

# Student/Instructor Guide Connecticut Children's



# **WHO WEARE**

# **OUR CULTURE**

We are a family. One walk through our doors and you know we're all about kids. We put the needs of children above all else. We are committed to helping each other learn, develop and succeed every day. We believe that each of us, regardless of role, makes equally critical contributions to our success. We foster discovery, caring and teamwork, all in a fun, safe and trusting environment.

| OUR VALUES                  |   | OUR BEHAVIORS                                     |  |
|-----------------------------|---|---|--|
| Family-<br>Centered<br>Care | We place our patients and their<br>families at the center of all we do.<br>We partner with families and<br>embrace their involvement in all<br>aspects of service and care.   | Communicate<br>Honestly and<br>Openly             | <b>Communicate</b><br>Effective communication results<br>when information is shared<br>honestly and openly in a way that<br>provides opportunities for<br>meaningful dialogue. |
| Discovery                   | things. We ask questions, invest in research, find answers and share new knowledge with the world.  | Build<br>Relationships<br>&<br>Collaborate        | CollaborateDevelopandproductiveworkingrelationshipsboth  |
| Integrity                   | We are open, honest and ethical.<br>We take responsibility for our<br>actions and fulfill our commitments.  |   | outside our walls that lead to achieving results.  |
|                             | We admit our mistakes and learn from them.  | Act Like an<br>Owner and                          | <b>Opportunity and Ownership</b><br>Recognize opportunities for  |
| Teamwork                    | We live by the statement "I care if<br>you succeed." We work together to<br>achieve our goals. We value one<br>another and celebrate our  | Be Part of the Solution                           | improvement, take ownership, adapt<br>when necessary and be part of the<br>solution.   |
|                             | successes.  | Assume<br>Positive                                | <b>Be Positive</b><br>Be genuine and authentic.  |
| Quality                     | We come to work everyday with<br>the goal of making things better<br>than the day before. We pursue<br>the highest standards, the safest<br>care in the safest workplace and the<br>best outcomes in everything we do.                                    | Intent and<br>Demonstra<br>te Positive<br>Outlook | Look for the good in all<br>people and in all interactions.<br>Inspire, trust and motivate<br>each other in support of the<br>organization and its goals.                      |
| Respect                     | We honor the dignity and value of<br>every person and take pride in our<br>organization. We treat each other<br>as we wish to be treated and value<br>our workplace as our home. We<br>embrace diversity and the unique<br>contributions that each person | Excel in<br>Individual<br>Performance             | <b>Excellent Performance</b><br>Set an example by striving to<br>excel as an employee, acting as<br>a role model and holding yourself<br>and others accountable.               |

brings to Connecticut Children's.

# WEARE Connecticut Children's

# HISTORY

When Connecticut Children's opened its doors on April 2, 1996, it combined the benefits of a brand new facility with the pediatric programs and staff of Newington Children's Hospital and the pediatric departments of Hartford Hospital and the University of Connecticut Health Center. It became the state's first freestanding medical facility devoted solely to the care and well-being of children.

# **MISSION STATEMENT**

Connecticut Children's is dedicated to improving the physical and emotional health of children through family-centered care, research, education and advocacy. We embrace discovery, teamwork, integrity and excellence in all that we do.

#### **Organizational Core Values**

- Family-Centered Care
  Discovery
- Integrity
- Quality

TeamworkRespect

# COMMON CONNECTICUT CHILDREN'S ACRONYMS

| DPH<br>EMT<br>Team ED<br>PEDI | Department of Public Health<br>Executive Management<br>Emergency Department<br>Pediatric |
|-------------------------------|--|
| NICU                          | Neonatal Intensive Care Unit (32 beds-<br>located in Hartford Hospital)                  |
| PICU                          | Pediatric Intensive Care<br>Unit (18 beds)   |
| PACU                          | Post Anesthesia Care Unit  |
| DSU                           | Day Surgery Unit   |
| PCA                           | Patient Care Assistant   |
| OT/PT/ST                      | Occupational, Physical, & Speech<br>Therapy  |
| VAA                           | Visitor Access Assistant/Associate   |
| RT                            | Respiratory Therapist  |
| RD                            | Registered Dietician   |
| HIM                           | Health Information<br>Management/Medical Records   |

