Las Palmas Del Sol

Quick Study Orientation

LAS PALMAS DEL SOL
HEALTHCARE

www.laspalmasdelsohealthcare.com

X1887
Revised 6/14 T&D
Acknowledgement

I certify that I have received the Las Palmas & Del Sol Healthcare “Quick Study Orientation” materials. I acknowledge that I am responsible for reading the material, asking questions if I don’t understand something, and following all policies and procedures of Las Palmas & Del Sol Healthcare/HCA. I also acknowledge that I understand that I will be held accountable for my conduct, actions and practice at all times.

Print Name: ____________________________
Signature: ______________________________
Month and Day of Birth (MMDD): __________
School: _________________________________
Instructor: ______________________________
Date: ____________________________________
This booklet answers frequently asked questions and addresses policies and procedures you will be required to follow. Please read through all of the information, then keep the book to refer to as needed.

*Pages 39-40 include a Confidentiality Statement and an Acknowledgment form that you must complete and turn in to the person who gave you this booklet.*

Las Palmas & Del Sol Healthcare, owned by HCA Healthcare corporation as a part of HCA's North Texas Division, has had a presence in El Paso since the mid-1960s. It is currently comprised of two major hospitals as well as several off-site locations, providing a full array of healthcare services for both adult and pediatric patients. Our goal is to be the best at serving our community with high quality cost-effective health care. Las Palmas and Del Sol are committed to providing excellent customer service to enhance patient, physician, and employee satisfaction.

We look forward to developing rewarding relationships with each of you, and pledge to provide opportunities for continued growth and learning. Las Palmas and Del Sol staff extend our best wishes for an enjoyable and successful school term.

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**Las Palmas & Del Sol Healthcare Confidentiality Statement**

I understand the primary purposes of the medical record are as follows:

1. To document the course of patient's health care.
2. To provide a medium of communication among health care professionals for current and future patient care.
3. To provide a medium of communication among other outside agencies for billing and other indices purposes.

I understand and agree that in the performance of my duties as a student/affiliate of Las Palmas & Del Sol Healthcare, I must hold in confidence any and all information regarding patients and compensation data with which I may come in contact during my rotation. I hereby affirm a pledge to maintain the confidentiality of the medical records and medical information to which I will be exposed. No records will be removed from the premises. I will in no way reveal or infer the identity of the hospital, patient or other confidential identifying data, except as required to accomplish the objectives in my assigned duties as a student/affiliate. Further, I understand that intentional or involuntary violation of confidentiality may result in disciplinary action, including possible legal action.

Name (printed):__________________________________

Signature:___________________________________

Month and Day of Birth (MMDD):______________

Date:_______________________________________
Patient Education is everyone’s responsibility. There are numerous resources available: booklets, written information and videos. Religious and cultural information are also available. At Del Sol, Krames on Demand for printed materials in English and Spanish is available.

Food & Nutrition — Patient Trayline Hours

<table>
<thead>
<tr>
<th></th>
<th>Las Palmas</th>
<th>Del Sol</th>
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</thead>
<tbody>
<tr>
<td>Breakfast:</td>
<td>0715-0830</td>
<td>0715-0830</td>
</tr>
<tr>
<td>Lunch:</td>
<td>1130-1300</td>
<td>1115-1300</td>
</tr>
<tr>
<td>Dinner:</td>
<td>1615-1730</td>
<td>1615-1730</td>
</tr>
</tbody>
</table>

STUDENT PARKING

Las Palmas — Crosby & Oregon parking lot. Arrangements for parking badges will be made by your instructors.

NO PARKING in the Rim Road Tower or the outdoor Visitors’ Parking (vehicles will be towed!)

Del Sol — Near the Distribution Center, or the Vista Del Sol lot at Lonewood/Bois d’Arc and Sumac.

NO PARKING in the parking garage, ER parking, or Doctors’ parking areas.

Useful Numbers…..

<table>
<thead>
<tr>
<th></th>
<th>LAS PALMAS</th>
<th>DEL SOL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Main Switchboard</td>
<td>521-1200</td>
<td>595-9000</td>
</tr>
<tr>
<td>Nursing Supervisor</td>
<td>521-1161</td>
<td>595-9233</td>
</tr>
<tr>
<td>Infection Control</td>
<td>521-1488</td>
<td>595-9767</td>
</tr>
<tr>
<td>Training &amp; Development</td>
<td>521-1791</td>
<td>621-6522</td>
</tr>
<tr>
<td>Human Resources</td>
<td>521-1469</td>
<td>595-9098</td>
</tr>
<tr>
<td>Clinical Recruiter</td>
<td>521-1499</td>
<td>594-5873</td>
</tr>
<tr>
<td>Risk Management</td>
<td>521-1299</td>
<td>621-6641</td>
</tr>
<tr>
<td>Facility Privacy Officer</td>
<td>521-1792</td>
<td>595-9506</td>
</tr>
<tr>
<td>Ethics &amp; Compliance</td>
<td>521-1792</td>
<td>595-9220</td>
</tr>
</tbody>
</table>

In addition, both hospitals have Wound & Burn Care Centers, Women’s Health Centers with Teen Pregnancy Centers, Children’s Services, Diabetes Treatment & Education, complete Cardiology Services including Life Care Centers/Cardiac Rehab, Surgical Services, In– and Out-Patient Rehab Services, state of the art Emergency Rooms, Radiation Oncology, ICUs manned by Critical Care Certified Nurses, PET & CT Scanners, and eMAR.
DRESS CODE

- Professional attire is required while on duty/representing the hospital.
  - Clothing must be neat, clean, and appropriate for professional work.
  - Denim material is never appropriate.
  - Due to infection control issues, stethoscope covers are not allowed.

