lost and/or unreturned badges.

For parking information please visit the Parking and Badges link on the Parkview website.
Tobacco-Free Parkview

- All Parkview Health campuses, facilities, buildings and properties are tobacco free.
- All staff, students, associates, and customers are included in this policy.
- Attire should be free of smoke odor.
Belongings

Please bring only what is necessary. On your first day you will be shown areas in your department for you to store coats, hats, boots, umbrellas, etc. At some locations, additional student locker areas may be available (please bring your own combination lock). Avoid bringing purses, electronics, or items of extreme value.

An ATM machine is available in the hospital facilities.

Food and beverages may be purchased from the dining and café areas or vending machines.

Students may also bring food items from home. Most department staff break rooms have microwaves and refrigerators that you may use. Per health regulations, please label all refrigerator items with your name and date.
Cell Phones and Mobile Electronic Devices

Students may not use personal cell phones or electronic devices in patient care or business areas at any time.

Exceptions:

- Clinical students may use PDA’s, smart-phones, and tablets on clinical units (except for critical care and telemetry monitored areas where prohibited use is posted) for the sole purpose of accessing learning applications and completing assignments that are directly associated with their school clinical experience.

- Location of usage must be limited only to the conference rooms and medication areas. Students may not utilize them in direct patient contact areas or in the presence of patients. Students may not allow patients to utilize the devices.

- Camera, video, and recording functions on the devices may not be used at any time on the premises. Adherence to HIPAA and confidentiality standards must be maintained.

Facility leadership reserves the right to prohibit the use of these devices at any time should clinical or safety issues arise that would warrant such action.
Belongings @ PBH

At Parkview Behavioral Health (PBH) there are some additional safety considerations regarding items.

Things that cannot come into the PBH building:

- No food.
- No cell phones (*see exceptions).
- No lighters.
- No medications (except heart meds).
- No sharp items.
- Check keys for sharp items (knives).
- Check nail clippers for sharp items.
- No pocket knives.
- No guns or firearms.

Thank you for your cooperation.
Cell Phones and Electronic Mobile Devices @ PBH

Students may not use personal cell phones or electronic devices in patient care or business areas at any time.

At Parkview Behavioral Health:

- Clinical students may use PDA’s, smart-phones, and tablets at PBH for the sole purpose of accessing learning applications and completing assignments that are directly associated with their school clinical experience in behavioral health.

- Location of usage must be limited only to the conference rooms and medication areas. Students may not utilize them in direct patient contact areas or in the presence of patients. Students may not allow patients to utilize the devices.

- Telephone function on the devices may not be used at any time inside the facility.

- Devices must be presented to security officer upon entrance to the building.

- Camera, video, and recording functions on the devices may not be used at any time on the premises. Adherence to HIPAA and confidentiality standards must be maintained.

Facility leadership reserves the right to prohibit the use of these devices at any time should clinical or safety issues arise that would warrant such action.
Social Media

Parkview Health recognizes that on-line communications such as blogs, web-based discussion forums, and personal websites can be a highly-effective tool for exchanging information and a source of social interaction. In fact, Parkview Trauma Prevention’s Don’t Text & Drive page has thousands fans, and a Parkview Health Facebook page and Twitter profile have been launched.

In talking with employees around the health system, the Marketing Department has received many questions and comments about social media. Many of you have been using it for years, and some of you have a lot of questions.

The guidelines below were created to help you better understand the Parkview Health social media policy, and provide additional information regarding areas where employees have question. These guidelines apply to employees and students who create or contribute to blogs, wikis, social networks, virtual worlds, or any other kind of social media.

Whether you log into Twitter, Wikipedia, MySpace or Facebook pages, or comment on online media stories — these guidelines are for you.

Please keep in mind that our overall goal is simple: to participate online in a respectful, relevant way that protects our reputation and of course follows the letter and spirit of the law.

General tips:

- Be smart about protecting yourself and your privacy. What you publish is widely accessible and will be around for a long time, so consider the content carefully.
- Familiarize yourself with the privacy settings (if applicable) for networking sites you choose to use. These allow you to choose who you want to share your information with. Note that these can change often.
- Safety experts recommend avoiding posts and status updates that may announce to readers that you are not at home, as they believe this can increase risk of thefts.
- An area where there has been increased participation is commenting on on-line news stories related to Parkview. Some tips for participating:
  - Be transparent and state that you work at Parkview. Your honesty will be noted in the social media environment.
  - Know your facts before commenting. Never represent yourself or Parkview in a false or misleading way. All statements must be true and not misleading; all claims must be substantiated.
  - Post meaningful, respectful comments — in other words, avoid remarks that are off-topic or offensive.
  - When disagreeing with others' opinions, keep it appropriate and polite.
Scope of Learning

Student participation in learning experiences at Parkview must follow strict guidelines to ensure safety of our customers, students, co-workers, associates, and environment.

- **Job Shadowing experiences** are observational in nature only and under the direct supervision of a Parkview co-worker.

- **Internship experiences** are observational and may include appropriately selected activities under the direct supervision of a Parkview co-worker.

- **Clinical experiences** may include appropriately selected activities under the direct supervision of school faculty and a Parkview co-worker. Specific clinical guidelines will be provided prior to start.
Hospitals have many hazards. Safety depends on everyone observing proper precautions and reinforcing precautions with others.

Prevent Falls

- Watch and be aware, especially going around corners, use mirrors. Make sure electrical cords are not where someone can trip over them.
- Report spills so they can be cleaned up immediately. Do not clean up chemicals or blood.
- Keep equipment on one side of hall, so hallways are kept clear as possible for fire and emergency safety.
- Know your responsibility during an emergency situation. Know the hospital emergency codes.
- Use proper body mechanics when lifting items.

Broken/Damaged Equipment

- Broken equipment must be taken out of service immediately.
- Report all broken equipment to the department manager immediately.
- Do not attempt to repair broken equipment.
Safety | Electrical & Chemical

- **Electrical Safety - Report to the Department Manager:**
  - Frayed electrical wiring
  - Electrical equipment that “flickers”, smells hot, or sparks
  - Do not handle any of the above equipment. Report any electrical concerns to Dept. Manager.