| HUC<br>TJC<br>CCSG | Health Unit Coordinator/Receptionist<br>The Joint Commission<br>Connecticut Children's Specialty Group PA<br>Physician Assistant |
|--------------------|--|
| APRN               | Advanced Practice Registered Nurse   |
| RN                 | Registered Nurse   |
| PFE                | Patient & Family Experience  |
| MS6                | 28 bed med/Surg unit specializing in GI,   |
|                    | Orthopedics, Urology/Nephrology,   |
|                    | Behavioral Health and Eating Disorder  |
|                    | patients from newborn to young adult.  |
| MS7                | 28 bed med/Surg unit that specializing in  |
|                    | Cardiac, Pulmonary, IMT, and Neurological  |
|                    | patients from newborn to adult. In addition, there   |
|                    | are two dedicated beds to our EMU (Epilepsy  |
| 1400               | Monitoring Unit) population.   |
| MS8                | 24 bed med/surg unit specializing in patients  |
|                    | with Hematological and Oncologic issues  |
| ASC                | from newborn to young adult.<br>A free standing Ambulatory Surgery Center  |
| CCSG               | Connecticut Children's Specialty Group- this is  |
| 0000               | the comprehensive name for our outpatient  |
|                    | Specialty Services, also known collectively as   |
|                    | the Ambulatory Department.   |
| MA                 | Medical Assistant  |
| MR                 | Medical Receptionist   |
| DMS                | Daily Management System  |
| AOC                | Administrator on Call  |
| CNO                | Chief Nursing Officer  |
| INR                | Institute of Nursing Research  |
| EBP                | Evidence-Based Practice  |
| SPS                | Solutions for Patient Safety   |
| HAC                | Hospital Acquired Condition  |
| WINK               | What I Need to Know  |
| WIWO               | Wash In, Wash Out  |
| Zone C             |  |
| Zone C             | Area in the Emergency Department for   |
|                    | Behavioral Health Patients   |
|                    |  |

# WHAT WE DO

# QUALITY IMPROVEMENT & SERVICE EXCELLENCE

Connecticut Children's is committed to continuous improvement of the quality of its services, systems, and processes for the benefit of its customers.

**Vision:** We are the medical center of choice in our region for families and providers seeking health care and treatment for infants, children and adolescents.

### JOINT COMMISSION ACCREDITED:

The Joint Commission is focused on improving the safety and quality of care provided to the public.

The Joint Commission accomplishes this goal by accrediting health care organizations like Connecticut Children's. During accreditation visits, The Joint Commission surveyors assess Connecticut Children's performance compared to The Joint Commission's hospital standards by using the "Tracer Method." During a "Tracer" the surveyors select charts representing the types of patients cared for at Connecticut Children's, and "trace" each patient's experience at the medical center through all the departments and services where care was provided.

### SERVICE RECOVERY:

Service Recovery is "making right what went wrong." Leonard Berry, 1995

#### What is the H.E.A.R.T. ® Model?

**Hear** Be present, Make eye contact, Use open body language, Listen for facts and EMOTIONS, Don't interrupt, Don't argue, Don't take it personally

**Empathize** Put yourself in their shoes, Verbally identify EMOTIONS, Acknowledge difficulty, Validate their feelings, and Use compassionate tone, rate, pitch, volume

**<u>Apologize</u>** Express regret for the situation, Apologize immediately, Make it blameless, Be sincere, Be specific **Respond** The **R** should never be done first, Take ownership, Address what <u>YOU</u> can, Set realistic expectations with patient, If unresolved, involve supervisor or Patient Representative, Follow up **Thank** Brings awareness of issues, Gives opportunity to improve, Validates concerns, Leaves lasting impression

### **PREVENTION:**

Set the stage and eliminate the need for service recovery by using the START with Heart Model.

Smile and greet warmly

Tell your name, role and what to expect

Active listening and assist

Rapport and relationship building

Thank the person

#### ALWAYS DEMONSTRATE THE KEY SERVICE BEHAVIORS:

- Acknowledge the other person
- Introduce self and role
- Use person's preferred name
- Clearly communicate expectations
- Offer to resolve concerns or forward to the appropriate person
- Use active listening
- Communicate empathy
- Use common courtesy
- Offer to help

### PATIENT REPRESENTATIVE:

Connecticut Children's Patient Representative represents and interprets the mission, policies, procedures and services of Connecticut Children's to patients and family members in support of Service Excellence. The Patient Representative is a resource and a liaison between the patient, the hospital and the community. The Patient Representative ensures patients' rights are respected, provides a channel for problem mediation and resolution, and promotes the highest level of quality of care and patient satisfaction. If you have a patient or family with a concern or complaint, the Patient Representative is available Monday through Friday at 860-837-5282 or you can page a Patient Representative through intellidesk.