- Students must wear the regulation ID badge at all times while on duty.
  - The badge must be worn above the waist.
  - The picture and name must be visible.
  - Pins, stickers, etc. are not allowed on badges.

- Hair styles, clothing and jewelry should conform to the standards accepted in a professional environment, as well as to the specific standards established by the hospital.

- Hair must be of a natural human color.

- Nails must be clean and neat.

- Shoe covers, hair covers, and masks should be worn in appropriate clinical areas and must not be worn outside the area.

Management reserves the right to make the determination as to whether or not a

2014 Patient Safety Goals (cont.)

Goal #15: Identify safety risks inherent in our patient population
- Identify patients at risk for suicide for psychiatric hospitals and for patients being treated for emotional or behavioral disorders in general hospitals.

Goal #16: Improve recognition and response to changes in a patient's condition.
- Before the procedure, identify the correct patient, the correct site, and the correct procedure.
- The procedure is marked before the patient is brought to the operating room by a licensed independent practitioner. (the individual will be involved directly in the procedure and will be present when the procedure is performed)
- Insertion procedures for which the site is unknown such as cardiac cath and PICC lines do not require marking.
- During the “time out” all other activities are suspended to the extent possible without compromising the patient’s safety.
2014 Patient Safety Goals (cont.)

- Record and pass along correct information about a patient’s medicines the patient is taking. Compare those medicines to new medicines given to the patient. Make sure the patient knows which medicines to take when they are at home. Tell the patient it is important to bring their up-to-date list of medicines every time they visit a doctor’s office.

Goal #6: Use alarms safely.

- Identify the ways the patients/families can report concerns about safety; encourage them to do so.

Goal #7: Reduce the risk of healthcare-associated infection.

- Comply with current Centers for Disease Control and Prevention (CDC) hand hygiene guidelines.
- Manage as sentinel events all identified cases of unanticipated death or major permanent loss of function associated with a healthcare associated infection.
- Implement best practices or evidence-based guidelines to prevent central line associated bloodstream infections.
- Implement best practices for preventing surgical site infections.
- Implement best practices for preventing urinary tract infections caused by indwelling catheters.

**NOT APPROPRIATE FOR THE WORKPLACE**

<table>
<thead>
<tr>
<th>T-shirts</th>
<th>Tank tops</th>
<th>Sweatshirts</th>
<th>Mini-shirts</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spandex</td>
<td>Mini-skirts</td>
<td>Sundresses</td>
<td></td>
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<tr>
<td>Dresses/tops with low cut front or back</td>
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<tr>
<td>Sleeveless, sheer or revealing clothing</td>
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<tr>
<td>Undergarments that can been seen through clothing.</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Sweatpants</th>
<th>Shorts</th>
<th>Jeans</th>
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</thead>
<tbody>
<tr>
<td>Sandals/open toed shoes</td>
<td>Canvas sneakers</td>
<td></td>
</tr>
<tr>
<td>Shoes that exceed 3 inches in height</td>
<td></td>
<td></td>
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<tr>
<td>Visible body piercing jewelry</td>
<td></td>
<td></td>
</tr>
<tr>
<td>More than 2 earrings per ear</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Visible tattoos</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dangling earrings or excessive jewelry</td>
<td></td>
<td></td>
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<tr>
<td>(in patient care areas)</td>
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</tr>
<tr>
<td>Nails longer than 1/4 inch from the fingertip</td>
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<td></td>
</tr>
<tr>
<td>Nail ornamentation or nail jewelry</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Artificial nails (in clinical areas)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Excessive perfume/cologne</td>
<td></td>
<td></td>
</tr>
<tr>
<td>or scented grooming products</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bare feet or legs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-appropriate colored hosiery</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-uniform hats or caps, except for religious head coverings.</td>
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</tbody>
</table>
LAS PALMAS& DEL SOL
HEALTHCARE
EMERGENCY CODE RESPONSES
DIAL 5555

An emergency can happen without warning. For your safety, it is important for you to be prepared. Take time to familiarize yourself. Emergency codes are activated by hitting a code button or dialing the operator using 5555. At facilities off-site from the hospitals, codes require a call to 9-1-1. In these types of situations, time is of the essence: that is, a few minutes could mean the difference between life and death. It is essential for employees to understand the plan well enough so as not to waste any time. For this reason, all disaster programs are practiced on a continuing basis. Las Palmas and Del Sol Medical Centers also participate in community-wide emergency medical response activities.

CODE BLUE
(CARDIOPULMONARY ARREST)

If somebody stops breathing or is unresponsive and not moving, tap them and ask, “Are you ok?” If there is no response dial 5555, or if off site, call 9-1-1. Follow the instructions given, then return to the person. Only provide CPR if you are trained.