- **Chemical Safety - Report to the department Manager:**
  - Spilled solutions/chemicals –
    - Do not attempt to clean the spill yourself.
    - Keep others from walking through the spill.
  - Unmarked containers
  - Leaking containers
  - Fumes/odors

First Aid information on the chemicals used in the department are located in the **Safety Data Sheet (SDS)** manual found online on Team.Parkview.com.
Globally Harmonized System (GHS)

- **What is the GHS?**
  - Common approach to defining and classifying hazards, and communicating information on labels and SDSs
  - Provides an infrastructure for national, comprehensive chemical safety programs
  - Covers all hazardous chemical substances, dilute solutions and mixtures

- **Benefits of the GHS**
  - Enhance protection of humans and environment
  - Creates universal labels and symbols for hazardous material
  - Lists health and environmental hazards, as well as physical hazards

- **What is the SDS?**
  - Provides a standard format of information
  - Provides comprehensive information about chemical substances
  - Source of information about hazards and to obtain advice on safety precautions

**See next two slides for new GHS Pictograms and SDS format.**
GHS Pictograms

- Chemicals are classified 1-4 by level of hazards
  - Classification of 1 is the most hazardous
  - Classification of 4 is the least hazardous
SDS Format

1. Identification
2. Hazard(s) Identification
3. Composition/Information on Ingredients
4. First-aid Measures
5. Fire-fighting Measures
6. Accidental Release Measures
7. Handling and Storage
8. Exposure Control/Personal Protection
9. Physical and Chemical Properties
10. Stability and Reactivity
11. Toxicological Information
12. Ecological Information
13. Disposal Considerations
14. Transport Information
15. Regulatory Information
16. Other Information

For more information visit:
Eyewash stations and chemical showers are available in high risk splash exposure areas in our facilities. In nursing departments at PRMC, they are located in soiled utility rooms.

If you receive a splash exposure to the face or eyes, go immediately to an eyewash station. Activate water stream, hold your eyelids open, and flush for 15 minutes.

If you receive a chemical splash exposure to the body, go immediately to a safety shower. Stand under the shower, pull the handle, and flush the body for 15 minutes. You may also need to remove contaminated clothing. Co-workers can assist with providing you hospital scrubs or other attire to change into.
Safety | Injuries

What to do in the event of an injury to yourself or others

- All injuries must be reported to your department manager immediately.
- If you are witness to, or are involved in an injury or a “near miss,” an event report will need to be completed. Your department manager, co-worker or instructor can assist you with the event report.
- If you notice a potentially dangerous situation, report it immediately.
- If you are the one injured, please follow your school protocol for seeking treatment. In most cases, treatment at our facilities will be considered as a patient visit that will be billed to the student or the school.
Safety | Back Care

- **Standing**
  - When you stand for a long time, your body weight makes the discs in your spine compress, which causes your lower back to arch and puts stress on your muscles.
  - Put one foot on a footrest – and alternate your feet every few minutes. Having one foot higher will flatten the arch in your back and reduce the stress on your muscles.
  - If you can’t find an object to use as a footrest, stand with one foot forward and your knees slightly bent – alternate which foot is forward every several minutes.

- **Sitting**
  - Sitting puts more pressure on your spine than standing.
  - Move all the way back against the chair.
  - Keep your feet on the floor.
  - Adjust height of the chair so that your knees are slightly higher than your hips.
  - If you can’t adjust the height of your chair, you can use a book or other object to raise your feet.
  - Change Positions (standing/sitting) often.

- **Lifting**
  - Lifting places the most stress on the lower back.
  - Stand close to the object and keep feet shoulder width apart.
  - Bend your knees, keep back aligned, and use your legs to lower yourself.
  - Hold the object close to you.
  - Use your legs to stand up.
Safety | Security

Guidelines that make a difference:

Dial 1-911 or 9-911 in an EMERGENCY SITUATION.
Hospital buildings : 1-911
All other buildings : 9-911

- Store your purse or other valuables in a secure place and always lock your car.
- Wear identification badges at all times when on Parkview Health property.
- Inquire when a visitor looks lost, in need of help, or is acting in a suspicious manner.
- Report suspicious persons or incidents to Security immediately.
- Do not prop open exterior doors nor allow unauthorized persons to enter through unauthorized entrances.
- Utilize security escorts when appropriate.
- When in doubt - call 1-911 or 9-911 and state concerns.
Safety | Workplace Violence

What is Workplace Violence?

- Violent act, including physical assaults and threats of assault, directed toward persons at work or on duty.
- An employee/volunteer/student who receives a threat or has knowledge of a threatening or violent situation will take appropriate action as follows:
  - **Non emergency** – Notify the supervisor/manager of the department as soon as possible.
  - **Emergency** or **Crisis** – If the threat is imminent or if violent behavior is in progress, call the Security Department:
    - If in a hospital facility dial **1-911**.
    - Other buildings dial **9-911**.
<table>
<thead>
<tr>
<th>Code Name</th>
<th>Code Color</th>
<th>Description</th>
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<tbody>
<tr>
<td>Red</td>
<td>Fire</td>
<td>Cardio Pulmonary Arrest</td>
</tr>
<tr>
<td>Blue</td>
<td>Green</td>
<td>Bomb threat</td>
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<tr>
<td>Orange</td>
<td>White</td>
<td>Severe weather</td>
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<tr>
<td>Grey</td>
<td>Pink</td>
<td>Violent Behavior</td>
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<td>Pink</td>
<td>Yellow</td>
<td>Infant/child abduction</td>
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<td>Information systems down</td>
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**Severe weather**

Severe weather includes tornado watch or warning, snow/ice emergency, flooding, etc. The operator will announce "Code White. The national weather service has issued a ...."
Safety | Emergency Exits

In the hospital facilities, *EXIT signs* are lighted and easily visible. Just look in just about any direction, and you will see either an EXIT sign or an EXIT sign with a directional arrow.