## CHILD PROTECTION AND ABUSE

#### Child Protection at Connecticut Children's

- All individuals have a duty to recognize and respond to cases of suspected abuse or neglect of a child
- State law mandates that health care and educational providers with direct contact with children report all cases of abuse or neglect to the Connecticut Department of Children and Families (DCF)
- Connecticut Children's Suspected Child Abuse and Neglect Team (SCAN) serves as a consulting body to all staff and offers guidance with the reporting process as needed

### If you suspect child abuse or neglect:

- Notify your supervisor/instructor and consult with the family support clinician (social worker) on the unit. If you do not have a family support clinician, call Child and Family Support Services at 860.545.9700
- If a report to DCF is necessary:
  a. Call the DCF Careline at 800.842.2288
  within 12 hours.

b. Complete the Report of Suspected Child Abuse/ Neglect (form 136) and send it to DCF within 48 hours. Put a copy of the form in the medical record and send a copy of the form to Child and Family Support Services. .<u>DCF 136 document</u>

### **ERROR PREVENTION TECHNIQUES**

The Joint Commission cites communication as the leading contributor of sentinel events. A set of Error Prevention Techniques had been adopted in support of Connecticut Children's goal for continuous quality improvement and enhancing our culture of safety. These techniques are intended to aid staff by improve communication and allowing them to reflect on their practice.

#### STAR

Stop Pause for 1 to 2 seconds Think Focus on the act to be performed Act Perform the act Review Check for desired results

#### Speak-Up for Safety using ARC™

- Ask a question
- Make a Request
- Voice a Concern

#### SBAR

SBAR technique provides a framework for effective communication among members of the healthcare team. Use these steps to organize your thoughts before you hand- off information.

**S** = Situation (a concise statement of the problem)

**B** = Background (pertinent and brief information related to the situation)

**A** = Assessment (analysis and considerations of optionswhat you found/think)

**R** = Recommendation (action requested/recommendedwhat you want)

#### Safety Absolute

A Safety Absolute is a rule that is always invoked to prevent errors from occurring. Connecticut Children's Safety Absolute is always use two Identifiers for any patient care encounter: **Patient Name AND Medical Record Number OR Date of Birth** 

What do you do if identifiers do not match?

- STOP the process
- · Seek assistance to verify the patient's identity

#### Time Out for Safety

Before any invasive treatment/procedure or any procedure performed requiring procedural sedation, STOP to confirm:

- Correct Patient
- Correct Site and Side
- Correct Procedure
- Correct Patient Position
- Correct Informed Consent
- Availability of any Special Equipment

### FAMILY CENTERED CARE

Our Patient and Family Experience Program creates the foundation for achieving Connecticut Children's strategic goal of being consistently viewed by families and referring providers as the most accessible and service-oriented provider of children's medical services in New England.

We believe the best way to achieve this is to make sure we are "family centered" in everything we do. At the heart of family care, providers and the family are partners, working together to best meet the needs of the child. Parents And family members provide the child's primary strength and support. Their insights will enhance our knowledge, improve care and help us design better programs and friendlier systems.

### CORE PRINCIPLES: FAMILY CENTERED CARE

*Dignity and Respect.* We listen to and honor patients and family perspectives and choices. Patient and family knowledge, values, beliefs and cultural backgrounds are incorporated into the planning and delivery of care

Information Sharing. We communicate and share complete and unbiased information with patients/ families in ways that are affirming and useful. Patients/ families receive timely, complete and accurate information in order to effectively participate in care and decision-making *Participation*. Patients/families are encouraged and supported in participating at the level they choose *Collaboration*. Patients/families, healthcare practitioners and hospital leaders collaborate in program and policy development, implementation, and evaluation; in healthcare facility design and in professional education, as well as in the delivery of care

### THE PATIENT BILL OF RIGHTS

Informs our patients what they can expect, but it is also a framework that holds us accountable to the regulatory agencies, DPH and the Joint Commission. The Patient Bill of Rights can be found under Policies on the Connecticut Children's Intranet.