CODE SILVER
(ACTIVE SHOOTER/HOSTAGE SITUATION)

Dial the number “5555” to report a “Code Silver.” Be prepared to provide Security the location of the problem, if the person(s) are still on the scene, number of persons, victims, and hostages, and type of weapons involved. When you hear “Code Silver” DO NOT go to the area stated. Immediately clear hallway of patients, visitors, and staff. Seek shelter behind a locked doors if you can. Remain out of view until the “Code Silver, All Clear” announcement is paged. This is an extremely dangerous and sensitive situation that should only be handled by trained authorities.

2014 National Patient Safety Goals

- Make sure that the correct patient gets the correct blood when they get a blood transfusion.

Goal # 2 Improve the effectiveness of communication among caregivers.
- For verbal or telephone orders, or for telephone reporting of critical test results, verify the complete order or test result by having the person receiving the order or test result read back the complete order or test result.
- Standardize a list of abbreviations, acronyms, and symbols that are NOT to be used throughout the facility. (Information is on each unit)
- Make sure critical test results are communicated to the responsible licensed caregiver in a timely manner.
- Implement a standardized approach to hand off communications, including the opportunity to ask and respond to questions.

Goal # 3: Improve the safety of using medications.
- Identify, and at a minimum, annually review a list of lookalike and sound alike medications used in the facility, and take action to prevent errors involving the interchange of these medications.
- Label all medications, medication containers such as syringes, cups and basins, or other solutions on and off the sterile field in perioperative and other procedural settings.
- Reduce the likelihood of patient harm associated with the use of anticoagulant therapy.
- This applies to facilities where the clinical expectation is that the patient’s lab values for coagulation will remain outside normal values.
- It does not apply to routine situations where short-term prophylactic anticoagulation is used for venous thromboembolism prevention.
Patient Safety

Patient Safety is a part of the Las Palmas & Del Sol Healthcare culture. Above all else, we are committed to the care and improvement of human life. We believe patient safety requires a team approach. Here are ways we ask the patient to help us maintain patient safety:

WE ENCOURAGE PATIENTS TO:
• ASK US………………ANYTHING. (even very personal things)
• TELL US ABOUT……anything that will impact their care plan.
• ASK US ABOUT THEIR MEDICATIONS.
• LEARN ABOUT THEIR DIAGNOSIS, MEDICAL TESTS THEY ARE UNDERGOING, AND THEIR TREATMENT PLAN.
• PAY ATTENTION TO THE CARE THEY ARE GETTING.
• PARTICIPATE IN THE DECISIONS ABOUT THEIR CARE — THEY ARE THE CENTER OF THE

National Patient Safety Goals (NPSG’s) 2014

Gaps in NPSG numbering indicate that the Goal has been “retired to being a standard,” or not applicable to our setting.

Goal # 1: Identify patients correctly.
• Use at least ways to identify patients. For example, use the patient’s name and date of birth. This is done to make sure that each patient gets the correct medication and treatment. Label containers used for blood or other specimens in front of the patient.

CODE ORANGE (BOMB THREAT)
If you receive a telephone call warning there is a bomb, take the call seriously. If possible, prolong the conversation. Ask the caller to repeat the message. Write down exactly what the caller is saying—as much information as possible.(2) Pay attention to important background noises such as music, traffic, aircraft, etc. Pay attention to the caller’s voice, such as if the caller is a man or woman, accents, or speech patterns. Note if the caller mentions specific locations in the hospital. You might ask: why did you place the bomb? When is the bomb going explode? Where is the bomb right now? What kind of bomb is it? What does the bomb look like? As soon as the caller hangs up, notify the hospital operator in case a call comes to another area.

CODE STRONG (ASSISTANCE NEEDED)
All male hospital personnel to assist with a combative patient or visitor. DO NOT go to the area mentioned unless told to do so.

CODE PINK (INFANT/CHILD ABDUCTION)
All hospital personnel are “on alert.”
(1) Man all entrances/exits.
(2) Check Restrooms.
(3) Man Stairwells and Elevators.
The facility is in complete shutdown mode until the “All Clear” is given.

CODE RED (FIRE)
During a Code Red, the fire alarm system is activated either manually by pulling a fire alarm pull box, or automatically by a detection service. Follow the instructions given to you.
CODE “D”
(INTERNAL/EXTERNAL DISASTER)
Disaster Alert Determination:
- Small < 10,
- Medium 10-19:
- Large > 20
Activated by Nursing or ER Supervisor. Stand-by:
Remain on shift and prepare carts and call-back trees, and find stretchers and wheelchairs. Implement Plan will mean the disaster plan is in effect. Follow the instructions given to you.

CODE “D” (INFLUX)
An event resulting in the arrival of patients with an infectious disease. Follow the instructions given to you.

CODE DELIVERY
(PRECIPITOUS DELIVERY)
Emergency response to the delivery of a baby somewhere other than the Labor & Delivery or Emergency Departments. Give exact location to the operator. The Code Delivery Response Team will respond (ER Physician, Nursing Supervisor, L&D Nurse, ICN Nurse, and Security).