Follow the directional arrow to the nearest exit. Use the exit to get outside and away from the building.
Safety | Fire

All fire information is available in your unit’s Emergency Preparedness Manual. Please check with your Department Manager/Supervisor as to your responsibilities in a Code Red situation.

FIRE (Code Red)
Know where the fire pull stations are in your area. Know where the fire extinguisher is in your area. Know what the evacuation plan is for your area.

If you see or suspect a fire: RACE
R Rescue
A Alert (dial 1-911 or 9-911)
C Contain
E Extinguish

Fire alarm pull stations are used to notify staff of a fire in the area. Fire alarm pull stations are typically located at Exit stairwells and at nurse stations.

Safety | Fire Extinguishers

How to use, 4 easy steps:

Pull pin.
Aim at the base of fire.
Squeeze lever.
Sweep quickly using a side to side motion (8-10 feet from the fire).

If a fire cannot be safely contained with 1 extinguisher, evacuate the area and leave the fire to the local fire department.
Safety | National Patient Safety Goals

At Parkview we focus on providing the safest care and environment for our patients. As part of the Joint Commission’s National Patient Safety Goals (NPSG) we work diligently to:

- Identify patients correctly
- Improve staff communication
- Use medicines safely
- Prevent infection
- Identify patient safety risks
- Prevent mistakes in surgery

We need your help to make sure these are provided.

For more information please visit
http://www.jointcommission.org/standards_information/npsgs.aspx
Parkview Health is committed to achieving optimal patient outcomes. At PRMC & Parkview Hospital, processes and standards have been identified to achieve such outcomes by utilizing a Rapid Response Team to assess and treat patients at the first sign of acute changes to their status.

- Acute change in heart rate
- Acute change in systolic blood pressure
- Acute change in respiratory rate
- Acute change in saturation
- Acute onset of neurological symptoms
- Acute mental status changes – unexplained seizure or agitation
- Acute change in conscious state
- Acute change in urine output
- Acute onset of cardiac chest pain
- Uncontrolled pain
- Uncontrolled bleeding
- Sudden dislodgement of tubes (chest, tracheal)
Safety | Preventing Patient Falls

At Parkview we focus on providing the safest care and environment for our patients. Students should help our team prevent patient falls. Patients are assessed for fall risk upon admission, at key intervals throughout their stay, and maintained on continuous fall observation. A patient’s fall risk score is displayed on their room’s whiteboard and documented in their health record.

**Morse Fall Scale**

In our facilities that have Epic as the electronic health record, we use the Morse Fall Scale. Patients are scored as Low Risk, Medium Risk, or High Risk. Medium Risk and High Risk patients must have fall alarms and always be assisted when walking and transferring between chairs and beds. They must never be left unattended when up or in the bathroom/shower, with the caregiver remaining at the patient’s side within arm’s length of the patient.

For more details, please visit [http://www.patientsafety.gov/SafetyTopics/fallstoolkit/media/morse_falls_pocket_card.pdf](http://www.patientsafety.gov/SafetyTopics/fallstoolkit/media/morse_falls_pocket_card.pdf)

**Schmid Fall Scale**

In our facilities that have Centricity or other types of health record, we use the Schmid Fall Scale. Patients are scored on a scale of 0-7. Patients with a score of 3 or higher must always be assisted when walking and transferring between chairs and beds (scores of 4 or higher require fall alarms). They must never be left unattended in the bathroom/shower, with the caregiver always at the patient’s side within arm’s length of the patient.
Safety | Prevent Spread of Infection

Practicing protective measures such as **Standard Precautions**, and **Personal Protective Equipment** (PPE) will reduce your risk of being exposed to bloodborne pathogens.

- **Standard Precautions**
  - All human blood and body fluids should be considered infectious, and precautions should be taken to avoid contact with these body substances.

- **Personal Protective Equipment (PPE)**
  - Personal Protective Equipment acts as a barrier between your skin and infectious agents. PPE should be worn any time there is a possibility that you may come into contact with blood or body fluids. Examples of PPE are: gloves, gowns, goggles, and surgical masks.

- **Observe signs…**
  - “Check with nurse before entering”, may indicate the patient or visitor needs special precautions, depending on the patient diagnosis and how the germs are spread. There are various ways in which infections are spread.
Safety | Hand Hygiene

Most infections are spread through the lack of hand washing. Wash your hands, even if you wear gloves.

- **Center for Disease Control (CDC) Guidelines – Handwashing**
  - Turn on warm water with a paper towel
  - Apply soap and water to hands
  - Rub your hands together vigorously for at least 10 – 15 seconds
  - Rinse your hands thoroughly
  - Turn off the faucet with a paper towel

- **CDC Offers Recommendation for Hand Sanitizing**
  - The CDC recommends the use of an alcohol-based hand rub in place of soap and water unless the hands are visibly soiled. Alcohol-based hand sanitizers are more effective, faster and cause less skin irritation than traditional hand washing. New alcohol foam dispensers are in place throughout Parkview Health. Please use soap and water hand washing when hands are visibly soiled, before eating, and after using the restroom.
Safety | Sharps

Exposure Prevention
- Precautions are also taken to prevent injuries caused by needles, scalpels, and other contaminated sharp instruments.
- Sharp objects are discarded in puncture-resistant containers.
- Other precautions to prevent exposure are:
  - Surfaces and equipment contaminated with blood or other potentially infectious material, that do not need to be sterilized, are cleaned and disinfected.
  - Infectious waste is placed in containers labeled with the biohazard symbol and of sufficient strength to prevent leaks, spills or breaks.

Exposure to an Infection
- In the event that a student is exposed to an infection, he/she must:
  - Cleanse the exposed area immediately
  - Notify the Instructor and Infection Prevention Nurse
  - Report the event to the manager of the department
  - Complete an Event Report as soon as possible
Safety | Transmission-Based Precautions: Airborne

- **Standard Precautions** must be used when caring for all patients. In **addition to** standard precautions, some infections require the use of **Airborne Precautions**.

- Because some germs can travel through the air on small particles and can remain in the air for a duration, **Airborne Precautions** will help protect from patients who have such infections as Tuberculosis (TB), Varicella (chickenpox), and Measles.