In addition to looking at care and processes from a patient and family perspective, work is being done with referring providers to make sure the experience of referring to Connecticut Children's is one that acknowledges and reinforces the importance of the community-based provider and is responsive to the needs of the referred patient and family.

### CHILD AND FAMILY SUPPORT SERVICES

At Connecticut Children's, we are committed to caring for the "whole child." While providing quality medical and nursing care, we also attend to emotional, developmental, behavioral, social and family needs. All Connecticut Children's staff is involved in this care and the department of Child and Family Support Services provides critical specialists:

- Child Life Specialists & Arts Programming
- Family Support Clinicians (Clinical Social Workers)
- Chaplains
- Translators/Interpreters and Cultural Mediators

#### **Diversity and Cultural Competence**

The Mission of Connecticut Children's is to serve children and families from all cultures, classes, races, religions and lifestyles with care which is consistent with and supportive of their diverse backgrounds. We strive to provide culturally competent care by ensuring optimal communication, anticipating and facilitating cultural practices and making all Connecticut Children's patients and families feel welcome and comfortable while here.

Furthermore, we are committed to maintaining a work environment that is supportive and fair to a diversity of staff members.

#### **Population Specific Competencies**

A wide variety of patients receive care at Connecticut Children's. Patients range in age and developmental level from neonates/infants to adolescents and even young adults. Many illnesses, injuries and diseases are seen.

Patients are also from many diverse cultures. In working with patients, all care, treatment and services are provided to best meet the needs of the different populations served.

This includes evaluations/diagnostic procedures, medical treatments and medication dosage, as well as the way we:

- Communicate with the patient/family
- Provide education, comfort and support to patient/family
- Anticipate and minimize patient/family fears and anxieties
- Create a developmentally and culturally appropriate, child friendly environment

#### **Communication with Patients and Families**

It is our policy to take reasonable steps to provide equal access to its services, programs, activities, and other benefits, including to those who have limited English proficiency (LEP) and those who are hearing or speech impaired, visually impaired, or have other communication needs. This is accomplished by providing appropriate communication and/or language assistance services through qualified interpreters and translators and communication aides whenever necessary to ensure effective communication.

- Interpreters, translators and communication aides are provided at no cost to the person being served
- Patients and their families are informed of the availability of such assistance

To request services call Child and Family Language Services at 860-545-8700. There are a variety of types of interpreters and communication aids available.

# PATIENT AND FAMILY EDUCATION

Our pledge is to provide education to all patients/families to the optimum of health. The patient/family will be involved in creating the teaching plan.

#### Principles:

- Interdisciplinary approach to patient/family teaching
- Assess for current/ongoing needs and readiness to learn
- Evaluate and plan for learning barriers, cultural/language needs, and learning preferences
- Provide teaching for the following:
  - Diagnosis and plan of care
  - Medications
  - Medical equipment/supplies
  - Food/drug interactions
  - Procedures
  - Rehabilitation techniques
  - Pain management
  - Additional/community resources
  - Healthy/preventative behaviors
  - Discharge needs
- Provide educational materials/tools
- Document teaching on appropriate Care Plan

Academic tutoring is provided in coordination with the Connecticut Children's School and child's school district, as appropriate. For more information, please see the policies on the Intranet.

# PAIN MANAGEMENT & COMFORT CENTRAL

At Connecticut Children's, our pledge is to create an environment where comfort and caring for the child are inseparable.

#### Principles:

- All patients have the right to the best pain relief possible
- Involve patient/family in pain management
- Assess pain initially, and ongoing, at regular intervention
- Use pain rating scales pre and post-intervention

- Plan and implement pain-relieving interventions
- Document pain scores and all related data
- Provide pain teaching
- Plan and discuss discharge needs
- Provide educational materials
- Collaborate with Child Life or other health care disciplines

#### **Clinical Application:**

- Try to use local anesthetics for blood work and IV catheter insertion
- Use procedures room, leaving the child's room as a safe place
- Use distraction techniques appropriate to the child's age
- Provide sedation when necessary
- Use Child Life or medical play before procedures
- Keep child as comfortable as possible postprocedure
- Contact 545.9997 for pain consultation, if needed

# COMFORT CARE

Comfort Care is Connecticut Children's palliative care program. Our mission is to provide optimal care focused on enhancing quality of life for our children and their families regardless of diagnosis or probability of survival. The program is committed to the promotion of palliative care principles into all aspects of patient/ family care. This care embraces physical, emotional, social, and spiritual needs.