CODE HEART
(ACUTE CARDIAC EVENT)
Someone in the hospital is having a possible heart attack. The Code Heart Response team will respond. If you think somebody is having a heart attack, call 5555 and tell the operator that somebody is having a heart attack and give the location where the person is.

CODE TRAUMA or CODE TRAUMA STAT (ER)
This is the code called for trauma patients on their way to the ER, upon arrival to the ER, or anytime thereafter at the decision of the ER physician. The Trauma Team will

- Birth date
- Finger or voice prints
- Photographic images
- Names of employers
- Names of relatives
- Medical Record Number (MR#)
- Account Number
- Health plan beneficiary Number

- May be changed during treatment but must be routed through the FPO.
- Pass code will be the last 4 digits of the Patient Account Number.

Disclosing PHI to Family Members and Friends who call the department:
- The patient will be assigned a four-digit pass code.
- A correct pass code will be needed to get information — the patient gives the pass code to others.

Requestors via phone will need:
- Four digit pass code OR
- Patient SSN, DOB, and one of the following: Account number, street address, MR#, birth certificate, insurance card or policy number.

Other Info:
- Students may not fax.
- Students may not print from the Patient Care Module (PCM).
- Students may not take “cheat sheets,” assignment sheets, etc. that have PHI on them away from the department.
- All PHI must be disposed of in appropriate bins for shredding.
- All privacy complaints are routed to the FPO.
- All questions or concerns should be addressed to the Charge Nurse, Supervisor or FPO.
- Failure to follow the policy, will result in termination of the learning experience.
HIPAA Privacy Keys to Success

- Federal Law.
- Mandatory, with penalties for failure to follow the law.
- Protects health insurance coverage, improves access to healthcare.
- Reduces fraud and abuse.
- Improves quality of health care in general.

Facility Privacy Officer (FPO)
Las Palmas: Monica Perches 521-1792
Del Sol: Jovanie Salas 621-6551

Protected Health Information (PHI)

- All patient information is confidential and protected.
- Family members designated by patient to have access to information receive a pass code.
- Patient information is accessed only if there is a "need to know."
- Absolutely DO NOT discuss patients in public places like elevators or the cafeteria.
- DO NOT discuss patients on social media websites such as Facebook and others.
- Computer screens, patient charts, MAR’s must be secured and placed out of public view.
- Patients receive “Notice of Privacy” upon Admission.

What is protected?

- Name, address, telephone numbers
- Email addresses
- Social Security Number (SSN)
- Fax numbers
- Certificate/license numbers
- Any vehicle or other device serial number
- Uniform Resource Locator (URL)
- Internet Protocol (IP)

CODE GRAY
(INCLEMENT WEATHER)
All non-essential personnel should go home. Follow the instructions given to you.

CODE M.R.T.
(MEDICAL RESPONSE TEAM)
This Team is made up of an experienced ICU/CVICU RN, a Respiratory Therapist, and the patient’s nurse, brings critical care unit knowledge to the patient’s bedside before a crisis such as a cardiac arrest occurs. Anyone can activate Code MRT by calling 5555.

CAPACITY CODE
The hospital is at capacity (full) and special processes are put into effect.

CODE YELLOW
(HAZMAT ACCIDENT/CHEMICAL SPILL)
The Spill Team will respond from Engineering and Environmental Services. Do not go to the area where a code yellow is called because dangerous chemicals could be involved that could hurt you.

CODE SEPSIS
DS: effective July 15, 2014
LP: TBD
The Code Sepsis Team will respond from ICU, Respiratory, and Laboratory. This is the code called for patient who may be experiencing severe sepsis to receive
The Communication System consists of:

A. The Hospital PA System
B. The pocket beeper system
C. The telephone network

The telephone network is powered by emergency power and has a battery back-up system.

- **Assistance Calls**
  - Listen for dial tone
  - Dial 0 for hospital operator
- **Internal Calls**
  - Listen for dial tone
  - Dial desired extension number
- **Outside Calls**
  - Listen for dial tone
  - Dial 88 and local phone number
- **Code Calls: DIAL 5555**

Emergency Red Phones are located throughout the hospital. These phones are connected to outside lines and will continue to work in the event of an internal phone system outage. Each department has a listing of emergency phone numbers.

**NURSE CALL**

Nurse Call systems are utilized in all inpatient nursing units and critical care areas. Each unit has an operating manual which contains specific for operation. The system encompasses the individual room notification system, emergency/lavatory stations, corridors and zone lights to alert the nurse to a call from within the room.

**CODE BLUE buttons are located throughout patient care areas.** Pressing the CODE BLUE button will result in the CODE TEAM being dispatched to your location.

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**Pain Management**

In keeping with the mission and values of Las Palmas & Del Sol Healthcare, patient Pain Management is a priority in providing care.

We would like to provide the most conscientious, efficient, and innovative methods of managing pain based on scientific research. Recognizing that pain perception is highly individual, we strive to personalize each plan of care. It is our responsibility to combine the highest quality of care and compassion to our patients, families, and community as we promote pain relief.

There are different pain scales used all over the hospital. Two of the most common pain scale are the 0 to 10 pain scale and the Wong-Baker faces scale.