- **Steps:**
  - Place patient in private room, with private bathroom and special airflow mechanism.
  - Doors and windows to the patient room should be kept closed.
  - If TB is the suspected/confirmed organism, a respirator mask must be worn when in the patient’s room.
  - If Varicella or Measles is the suspected/confirmed organism, the facility approved mask must be worn.
  - Only essential staff/visitors should be allowed into the patient room (per facility policy).
  - Teach the patient to sneeze or cough into tissues.
  - Limit transport of patient, and have patient wear a surgical mask during transport outside of the patient room.
Standard Precautions must be used when caring for all patients. In addition to standard precautions, some infections require the use of Contact Precautions.

Because some germs can spread by direct or indirect contact (on hands, equipment, clothing), Contact Precautions will help protect from patients who have such infections as Scabies, Impetigo, Respiratory Syncytial Virus (RSV), MRSA, Clostridium difficile, and other skin and/or multi-drug resistant infections.

Steps:
- Place patient in private room, with private bathroom (refer to facility policy).
- Apply gloves before entering room.
- Wear gown when working directly with the patient or if your clothing will touch other objects or surfaces in the room. Gown must be removed before leaving the room.
- Change gloves and wash hands between procedures if your gloves have touched body fluid or substances. Gloves must be removed and hands washed before leaving the room.
- Family/visitors should be directed to wear gown and gloves (per facility policy).
- Limit transport of patient as much as possible. Wash the patient’s hands and change the linens and gowns before transporting them.
Safety | Transmission-Based Precautions: Droplet

- *Standard Precautions* must be used when caring for all patients. In addition to standard precautions, some infections require the use of *Droplet Precautions*.

- Because some germs can travel in wet droplets (approximately 3 feet when a person coughs, sneezes, or talks), *Droplet Precautions* will help protect from exposure from the patient and from any nearby surfaces exposed to the patient. Some infections requiring the use of Droplet Precautions include: Influenza, Pertussis (whooping cough), Mumps, Rubella, and Scarlet Fever

- **Steps:**
  - Place patient in private room, with private bathroom (refer to facility policy).
  - Wear mask when in patient room or when within 3 feet of patient (refer to facility policy).
  - Limit exposure to other patients, by keeping infected patient at least 3 feet away from others.
  - Family/visitors should be directed to wear masks and other PPE (per facility policy).
  - Limit transport of patient as much as possible. Have patient wear surgical mask during transport.
Safety | TB

All students must have a TB (tuberculosis) skin test prior to student experiences in our facilities.

TB tests may be obtained for a minimal cost at your nearest urgent care center, occupational health center, or private physician office.

The TB test result is valid for 12 months.

TB information is from ISDH website http://www.in.gov/isdh/22442.htm. This information was last reviewed September 3, 2009. All information is intended for public use. For more information, please refer to the Centers for Disease Control and Prevention: http://www.cdc.gov/tb/faqs/default.htm
What is tuberculosis (TB)?
- TB is a disease caused by bacteria that are spread from person to person through the air. Although TB usually affects the lungs, it can also affect other parts of the body, e.g., kidney, spine, and brain. Without proper treatment, TB can be fatal.

How is it spread?
- People with active TB disease of the lungs or throat can release TB bacteria into the air when they cough, sneeze, speak, or sing. These bacteria can stay in the air for several hours. Persons who breathe in the air that contains these TB bacteria can become infected if the bacteria reach their lungs.

What is TB infection?
- People with latent TB infection (LTBI) have TB bacteria in their bodies; however because the bacteria are not active, they are not sick. People with LTBI have no symptoms of active TB disease, and they cannot spread the bacteria to others. However, they may develop active TB disease in the future. Individuals with LTBI are often prescribed treatment to help prevent them from developing active TB disease.

What is active TB disease?
- People with active TB disease are sick because TB bacteria are multiplying and destroying tissue in their bodies. They usually have symptoms of TB disease, and people with active TB disease of the lungs or throat can spread the bacteria to others. They are prescribed drugs that can cure TB disease.
The symptoms of active TB disease of the lungs include:
- a bad cough that lasts 3 weeks or longer
- coughing up blood
- sweating at night
- fever
- pain in the chest
- weight loss
- weakness or fatigue
- chills

Who is at risk for TB?
- People with active TB disease are most likely to spread the germs to people they spend time with every day, such as family members or coworkers. If you have been around someone who has active TB disease, see your health care provider right away. Some people are more likely than others to develop active TB disease once they have been infected, e.g., children under five, people with HIV infection, people who were recently exposed to someone with active TB disease, and people with certain medical conditions.

How will I know if I have TB?
- See your health care provider. There is a simple test that can help detect TB infection. The Mantoux tuberculin skin test is performed by injecting a small amount of fluid (called tuberculin) into the skin in the lower part of the arm. A person given the tuberculin skin test must return within 48-72 hours to have a trained health care worker check the injection site for a reaction to the tuberculin. A positive tuberculin skin test only shows that a person has been infected with TB germs. It does not show whether or not the person has developed active TB disease. Other tests, such as a chest x-ray and a sputum sample, are needed to determine whether the person has active TB disease.
How can TB be treated?

- Active TB disease can be cured by taking several drugs for 6-12 months. It is vital that people who have active TB disease take all of the medicine exactly as prescribed. If they stop taking the drugs too soon, they can become sick again. If they do not take the drugs exactly as prescribed, the bacteria that are still alive may become resistant to those drugs. TB that is resistant to drugs is harder and more expensive to treat. In some situations, health care providers meet regularly with patients who have TB to watch them take their medications. This is called directly observed therapy (DOT). DOT helps the patient complete treatment in the least amount of time by ensuring that the patient takes the medicines properly.

How can I keep from getting TB?