Areas of focus include professional education, clinical care/advocacy, and research.

# BEREAVEMENT

Connecticut Children's Medical Center is committed to supporting families through the tragedy of losing a child.

- At the time of the loss, care is delivered in a way that gives the family as much control as possible through the End of Life Protocol
- Connecticut Children's offers a parent support group that meets monthly for bereaved parents who have lost a child
- Memorial services for families and staff take place several times a year to remember children who have died
- The Bereavement Committee coordinates our efforts to support families through their loss. The committee is open to all staff who is interested in bereavement

# SAFETY & COMPLIANCE

# HIPAA

HIPAA is the acronym for Health Insurance Portability and Accountability Act that was enacted by the Federal Government in 1996. These regulations were designed to assure health insurance portability, reduce healthcare fraud and abuse, guarantee security and privacy of protected health information, and enforce standards for the exchange of this information. The regulations reinforce the hospital's stance on patient rights to privacy and access to their protected health information, and provide overall standards for the maintenance, protection, security and electronic transmission of protected health information that identifies individual patients.

Connecticut Children's understands that medical/health information is personal and private. We are committed to protecting the confidentiality of all protected health information.

Protected Health Information (PHI) is defined as any information, whether oral or recorded in any form or medium, that is created or received by the Medical Center and its employees, or its business associates, and relates to the past, present, or future physical or mental health condition of an individual, the providing of health care to that individual, or payment for the provision of these health care services. No matter what your role is as an employee or volunteer within the organization, you probably encounter information about other people in some format. In order to maintain the privacy of PHI, we need to think not only about protecting patient charts or medical records, but also all registration information, billing and other financial information whether written, oral or electronic.

#### Remember, to Protect PHI:

Keep all verbal communication appropriate:

- Never discuss PHI outside of work. Be careful not to discuss PHI in hallways, elevators, cafeteria or common areas
- Do not leave patient data or information unattended on FAX machines, computer screens, copiers, or printers
- Do not share personal electronic passwords, login codes, keypad codes or other secure information
- Keep telephone conversations safe and secure. PHI should only be shared with the patient, parent, or legal guardian
- Do not leave confidential information on answering machines/voicemail

Connecticut Children's is required by law to keep health information private; and to provide a detailed Notice of our legal duties and privacy practices relating to health information; and to follow the terms of that Notice.

#### PHI Can Include:

- Name; Address; Telephone Number
- Social Security Number
- Date of Birth
- Vehicle Identifier
- Medical Record Number
- E-mail Address
- Health Plan ID Number
- Fax Numbers
- WEB URLs
- Internet Protocol (IP) address numbers
- Account Numbers
- Certificate/License Number
- Photo ID
- Finger and Voice Prints (Biometric Identifiers)
- Dates (except years) associated with patient
- Any combination of information that can lead to identity of patient

### **HIPAA** Overview

#### 1. Rules Under HIPAA:

- Privacy
  - Goal is to keep patient information confidential unless exception applies (e.g., TPO-Treatment, Payment and Operations)
  - Addresses the use and disclosure of individuals' Protected Health Information (PHI)
- Security
  - Goal is to make sure we implement necessary safeguards to keep PHI secure
- Breach Notification
  - Requires notification to individuals of breaches of unsecured PHI
  - Definition of a Breach: An impermissible access, use or disclosure of PHI under the Privacy Rule that compromises the security or privacy of the protected health information
- HITECHAct
  - Revise privacy requirements and broaden applicability of security rules
  - Business associates required by law to comply with HIPAA Security Rule
  - State AG Enforcement Powers

#### **Key HIPPA Information**

- "Minimum Necessary Doctrine"
  - This doctrine mandates that each team member has access to ONLY the information needed to perform his/ her daily tasks
    - Share patient information with team members only if they need it to complete their tasks
  - We are required to report a breach at Connecticut Children's. If you suspect or know of a breach, please contact the General Counsel.