We encourage all patients to discuss and create a plan to manage their pain.
RADIATION SAFETY

The most effective methods of radiation protection:
- Minimize Time.
- Maximize Distance.
- Maximize Shielding.

PREGNANT WOMEN AND CHILDREN SHOULD NOT BE ALLOWED TO VISIT PATIENTS BEING TREATED USING RADIOACTIVE SUBSTANCES.

Radiation areas are called RESTRICTED AREAS.
The area is required by Federal or State law to have warning signs posted:

Protection against Radioactive Material Contamination:

1. Prevent contamination.
2. Avoid contaminating an area.
3. Wear gloves and protective clothing.
4. Do not eat, drink, smoke or apply cosmetics.
5. Notify Radiation Safety Officer for any concerns or questions.

AS LOW AS REASONABLY ACHIEVABLE

LAS PALMAS & DEL SOL HEALTHCARE
MEDICAL PHYSICIST/RADIATION SAFETY OFFICER
Las Palmas — 521-1783
Del Sol — 629-3446

MSDS-INFORMATION

A Safety Data Sheet (SDS) is supplied by the company sending the chemical. They come in different lengths and layouts, but they all contain the same basic information:

Key points to look for:
- The chemical name.
- The hazardous ingredient.
- Descriptive information (color, odor, appearance).
- Explosive and fire information.
- Health hazards.
- Symptoms of overexposure.
- Medical conditions made worse by this chemical.
- How the chemical gets into your body (skin, lungs).
- If the chemical is cancer causing
- First Aid and emergency procedures.
- Identify other substances that may react with this chemical.
- Clean-up of leaks and spills to include use of personal protective equipment and how to dispose of the waste.

Take a few minutes and look at the manual in your work area. It is BRIGHT YELLOW! Get to know the SDS for the chemicals in your area before there is a problem.

Keep yourself, co-workers and patients safe by being proactive.
LIFTING SAFELY TO PROTECT YOUR BACK

Back injuries are one of the most common types of injuries among healthcare workers in hospitals. You can prevent them by learning about your back and using your body correctly to lift and move patients and objects.

SAFE LIFTING TIPS
- Never reach above your shoulders—use a step stool or ladder.
- When reaching down, support your upper body with one arm.
- Always stay close to the load without leaning forward.
- Push rather than pull whenever possible.
- When bending, kneel down on one knee.
- Bend your knees and hips not your back.
- When leaning forward, move your whole body, not just your arms.

TIPS FOR LIFTING AND MOVING PATIENTS
- Always stand with your feet about 12 to 15 inches apart.
- Bend with your knees, not your waist.
- Lift with your legs and keep the patient close to your body to reduce strain.
- Lower patients slowly bending at the knees.
- Work as a team with co-workers for large or heavy patients.
- Use mechanical aids whenever possible.

REMEMBER — whenever your lifting or moving a patient, get help when you need it! Do not be afraid to ask for help! TEAMS matter!

DNR ORDERS

Dated prior to September 1, 1999: the attending physician and a second concurring physician, each of whom has examined the patient, are required to document criteria regarding DNR decision prior to implementation.

Dated after September 1, 1999: only the attending physician is required to document criteria regarding DNR decision prior to implementation.

Finally, there are three important points that must be kept in mind in special cases.
- In cases involving the withholding or withdrawal of treatment from a minor, the decision must be made by the patient’s spouse (if he or she is an emancipated adult), parents, or the legal guardian.
- Second, if the patient is pregnant, life sustaining procedures may NOT be withheld or withdrawn, even if the patient has executed a written directive.
- Third, the foregoing procedures are not required if the patient is deemed to be legally dead due to the irreversible cessation of brain function; in this latter instance, however, the patient’s death must be pronounced before artificial means of supporting his or her respiratory or circulatory functions are terminated.

ALWAYS CHECK ADVANCE DIRECTIVES/DNR STATUS WITH THE PRIMARY NURSE....NEVER TAKE ANYTHING FOR GRANTED.

STUDENTS MUST REFER ALL INQUIRIES ABOUT ADVANCE DIRECTIVES TO THE CHARGE NURSE OR PRIMARY NURSE.
ADVANCE DIRECTIVES
(See Administrative Policy)

Advance Directive — Under the Texas Natural Death Act, patients have the right to make advance decisions with respect to the use of “heroic” measures should they become terminally ill. Typically, such patients will set forth their desires in an instrument known as an “Advance Directive to Physicians,” commonly referred to as a “Living Will.” Other patients may have a “Durable Power of Attorney for Healthcare.”

- The main distinction between the two instruments is that the Durable Power of Attorney authorizes another person to make a treatment decision for the patient if he or she is not able to do so.
- An Advance Directive, on the other hand, instructs the physician not to administer any life-sustaining measures.
- Written information is provided at the time of adult inpatient admission regarding their right to accept or refuse medical or surgical treatments and their right to make advance directives.
- Upon admission to a nursing unit, the nursing staff will ask about advance directive information again.
- The Patient Representative, Risk Management, or nursing staff will assist any patient that wants to initiate an advance directive.
- The patient’s advance directive is made a part of the permanent medical record.
- An advance directive may be revoked by a patient any time, regardless of the patient’s capacity.