- Avoid close contact or spending prolonged time with known TB patients in crowded, enclosed environments, e.g., clinics, hospitals, prisons, or homeless shelters.
- Treatment of LTBI is essential to controlling and eliminating TB in the United States. Treatment of LTBI substantially reduces the risk that TB infection will progress to active TB disease. Certain groups are at very high risk of developing active TB disease once infected, and every effort should be made to begin appropriate treatment and to ensure those persons complete the entire course of treatment for LTBI.
Keeping it Private

Patient Rights, Security, and HIPPA
Patient Rights

- **Patients Rights at Admission** - allow patients/families to make decisions about treatment

- At admission patients must:
  - sign a **consent form** that gives a facility permission to administer services, procedures and treatments.
  - be given a written explanation of rights
  - be asked if they have an advanced directive (Federal Law requires asking all patients over 18). Any existing directive is to be placed in the patient's chart.

- **Treatments and Patients Rights**
  - Patients are entitled to know about their medical status and treatment.
  - Patients may refuse to accept treatment.
  - Patients must give consent before surgical and invasive treatments.
  - Patients must give written consent before participating in research projects.
  - Routine procedures do not require consents.
Patient Rights (cont.)

Patients should always receive considerate, respectful care and privacy.
- Knock and wait before entering
- Respect patient/family wishes
- Protect patient privacy and integrity
- Always respond to patients in a polite manner

Patients are entitled to know caregiver’s name and how to use the call button.

All patients have the right to the same quality of treatment. The facility must provide alternative forms for communication if necessary such as:
- Translators/Interpreters
- Braille documents
- Additional assistive communication devices

- Keep Patient's Treatments Private. Common Violations:
  - Charts left out
  - Posted information public can read
  - Unattended computer
- Do not speak to anyone about a patient's treatment unless necessary for his/her care.
- Patients have the right to safety and security: report any suspected abuse immediately.
- If a patient becomes violent or uncontrollable, the patient may require physical restraints
- Restraints are a medical decision and not to be used for discipline or convenience

- Patient's Rights During and After Discharge. Patient has right to:
  - file complaints (report any complaints immediately to the department manager)
  - questions/explanations about bills
  - keep recorder confidential after discharge (only authorized employees should have access to files)
  - copy of medical record, but original stays at the hospital
Who owns Patient Information?

- Medical records belong to the hospital or other care provider.

- However, the information contained in a medical record belongs to the patient.
Requirements for Protecting Patient Information come from:

- Federal laws and regulations
- State laws and regulations
- Parkview Health policies and procedures

Covered Entities

- Covered Entities include the following:
  - Health Care Providers (includes hospitals & physicians)
  - Health Care Clearinghouses
  - Health Plans

- Parkview Health and its affiliates must comply with HIPAA.
Protected Health Information (PHI)

- **PHI** is information that can be used to identify an individual.
- **PHI** is more than health information; it can include any information such as a patient’s name, address, social security number, age, date of birth, etc…
- **PHI** includes information sent or stored in *any* form; this includes electronic, paper and the spoken word.
- If it can be used to figure out who an individual is, it is PHI.
The Health Insurance Portability & Accountability Act (HIPAA) is a federal law.

HIPAA applies to most patient information.

HIPAA protects the privacy and the security of that information.

HIPAA applies to “Covered Entities.”
Under HIPAA there is a Privacy Rule and a Security Rule

- The Privacy Rule defines how Covered Entities may use and/or disclose patient information.
- The Security Rule requires Covered Entities to ensure the confidentiality, integrity and availability of patient information.
The Privacy Rule allows Covered Entities to use and disclose PHI for treatment, payment and health care operations.

The Covered Entity does not need to inform the patient or get the patient’s authorization for treatment, payment and health care operations.

Uses and disclosures of PHI for payment and health care operations are subject to the “minimum necessary” rule.

Covered Entities must make reasonable efforts to limit the use and disclosure of PHI for payment and health care operations to the minimum amount of information necessary to accomplish the intended purpose, removing personal identifiers to the extent possible.

Disclosure must be limited to those who need to know the PHI to do their jobs.

Curiosity is not a legitimate need to know.
HIPAA does not limit access to patient information for those who have a legitimate need to know the PHI to treat the patient.

The minimum necessary rule does not limit disclosures for patient treatment.

For disclosures other than for treatment, payment and health care operations, patient authorization is required.

Authorizations are written permission from the patient to disclose PHI. Authorizations must meet specific legal requirements.

Requests for release of health information with authorization should be referred to Release of Information (ROI) in Health Information Services (HIS).
HIPAA | Patient Rights

- The **Notice of Privacy Practices** must be presented to the patient upon registration (before providing care).
  - Describes how PHI will be used and disclosed.
  - Describes the patient’s rights.
  - Describes the Covered Entity’s duty to protect PHI.
  - Describes how the patient can file a complaint.

- Reading the **Notice of Privacy Practices** is a good primer on the Privacy Rule. Employees are encouraged to read it.

You can find the Notice of Privacy Practices on Team.Parkview/ Services/ Departmental/ HIPAA/ Notice of Privacy Practices.
HIPAA | Patient Rights

Visitors and Callers

- Health Care Providers may keep a directory that includes patient name, location in the facility, and general condition (not specific medical information).
- Health Care Providers must give patients the option of not being listed in the directory.
- If the patient chooses not to be in the directory, the provider may not acknowledge that the patient is hospitalized and may not disclose any information regarding the patient except as the patient may direct, or for treatment, payment and health care operations.
HIPAA | Patient Rights

Right of Access:
- Patients (or their legal representative) have a right to access, inspect and obtain a copy of their PHI.
  - Refer current patients to their attending provider.
  - After discharge refer requests to ROI in HIS. Requests must be in writing.
  - Requests may be denied if access would endanger life or physical safety (as determined by a physician).
  - Denial must be in writing with stated reasons.
- Employees and/or students who wish to access their own or family members’ medical information, must follow the same process as our other patients.

Request for Amendment:
- Patients have the right to request an amendment of their health information.
  - Requests will be managed by HIM.
  - Provider can deny the request if the information is deemed to be accurate.
    - Denial must be in writing/reasons for denial stated.
    - Patient can submit “statement of disagreement,” with request for amendment, denial, and statement of disagreement becoming part of record.
HIPAA | Patient Rights

Accounting of Disclosures:

- Patients have the right to request a list of disclosures of their PHI (other than disclosures made for treatment, payment, health care operations or as authorized).