# ENVIRONMENT OF CARE/SAFETY & SECURITY

The Joint Commission has established Environment of Care (EOC) Standards. The goal of EOC is to provide a safe, functional, supportive, and effective environment for patients and their families, staff members, and other Individuals visiting Connecticut Children's while delivering quality patient care.

The EOC is divided into 7 distinct areas as follows:

- 1. Safety
- 2. Security
- 3. Fire Prevention
- 4. Emergency Management
- 5. Hazardous Materials and Waste
- 6. Medical Equipment
- 7. Utility Systems

### SAFETY

Connecticut Children's is committed to providing an environment free from unnecessary risk of hazard to our employees, patients and visitors.

### SECURITY

All staff members are expected to be alert to suspicious activities/behaviors that potentially place patients/fellow staff at a security risk and contact Connecticut Children's Security (88222) immediately. In Waterbury, dial \*1\* and security will be dispatched. Offsite locations should dial 911.

- If threatened or at risk of assault, contact security immediately
- Report all incidents to your supervisor
- Push a panic button to alert security. Staff should locate the panic buttons in their departments. Staff should report Who, What, When, Where and Why to security when they arrive

#### Access Control

Connecticut Children's will issue an "Easy Lobby" visitor pass to all visitors. The intended location is noted on the pass. Easy Lobby passes are also available in the reception area in Waterbury.

The passes are date-stamped and are good for a defined period of time. Vendors, contractors, and individuals with appointments in ambulatory clinics are also required to wear guest passes.

- An adult must accompany and supervise children younger than 14 years whenever they visit an inpatient unit at Connecticut Children's
- If a visiting child younger than 14 years is observed to be unattended or unsupervised, s/he will be returned to the parents/guardians, who will be reminded that they must supervise the child at all times
- If found unattended or unsupervised a second time, the parents/guardians will be asked to remove the child from the hospital

#### Student Responsibilities – Main Campus:

- Student badge must be worn & visible at all times
- No sharing of badges with other students
- If student forgets badge, they must sign in at the desk on 1st and /or 2nd floor
- Be observant of any unattended/unsupervised children

#### Medical Emergency Response:

<u>Code Blue:</u> A cardiac or respiratory arrest or any other medical emergency when help is needed in less than 20 minutes. All Connecticut Children's code blue events for the main hospital campus at 282 Washington Street are managed by designated code blue responders

Rapid Response Team (RRT): A medical-surgical based team that responds to urgent medical needs that do not meet the definition of a code blue for a visitor, staff member or outpatient who is on the main hospital campus at 282 Washington Street <u>Medical Emergency Team (MET):</u> A Pediatric Intensive Care based team that responds under certain clinical conditions that do not meet the definition of a code blue to assist in evaluation and escalation of care

Behavioral Health Response Team: A behavioral health response team that responds to assist with behavioral health planning for patients with potentially escalating behaviors. This team will help support team members caring for individuals with an active or potential behavioral health crisis.

To activate these teams call the call the Resource Center at 8-8888. Provide the operator with the location of the individual and a brief summary of the situation. Additionally, for a Code Blue, there are Code Blue buttons available in the rooms

See our policies on the Connecticut Children's intranet for further information on specific locations (such as the Hartford and Farmington Neonatal Intensive Care Units)

For offsite patients: First aid services and/or 911 emergency services will be used to treat medical emergencies

#### ABDUCTION/MISSING PATIENT

In the event of a possible abduction/missing patient:

Ensure all resources of Connecticut Children's are immediately focused on the return of patient believed to be taken by unauthorized person(s) If a suspected abduction has taken place, call to alert Security (8-8222):

- The Hospital Emergency Operations Plan will be activated. An overhead announcement of "Missing Child" will be heard
- The staff on the unit will immediately search the unit for the patient
- All entrances to the Medical Center will be staffed by security and no one will be permitted to enter or exit. Staff should immediately assist in securing department entrances and exits and report any

suspicious individuals All areas of the Medical Center and other area of the Medical Center campus and adjacent Hartford Hospital campus will be searched by security and police personnel

#### BOMB THREATS

In the event of a bomb threat:

- Contact security immediately with the information and details (8-8222)
- · Cooperate fully with leaders and authorities
- You may be asked to search your area for unfamiliar objects

#### WORKPLACE VIOLENCE

Connecticut Children's maintains a zero tolerance policy towards workplace violence. Any person making threats, exhibiting threatening behavior, or who engages in violent acts on the property of the Medical Center will be removed from the premises by Security

### FIRE PREVENTION

The goal of the Fire Prevention Plan is to protect building occupants from fire and the products of combustion. The facility must pass inspections for compliance with law, regulation, and accreditation including compliance with the Life Safety Code. Deficiencies with these codes must be corrected immediately. Any items that cannot be corrected within a short period of time must be addressed through Interim Life Safety Measures to protect building occupants from fire and the products of combustion.