Any patient who experiences cardiopulmonary arrest and does not have a written “Do Not Resuscitate” (DNR) order WILL be resuscitated.

TIPS FOR HEALTHY BACK
Keep your back pain-free by following these general tips:
- Use proper lifting techniques.
- Plan ahead and take precautions.
- Never twist.
- Lift or carry what you can handle safely.
- When standing for long periods of time, balance your spine by placing one foot on a low stool, bend your knees slightly, and keep your pelvis tilted forward.
- When sitting, use a chair that allows both feet to be flat on the floor.
- Always maintain good posture, slouching puts strain on your vertebrae.
- Use lumbar support cushions for your lower back if you sit a lot.
- Strong abdominal muscles support your back.

GENERAL HAZARD PREVENTION
There are other hazards in the workplace that you can help prevent, such as fire and electrical hazards, and slips, trips, and falls. Everyone must take accident prevention and hazard identification responsibilities seriously. The following safety guidelines can help.

FIRE AND ELECTRICAL SAFETY
- Report defective electrical outlets for replacement.
- Fire extinguishers are located within 75 feet of any exits.
- Smoke only in designated smoking areas.
- Use electrical appliances that have grounded plugs and unfrayed wires.
- Know fire evacuation plans.
- Do not use any power strips in patient care areas.
AVOIDING SLIPS, TRIPS, AND FALLS

You take hundreds of steps at work each day. For each step there are many potential hazards just waiting to trip you up. If you understand how these hazards can cause slips, trips, and falls, you can help prevent unnecessary and painful injuries to yourself, your patients, and your coworkers.

Watch Your Step

Even common hazards like water spills and poor lighting can lead to serious, painful injuries -- and could also limit your ability to respond to emergencies. Protect yourself, your coworkers, and your patients by doing what you can to create a hazard-free workplace.

Clean Up Wet Surfaces

Any time you see (or cause) a spill, clean it up right away. If you can't, mark it with a sign or paper towels and report it to the appropriate person for cleanup.

Avoid Shortcuts

Taking a shortcut to save time can be risky. The more shortcuts you take, the greater your chance for falling.
- Find a ladder or a step stool when something is out of easy reach, instead of using an object not meant for climbing.
- Never carry a load that you can't see over. If necessary, make more than one trip.
- Use only designated walkways.
- Keep your area clutter-free and well-lit.

Reporting

1. A “notification” will be completed by the person identifying the medication error and entered into the computer system within the shift it is discovered.
2. Risk Management will refer the report to the Department Director within 3 days.
3. The Department Director will review the report to enter a follow-up report in the computer within 3 days.
4. The Medication Safety Committee will review and classify reports.

Tracking, Trending, and Prevention

The Medication Safety Committee is responsible for tracking, trending, reporting, and assisting in identifying and eliminating cause of medication errors and proactively preventing their recurrence.
MEDICATION ERROR TRACKING SYSTEM

A medication error, by definition, is a dose of medication that deviates from the physician’s order as written in the patient’s medical record or from current hospital policy and procedure. Except for omission, the medication dose must actually reach the patient. A wrong dose that is detected and corrected prior to administration is NOT a medication error, but must be reported in the Risk Management Notification System. This includes “near misses.” A prescribing error is also excluded from this definition.

Classification of incidents:

**Level 0** - non-medication error occurred (potential error).

**Level 1** - an error that did not result in patient harm.

**Level 2** - an error that resulted in the need or increased patient monitoring, but no change in vital signs and no patient harm.

**Level 3** - an error that resulted in the need for increased patient monitoring with a change in vital signs, but no ultimate patient harm, or an error that resulted in the need for increased laboratory monitoring.

**Level 4** - an error that resulted in the need for treatment with another drug or an increased length of stay or that affected patient participation in an investigational drug study.

**Level 5** - an error that resulted in permanent patient harm.

**Level 6** - an error that resulted in patient death.

BE SAFE!

Every piece of equipment left out and file drawer left open is a hazard that can trip you up, particularly when it’s dark.

- Clean up clutter, especially in front of doors, in hallways, and on stairs.
- Don’t leave wheelchairs, cleaning supplies, handcarts, and other materials lying around.
- Turn on lights before entering a room or supply closet.
- Replace burned out light bulbs.
- Close file drawers before you walk away from them.

General safety tips:

In general, always:

- Be sure furniture and other items are 8 feet away from exits and elevators to allow for access.
- Stay attentive - don’t daydream or take shortcuts, no matter how many times you’ve done a job.
- Routinely clean and decontaminate all equipment and work surfaces.
- Handle hazardous and contaminated materials safely.
- Use appropriate PPE (Personal Protective Equipment).
- Place waste in appropriate receptacles.
- Never reach inside refuse containers — they may contain broken glass or needles.
- Stored materials must not be closer than 18 inches to ceiling where fire sprinklers are present.

HAZARDOUS WASTE:

- Other than sharp objects, place all items with blood or body fluids in a red bag.
- Place sharps or glass in puncture-proof appropriate containers provided on the unit.
- Don’t put paper, trash or regular waste in red bag.
- Isolate spills and call someone who is trained to clean up hazardous spills.
HCA Mission Statement

Above all else, we are committed to the care and improvement of human life. In recognition of this commitment, we strive to deliver high quality, cost-effective health care in the communities we serve.