  - Accountings do not include disclosures made before 4/14/03 (HIPAA Privacy effective date).
  - Accountings do not include disclosures made 6 or more years ago.
  - Request must be processed within 60 days.
HIPAA Privacy | Guiding Principles

- The patient decides.
- Health care always comes first.
- Is it reasonable under the circumstances?
- Do you/they need to know to do your/their job?
- Is it for treatment, payment or health care operations?
- Unless it is for treatment, is it the minimum necessary?
HIPAA Cute, but Helpful,
Poem

“What you see here,
what you hear here,
let it stay here
when you leave here.”
HIPAA Do’s and Don’ts
to protect the privacy and security of patient information

- Be careful when leaving phone messages.
  - Leave only enough information to get a return call.
- What you learn about patients at Parkview stays at Parkview.
- Refer all requests from Media (TV, radio, newspaper) to the Marketing Department.
- Move patient/family conferences to private rooms when possible.
- Lower voices, draw curtains to maintain privacy in double rooms.
- Ask patients if they would like you to ask guests to leave before discussing their health information.
- Respect a patient’s wishes as they relate to private information.
- Protect a patient’s confidential information as if it were your own.
- Speak *quietly* in most situations, speak **loudly** in emergencies!
- Share information needed to treat the patient with other providers.
- Avoid discussing patients in hallways, cafeteria or public places, except as required for care.
- Lock up patient information.
- Shred or destroy PHI or any other personal information before disposing of it.
- Keep wastebaskets and recycle bins in private areas.
HIPAA Do’s and Don’t’s

to protect the privacy and security of patient information

- Do not allow people (patients, visitors, staff) into areas they should not be in.
- Do not leave medical records unattended (in print or on the computer screen).
- Do not access or review patient information if you are not involved in the patient’s care.
- Do not access or review your own or your family’s information.
- Don’t leave information on printers.
- Keep fax machines in secure areas.
- Put results and other patient information in an envelope for interoffice mail.
- Don’t share your password with anyone.
- Don’t select easy passwords.
- Don’t store passwords in an easy-to-find place (such as under keyboards or on monitors).
- Turn computer monitors so they are not visible to people walking by.
- Log off the computer when you leave the computer.
- Use screen savers when practical.
The HIPAA Security Rule protects electronic protected health information

Electronic Protected Health Information (EPHI) is individually identifiable health information either transmitted or stored in electronic form.

This includes information in computers, computer networks, CDs, hard drives, e-mail, computer-to-computer faxes, etc…

The Security Rule requires Covered Entities to:

- Ensure the confidentiality, integrity, and availability of all EPHI;
- Protect against any reasonably anticipated threats or hazards to EPHI;
- Protect against any reasonably anticipated uses or disclosure of EPHI that are not permitted by the Privacy Rule; and
- Ensure compliance by its workforce.
“Confidentiality” means that data or information is not made available or disclosed to unauthorized persons or processes.

In other words we must keep the information from getting to people who do not have the right to have it.

“Integrity” means that data or information has not been altered or destroyed in an unauthorized manner.

In other words we must make sure the information doesn’t get “messed up” or tampered with.

“Availability” means that data or information is accessible and useable upon demand by authorized persons.

In other words the information has to be ready for us to use when we need it.
Like all compliance programs Parkview’s HIPAA implementation is subject to:

- Policies & Procedures
- Education
- Responsible Party (Compliance/Privacy/Security Officers)
- Reporting Mechanism
- Investigation
- Auditing
- Corrective Action

Refer to the Parkview Health Administrative Policy Manual for policies related to privacy and security.
HIPAA | Violations

A Covered Entity is required to take appropriate actions for workforce HIPAA violations.

- Parkview Health policies provide for disciplinary action up to and including termination of employment.
- We audit employees and their use of electronic records.

Every person has the right to file a complaint with the Covered Entity or the Secretary for Health & Human Services, which could lead to regulatory penalties.

The federal government can seek civil penalties and criminal penalties for HIPAA violations.

- Monetary penalties can range from $100 for a single violation up to $1.5 M, depending on issue and intent.
- Criminal penalties may also include imprisonment up to 10 years.
If I have a Question, Who do I Ask?

Questions about HIPAA and my job:

- Asking your supervisor will help ensure that all in your department or unit get uniform answers.
- Contacting Parkview’s HIPAA Privacy & Security Officer or anyone in the Corporate Counsel Department is always appropriate.

What if I have a complaint?

- Contact Parkview’s HIPAA Privacy & Security Officer
- Telephone Hot Line: (260) 373-7021
- E-mail: Compliance.Officer@parkview.com
- Contacting Parkview’s CEO is also appropriate.
Your Guide to Better Patient Care

Helping you become the best, helping you become Parkview

[Image of two children examining each other's eyes]
The Joint Commission

- Parkview Health hospitals are accredited by the Joint Commission.
- Any co-worker, physician, or other individual who provides care, treatment, or services and who has concerns about the safety or quality of care provided in the organization is encouraged and expected to report their concerns to their supervisor/responsible hospital personnel or via the Parkview Employee Compliance Hotline at x37021. If these concerns persist they may be reported to The Joint Commission without retaliatory action from Parkview. Complaints can be directed to TJC @ 1-800-994-6610 or complaint@jointcommission.org
Abuse and Neglect

**Abuse** – The **willful** infliction of bodily injury, unreasonable confinement, intimidation, or cruel punishment with resulting physical harm, pain or mental anguish.

**Neglect** – The failure of a caretaker to provide the goods or services that are necessary to avoid physical harm, mental anguish, or mental illness.