Staff should locate the fire alarm pulls and extinguishers in your work area. Staff should pull the alarm closest to the source of the fire. An alarm is located adjacent to stairwell exits

In the event of a fire, staff will hear an alarm and an overhead announcement of Fire Alarm Activation followed by the location If you should encounter a fire, utilize the following process:

#### RACE

**R** - Rescue/Remove any patients in immediate danger from a fire

**A** - Alarm using fire alarm pulls/Alert Security by dialing 88222

- C Contain fire if able (close doors and windows)
- E Evacuate Extinguish (see PASS)

If staff members are comfortable using an extinguisher to put out a fire, remember PASS: **PASS** 

- **P** Pull the pin,
- A Aim the nozzle/hose at the base of the fire,
- **S** Squeeze the handle together,

**S** - Sweep the nozzle side to side to extinguish the fire

#### EMERGENCY MANAGEMENT – MAIN CAMPUS

The Hospital Emergency Operations Plan (HEOP) is activated to guide the medical center in managing necessary response, mitigation and recovery activities associated with internal and external emergency situations. When the HEOP is activated, an overhead page is heard. The plain language activation categories are as follows:

| Emergency Event  | Plain Language<br>Emergency<br>Communication                           |
|--|--|
| Fire   | Fire Alarm Activation +<br>Location                                    |
| Active Criminal Event<br>(i.e., active shooter,<br>armed Intruder) | Armed Intruder +<br>Description + Location                             |
| Missing Child  | Missing Child/Infant + Age<br>+ Description + Last<br>Location         |
| Mass Casualty  | Mass Casualty + Location   |
| Hospital Emergency<br>Operations (all other<br>activations)        | The Hospital's Emergency<br>Operations Plan has been<br>activated for: |
|  | + Description Emergency +<br>Location if applicable                    |

# HAZARD COMMUNICATION (29 CFR 1910.1200)

Hazardous substances include flammable, corrosive, reactive, toxic and radioactive materials

- Be familiar with which hazardous materials exist in your area
- Ensure that all containers are labeled with the chemical name, manufacturer, hazardous ingredients and hazard warnings. Keep substances in original containers
- Refer to the Material Safety Data Sheet (MSDS) for information about a specific chemical and the associated protective measures to be followed
- Each Department has a binder containing the MSDS's for each chemical in use in your area. If an MSDS is not available, contact your safety ambassador or the safety officer
- Do not use any substances stored in an unlabeled container

#### SPILLS OF HAZARDOUS MATERIALS

Report all hazardous spills to Security Only staff properly trained in spill control of hazardous materials is to clean the spill

#### WASTE MANAGEMENT

- Regular Trash: For disposal of all trash that does not fall into other waste types listed below (black/gray bin with clear plastic bag liner)
- White Paper for Recycling: Put all white paper in the small blue bins designated with white recycle symbol. This bin should not be lined with any plastic
- Confidential Paper Waste: Use the large off white containers that are secured with a locking mechanism and are located throughout the facility
- *Glass/Metal Recycling:* Use large round blue recycling containers with white top that are located on the garden level and in lounge areas throughout the medical center

- Biohazard Waste: Put all biohazard waste in waste containers that are lined with red plastic
- Sharps (any item which may puncture the skin): Must not be placed in the plastic lined bins. Dispose of all sharps (both used and unused) in sharps containers. Call 5-TEAM to change container when 75 percent full
- Chemical Wastes: Chemical wastes should not be dumped down drains or put into regular trash/bio hazardous waste or other such waste receptacles. Consult with Safety Officer for proper disposal requirements as these may be considered hazardous to the environment and would require offsite disposal using a Hazardous Waste Manifest and tracking with a RCRA (Resource Conservation and Recovery Act) Generator Identification Number
- *Radioactive Waste:* At Connecticut Children's Main Campus call 5-TEAM to dispose of all radioactive materials. The medical center has a contract with Hartford Hospital for Radiation Safety Services

### MEDICAL EQUIPMENT

The Medical Equipment Management Program is established to provide a safe and supportive environment for the efficient and effective provision of patient care services while minimizing the risk of using medical equipment through regular inspection, preventative maintenance and education of equipment users and maintainers. Connecticut Children's has a contract with Hartford Hospital Biomedical Engineering Department.