LPDS Mission Statement

To provide exceptional care to every patient every day with a spirit of warmth, friendliness and personal pride.

LPDS Values

I - Integrity
C - Compassion
A - Accountability
R - Respect
E - Excellence

- C. Nursing has the responsibility to:
  - identify which patients are receiving drugs which have potential food and drug interactions by reviewing the Medication Administration Records and looking for **Potential FDI** in the comment section.
  - educate patients on the food and drug interaction and provide them with a copy of the Food and Drug Interactions handout, available in English and Spanish.
  - order consultations with pharmacist and dietitian as needed.
  - notify nutrition services by diet order of any food allergies.

Documentation can be found on the Multidisciplinary Patient Education Record and Discharge Instructions Form, as appropriate. The drugs which are selected to be flagged by the Pharmacy on the Medication Administration Records and by Nutrition Services are those drugs which are high risk to patients and high volume in usage at the hospital. Patients may call the pharmacy and nutrition services at the listed phone numbers on the Food and Drug Interactions handout if they have any further questions after they are discharged from the hospital. Several tools are available to educate staff on food and drug interactions and they include: medical chart dividers, food and drug books, the online Pharmacology Reference System, eMAR and the Food and Drug Interactions handouts.
FOOD and DRUG INTERACTION

A food and drug interaction may occur when certain types of food either increase or decrease the effect of a medication. The health care provider is responsible for identifying when a food and drug interaction may occur, counseling the patient, and preventing future food and drug interactions. This is referred to as “FDI.”

Three different departments are involved in implementing this policy and they include:

PHARMACY ~ NUTRITION SERVICES ~ NURSING

A. Nutrition Services has the responsibility to:
   • provide counseling to patients on potential food and drug interactions based on their unit specific procedure.
   • identify which patients are on furosemide, certain anticoagulants, disulfiram, MAO Inhibitors, lithium and Humalog insulin, as well as other medications, and change the diet if needed to avoid potential food and drug interactions.
   • serve as consultant for in-depth food and drug interaction education.

B. Pharmacy has the responsibility to:
   • provide for all prescriptions filled, as appropriate, to include auxiliary labels, written information, and face to face counseling for potential food and drug interactions.
   • flag the identified drugs on the Medication Administration Record with **Potential FDI** to alert nursing personnel that the patient is receiving a drug which may have a potential food and drug interaction.
   • serve as a consultant to provide in-depth education on food and drug interactions as needed.

FOCUS PDCA

Quality Model

F ind a process to improve
O rganize a team that knows the process
C larify current knowledge
U nderstand causes of process variation
S elect the process improvement

PLAN

DO

CHECK

Plan    Do
Check    Act
PREVENTING THE SPREAD OF INFECTION

Careful precautions are important to infection control. Without proper precautions, germs can easily spread among patients, visitors and staff. That’s why health-care facilities take special steps to prevent infection.

Your cooperation is vital. All Staff, Physicians, Students, visitors and patients play a role in preventing the spread of infection. For instance, health care staff and visitors must wash their hands thoroughly and use protective gloves, masks and gowns, as recommended.

UNDERSTAND HOW INFECTION SPREADS.
To spread, an infectious disease requires each of the following:

♦ A disease-causing organism – Most infectious diseases start with germs (viruses, bacteria, or funguses).

♦ A place for the organism to live – Germs thrive in moist environments. The human body offers many good hiding places. Germs may also live on objects such as door handles or bedrails, or in substances such as human wastes.

♦ Vulnerable hosts – Germs don’t always cause disease in every person they contact. They require victims who are too weak to fight them off – for example, newborns, older people and the sick or injured. Health-care facilities are full of vulnerable hosts!

♦ A route of transmission – For a disease to spread, germs must have a way to travel into susceptible people. Different germs travel in different ways, including:
  • by contact between people (shaking hands, hugging, kissing, etc.).
  • by contact between people and objects, such as medical instruments or door handles.
  • in droplets from coughs or sneezes, which can travel several feet in the air.
  • on tiny dust particles that travel long distances in the air.

RESTRANTS

It is the policy of Las Palmas & Del Sol Healthcare to maintain the dignity and individual rights of all patients. Patients have a right to freedom from restraints, of any form, that are NOT medically necessary. We do our best to be a restraint-free facility.

The use of restraints/seclusion within this organization is limited to situations with proper and adequate justification and only when other less restrictive measures have been found to be unsuccessful in protecting the patient or others from harm.

No restraints will be used on any patient without complete assessment by a qualified RN. This means nobody else may restrain any patient under any circumstances. All nurses have been specially trained in the use of restraints at Las Palmas and Del Sol. In addition, Charge Nurses and Supervisors have received advanced training in dealing with difficult patients.

ALTERNATIVES TO RESTRAINT:
♦ Environmental safety
♦ OT/PT consults
♦ Minimal stimulation
♦ Family involvement
♦ Diversional activities
♦ Sensory distraction
♦ Communication
ETHICS COMMITTEE
ETHICS COMMITTEE: READY TO ASSIST YOU,
YOUR PATIENT AND YOUR PATIENT’S FAMILY

Making decisions about health care often involves
difficult moral and ethical questions. It can be hard
to know what is the right thing to do.