**Signs/Symptoms may include:**

- Multiple fractures or bruises in different stages of healing.
- Bruises with patterns of (hand, belt, board)
- Unexplained serious head injury
- Evidence of dehydration, malnutrition
- Thermal injuries (cigarette burns, scalds)
- Apparent delay in seeking medical treatment
- Inability of caregiver to give accurate, consistent account of incident
- Multiple ER/hospital visits
- Psychosocial symptoms, extreme withdrawal, agitation, fearfulness, infantile behavior, indifference to family

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If you suspect abuse or neglect of any patient, employee or hospital customer:

- Provide care as needed
- Contact supervisor and Social Worker or Case Manager.
- We are obligated to act on our suspicions.
- State laws mandate that child/elder abuse be reported to the proper authority.
Population Specific Care – Infant Birth to 1 Year

INFANT

- Involve parents in care delivery and keep them informed about infant’s progress.
- Encourage holding infant close to body with back and neck supported.
- Cuddle, hug, and talk softly and soothingly to infant.
- Use distractions such as bottle or pacifier if appropriate.
- Keep infant warm.
- Maintain safe environment.
Population Specific Care – Child Age 1 – 2

**TODDLER**

- Involve parents in care delivery and keep them informed about child’s progress.
- Limit number of strangers.
- Give familiar object to child (blanket, toy, etc.).
- Encourage activities appropriate to age (walking, feeding self with assistance, etc.).
- Encourage parents to stay with child.
- Maintain safe environment.
Population Specific Care – Child Age 3 - 6

PRE-SCHOOLER

- Provide simple explanations for procedures.
- Provide activities appropriate to age (books, simple games, stories, dolls, etc.).
- Encourage parents to stay with child.
- Let child act out painful procedures using favorite doll or stuffed toy.
- Give directions clearly using simple statements.
- Maintain safe environment.
Population Specific Care – Child Age 6 - 12

SCHOOL AGE

- Give a choice whenever possible.
- Explain procedures and instructions clearly in words the child can understand.
- Repeat instructions as necessary.
- Tell the child if treatment or procedure will be painful.
- Praise child for cooperative behavior.
- Involve parents in care delivery.
- Maintain safe environment.
Population Specific Care – Adolescent  Age 12 - 18

ADOLESCENT

- Involve adolescent in decision making and planning.
- Listen to adolescent’s fears and encourage questions.
- Provide privacy.
- Encourage contact with members of own age group if condition permits.
- Avoid treating adolescent like a child.
- Keep parents informed.
- Maintain safe environment.
Population Specific Care – Young Adult Age 18 - 30

YOUNG ADULT

- Involve young adult in care planning and delivery.
- Provide privacy.
- Provide education based on learning needs assessment and readiness to learn.
- Encourage socialization.
- Answer questions honestly and provide more detailed explanations of treatments/procedures.
- Provide safe environment.
Population Specific Care – Adult Age 30 - 60

**MIDDLE-AGE ADULT**

- Involve adult in care planning and delivery.
- Provide privacy.
- Encourage adult to express concerns (physical, financial, spiritual, social) and provide detailed explanations of tests/procedures as requested.
- Encourage socialization.
- Provide safe environment.
Population Specific Care – Adult Geriatric (over Age 60)

GERIATRIC

- Speak clearly and distinctly.
- Face patient during conversations.
- Encourage involvement in treatment process and preparation for discharge.
- Involve patient’s caregiver (if available) in health care decision-making process.
- Encourage independence.
- Ensure patient warmth and hydration.
- Encourage movement/position changes – avoid rapid movements.
- Provide safe environment.
Service Excellence | Hourly Rounding

Hourly rounding is a strategic method of completing bedside rounds.

What does research show about hourly rounding?
- Reduction in call light use
- Reduction in patient falls
- Fewer incidences of skin breakdowns
- Improved patient satisfaction scores

Why do nurses like hourly rounding?
- Reduced stress levels
- More efficient use of time
- Improved patient safety and satisfaction levels

Remember the “THREE Ps” rule.
- Positioning: Ensure the patient is comfortable and access risk of pressure ulcers
- Potty (personal needs): Assist with toileting as needed
- Pain: Access paid level using pain scale; take necessary actions to relieve pain

Ensure any other needed items are accessible to patient: call light, telephone, TV remote control, bed light switch, bed table, tissue box, water, trash container

Excellent Care Every Patient Every Day
Always use the 10 Foot, 5 Foot Rule:

- If a customer is within 10 feet, acknowledge the customer immediately with a smile.
- If a customer is within 5 feet, establish and maintain direct eye contact.
- Offer assistance and introduce yourself.
- Use the customer's name.
- Listen to the customer without interrupting.
- Be discrete and maintain confidentiality.
- Be alert and aware.

- Be observant of customers, visitors, and your surrounding environment.
- Be responsive to looks of confusion. Personally escort customers to their destinations.
- Wear your ID badge with name/picture visible.
- Offer comfort items. Keep the customer informed during periods of waiting.
- Be a resource - if you can't answer a question, find someone who can.
- Create a positive image of yourself and Parkview
- Use iRelate

Excellent Care Every Patient Every Day
iRelate is an effective method in communicating and establishing a service relationship with patients and families. At Parkview we perform iRelate with all of our patients.

I: INTRODUCE
- Introduce yourself to patient and everyone in the room
- Let them know how many years you have been with Parkview and working in the department
- Introduce the process and expected duration

R: REASSURE
- Project a professional image
- Make and maintain eye contact
- Acknowledge patients by name
- Manage Up

E: EXPLAIN
- What you will be doing and why
- How long it will take
- Anticipated wait time for results, if applicable
- Immediate next steps
- What you need from the patient, if appropriate

L: LISTEN
- Listen for questions and concerns
- Empathize with feelings
- Ask clarifying questions

A: ANSWER
- Summarizing what the patient said
- Answering questions
- Addressing concerns and reduce anxiety by explaining what you are going to do
- Checking for understanding

T: TAKE ACTION
- Perform appropriate tasks to address questions and concerns
- Keep patient informed and ensure patient safety

E: EXPRESS APPRECIATION
- Offer additional support and care
- Provide information about next caregiver, if applicable
- Say, “Thank you”
Privacy from View:
- Offer appropriate body coverage. All sizes/types are available.
- Appropriately attire and drape customers when transporting or walking through the hallways.
- Knock and await response before entering at all times.
- Use visual barriers as appropriate, such as pulling privacy curtains, keeping the door shut and offering private rooms, etc.

Confidential Conversations:
- Log off the computer when unattended.
- Secure patients' records in areas away from unauthorized access.
- Only when necessary, discuss customer information in private areas and in a private manner.
- Do not post customer information in public areas.
- Address customers in a manner of their choice.

Excellent Care Every Patient Every Day
Service Excellence | Customer Understanding

- Offer available assistive devices/interpreters in response to the customer's needs.
- Provide appropriate description of tests and procedures at time of scheduling.
- Provide the statement, "for your privacy," to explain why activities occur like closing the door, covering with a blanket or pulling the curtain.
- Use AIDET.
Thank you for reading *Welcome to Parkview Student Orientation Handbook*

Please complete the following *Student Orientation Test.*

*Non-Nursing Students: Please Answer Questions 1 -16*
*Nursing Students: Please Answer all 20 Questions*

*The answer sheet is available in the Student Passport.*
Student Orientation Test

Directions:
After you have read the Welcome to Parkview: Student Orientation Handbook answer the following questions. Please record your answers on the Student Test Answer Sheet available in the Student Passport.

Multiple Choice & True/False, 20 questions. Please select the BEST answer for each.

Question #: 1
Parkview Health’s mission states: “Parkview Health will improve the health and well-being of our communities.”

A. True
B. False

Question #: 2
Question: To help patients maintain their privacy from view:
A. Offer appropriate body coverage. All sizes/types are available.
B. Appropriate attire and drape customers when transporting or walking through the hallways
C. Knock and await response before entering at all times
D. Use visual barriers as appropriate, such as pulling privacy curtains, keeping the door shut, and offering private rooms, etc.
E. All of the above

Question #: 3
For Electrical Safety, you should:
A. Report frayed electrical wiring
B. Report electrical equipment that "flickers," smells hot, or sparks
C. Refrain from handling any equipment that has frayed wiring or smells hot
D. Do all of the above

Question #: 4
If you come across a chemical spill, you should:
A. Clean it up immediately with paper towels
B. Report it to the department manager or charge person, keep others from walking through the spill, and refer to the Material Safety Data Sheets
C. Do nothing
D. None of the above
Question #: 5
In case of a fire, Parkview Health designates the emergency situation as:
A. Code Red
B. Code Blue
C. Code Green
D. Code Pink

Question #: 6
At Parkview Health facilities the phone numbers to call during an EMERGENCY SITUATION are 1-911 and 9-911.
A. True
B. False

Question #: 7
To help prevent back injury when lifting an object, you should:
A. Stand close to the object and keep feet shoulder width apart
B. Bend your knees, keep back aligned, and use your legs to lower yourself
C. Hold the object close to you
D. Use your legs to stand up
E. All of the above

Question #: 8
Personal Protective Equipment (PPE) acts as a barrier between skin and infectious agents and should be worn when:
A. There is risk of contact with blood
B. There is risk of contact with body fluids
C. Working with patients in isolation
D. All of the above

Question #: 9
In protecting patient rights, it is important to remember:
A. Patients are entitled to know about their medical status and treatment
B. Patients may refuse treatment
C. Patients must give consent before surgical and invasive treatments and before participating in research projects
D. Patients are entitled to know caregiver’s name and how to use the call button
E. All of the above
Question #: 10
Confidentiality includes:
A. Keeping patient information private that is spoken, on paper, or on computer
B. Following HIPAA standards to ensure that disclosure of a patient's protected health information (PHI) for treatment, payment, and healthcare operations follows the "minimum necessary" rule
C. Maintaining privacy of fellow employee personal and employment information
D. Being able to privately file a complaint with the Parkview Health Privacy Officer
E. All of the above

Question #: 11
If a patient is suspected to show signs of abuse or neglect, you should:
A. Provide care as needed and immediately contact the manager and Social Worker/Case Manager
B. Be aware that state law mandates that child/elder abuse be reported to the proper authority
C. Act on your suspicions
D. All of the above

Question #: 12
Ways that we can enhance our Service Excellence to customers include:
A. iRelate
B. Hourly Rounding
C. Offer available assistive devices/interpreters according to customer's needs
D. All of the above

Question #: 13
Cultural considerations that we need to keep in mind when caring for patients include:
A. Understanding how they define health and illness
B. What they do to maintain wellness
C. What they believe is the cause of their illness
D. All of the above
**Question #: 14**
In the case of a Fire, the correct sequence of action is:
A. RACE and PASS
B. PPDD
C. Run to the nearest elevator
D. All of the above

**Question #: 15**
Students at Parkview using PDA’s, smart phones or tablets must:
A. Refrain from using them in public areas or in front of patients
B. Never utilize the camera or video recording functions while on Parkview property
C. Use them only to access learning applications directly related to their clinical experience
D. All of the above

**Question #: 16**
Students using social media should:
A. Refrain from posting information, comments or images about patients/guests or their own student learning experiences at Parkview
B. Always follow HIPAA regarding patient privacy
C. Feel welcome to visit Parkview’s Facebook, Twitter, and YouTube sites
D. All of the above

**Question #: 17**
What measure may we implement to address a serious acute change in patient condition that does not warrant a Code Blue:
A. Rapid Response
B. Hourly Rounding
C. Core Measures
D. All of the above

**Question #: 18**
Using the Morse Fall Scale, a patient must never be left unattended when up or in the bathroom/shower if they are at which level?
A. Low Risk
B. Medium Risk or High Risk
C. Score of 2
D. All of the above
**Question #: 19**
The “3 P’s” of Hourly Rounding are:
A. patient, physician, privacy  
B. pain, privacy, patient  
C. pain, positioning, & potty  
D. product, price, placement

**Question #: 20**
For splash exposure to the eyes, the person should:
A. Go immediately to the nearest eyewash station  
B. Hold eyelids open and flush under water for 15 minutes  
C. Seek immediate attention, notify manager and complete an event report  
D. All of the above

Please record your answers on the Student Test Answer Sheet available in the Student Passport.
Thanks for reading this Student Orientation Handbook. Please keep this material handy for easy reference during your time with us.

We look forward to learning with you!

Welcome to Parkview.

For more information, please contact:
Parkview Student Services
(260) – 373 – 7226
-or- students@parkview.com