Your personal beliefs, values and goals may differ
from those of your patient or other health care
providers. For example, decisions regarding the
removal not starting life support can be very difficult
decisions for the patient and family to make.
Because your patient’s family and other health care
providers share responsibility to make decisions,
disagreements or conflicts may develop about what
should be done.

If ethical problems or conflicts cannot be resolved by
talking with the patient, family, physician, or hospital
staff, you can request review or consultation with the
Hospital Ethics Committee. This special Committee
is made up of doctors, nurses, social workers,
administrators, chaplains and others who have been
trained to deal with these moral and ethical issues.
One of the Committee’s jobs is to support patients,
families and health care providers who are trying to
make these difficult decisions.

The Committee does not make treatment decisions.
It is there to provide advice and recommendations to
you and your health care providers.

You or a member of your family may request
consultation with the Ethics Committee by calling the
Nursing Supervisor

Las Palmas—521-1161  Del Sol — 595-9233

YOU CAN STOP GERMS BY STOPPING THEIR ROUTE OF TRANSMISSION.
This is the focus of every health-care facility’s infection
control program.

STANDARD PRECAUTIONS – are a most important part of the infection control program. Anyone who has
contact with a patient — including visitors — should understand how they work. STANDARD PRECAUTIONS
apply to all patients at all times!

TRANSMISSION BASED PRECAUTIONS
In addition, (CONTACT, AIRBORNE, AND DROPLET) are
utilized as needed with Standard Precautions. The Infection
Control manual addresses all precautions very specifically.
READ about Contact, Airborne and Droplet transmission.

VISITORS/STAFF MUST OBSERVE STANDARD AND TRANSMISSION
BASED PRECAUTIONS
♦ Hand-washing – Everyone who has contact with patients must wash their hands:
  • before and after patient visits.
  • after contact with blood or other body fluids or substances (or with equipment that touches these).
  • after removing gloves, masks & other protective gear.
  • before and after eating and using the bathroom.
♦ Use of gloves -- Everyone must wear gloves whenever contact with blood or other body fluids or substances is possible.
♦ Use of masks, goggles and other protective gear – These help protect your face and skin from contact. They’re used during any procedures where contact with blood or other body fluids or substances might occur.
♦ Handling wastes – Anyone handling wastes, linens or care items must avoid contact with blood or other body fluids or substances. You must dispose of needles and other sharp items in special containers. Visitors should seek advice from staff on disposal of items that might be contaminated.
STANDARD PRECAUTIONS APPLY TO EVERY PATIENT, ALL OF THE TIME. The use of Standard Precautions does not necessarily mean a patient has an infectious disease. USE THIS TECHNIQUE:

- Remove jewelry.
- Use warm water. Angle your hands downward.
- Apply soap and lather well.
- Scrub well for at least 15 and preferably 30 seconds – it’s friction that removes germs. Sing the “ABC’s” or “Happy Birthday” songs to yourself to help you remember how long to wash your hands,
- Get under nails, around cuticles and between fingers.
- Rinse your hands angled down.
- Dry your hands with a clean paper towel or an air dryer.
- Use a new paper towel to turn off the faucet
- When using alcohol-based gel hand cleaning products, you must let it dry to be effective.

WASHING HANDS PROPERLY MAKES A DIFFERENCE. The hands are the major way germs are spread! WASH YOUR HANDS OFTEN!

- Visitors should wash hands before and after visits.
- Wash immediately after any contact with potentially infectious material (blood, saliva, etc.).
- Follow standard and transmission-based precautions.
- Use recommended protective wear. If asked by the health-care team, visitors should wear gloves, gown and/or mask.
- Put protective wear on before entering the room.
- Put the gown on first, then mask, then gloves.
- Remove in reverse order (gown, mask, then gloves). Avoid touching the outer surfaces of the protective gear.
- Remove gloves by pinching cuff of first glove and peeling back.
- Slide your ungloved fingers under cuff of second glove and peel back.
- Dispose of protective wear, then WASH YOUR HANDS!

THE STAFF WILL BE HAPPY TO EXPLAIN THE REASONS FOR ANY PRECAUTIONS.

HELP KEEP INFECTION UNDER CONTROL.

LEARN how infection spreads.

UNDERSTAND THE STEPS that hospitals take to prevent the spread of disease.

DO YOUR PART to prevent the spread of infection and to support hospital rules.

HELP PROMOTE GOOD HEALTH FOR EVERYONE

THE JOINT COMMISSION

Las Palmas and Del Sol Medical Centers and their off-site facilities are evaluated during survey visits. We receive accreditation from The Joint Commission when we pass the survey.

The evaluation is based on standards developed by the Joint Commission. Accreditation means our organization has met strict standards for its operation and how it cares for patients.

Surveys can occur at any time unannounced. We pride ourselves on being ready at all times. This readiness provides the best care to our patients and the best place for staff to work.

Any Staff Member can be questioned by surveyors. Any patient safety or quality of patient care concerns can be reported to the joint Commission at any time.

The Joint Commission, HCA, Las Palmas and Del Sol are concerned about patient safety and the quality of patient care.