#### Electrical Safety

- Report all electrical safety issues to your supervisor
- Take all damaged equipment out of use and label appropriately
- Use only approved/inspected electrical devices
- Inspections are to be conducted by Engineering
- Use Red Plated Outlets for generator power
- Inspect outlets before use
- Inspect device before use. Pull the plug, not the cord
- Make sure power on equipment is turned off when plugging equipment in
- Liquids and electricity are dangerous. Keep all areas on and around electrical devices dry
- Keep equipment ventilation clear
- Avoid using extension cords

#### MRI Safety

Magnetic Resonance Imaging is a diagnostic tool that provides accurate, detailed pictures of the inside of the human body. It combines a strong magnet and radio waves into an advanced computer system to display pictures that are highly detailed. MRI uses no X-ray's and is noninvasive, painless, and has no side effects.

The magnet is very powerful and is 30,000 times stronger than the Earth's magnetic field. The magnet looks like a tunnel and is open at both ends. It does not close up or spin around, but it makes very loud noises while it is scanning. THE MAGNET IS ALWAYS ON! No one will be allowed to go into the MRI scan room until any and all metal objects are removed from their body and an MRI safety sheet is filled out to screen for any metal in the body.

You will be permitted to enter the MRI scan room only if it has been determined that it is safe for you to do so by MRI staff.

# INFECTION CONTROL

Connecticut Children's has a comprehensive Infection Control Plan with policies and procedures designed to prevent and control infections in patients, families, visitors, employees and others who may use our services or work on site.

Please refer to the Infection Prevention Manual available on our Intranet, or consult with the Epidemiology Nurse for more specific information.

**Hand Hygiene** is the most important practice to prevent the transmission of infectious agents. You are required to wash your hands with soap and water or use an alcohol- based hand rub to cleanse your hands. Connecticut Children's follows three vital behaviors for hand hygiene:

1. WIWO (Wash in and Wash Out) of every patient room or location

2. 200% Accountability - Do your best to follow hand hygiene expectations and help others by reminding them to sanitize their hands when they forget

3. Say "Thank You" when reminded to sanitize your hands

- "Standard Precautions" when the likelihood of contact with blood, body fluids, non-intact skin and mucous membranes of any patient is anticipated. The use of personal protective equipment (e.g., gloves, gowns, masks, eye protection) can prevent transmission of infectious agents.
- "Transmission-Based Precautions" are used when patients are known or suspected of having a communicable infection. Specific Isolation signs, for Contact, Droplet and Airborne precautions are posted to notify staff and visitors. Additional details can be found in the Infection Prevention Manual online.

Cleaning and disinfection is required for all reusable equipment, including toys and transport devices.

# **OCCUPATIONAL HEALTH**

Travel employees, volunteers, students and contract workers (i.e. construction workers) are requested to report to Hartford Hospital Emergency Department for any immediate or emergency medical treatment or post exposure follow up, and contact parent company immediately if appropriate.

House officers, residents and medical students can seek urgent/ emergency care in the Occupational Health/Hartford Hospital Emergency Room and are required to follow up with the consortium health services at UCONN.

# DEAF AND HARD OF HEARING

Quick Reference Guide - Deaf and Hard of Hearing

- 1. Recognize the person as deaf or hard of hearing.
  - a. Assess all patients for deafness or hard of hearing
- 2. Determine what their needs are:
  - a. Ask what type of interpreter is needed: ASL (American Sign Language) or CDI (Certified Deaf Interpreter)
  - b. Ask if assistive devices are needed.
    Assistive devices include: Video Remote Interpreting, Amplification Devices, Pictograms, Flashers/Vibrators, Sound Wizard
- 3. Provide the services. For an interpreter, contact Child & Family Language Services at 860-545-8700
- 4. Communicate to the best of your ability until an interpreter arrives. Communicate when interpreter will arrive.
  - a. Offer a pencil and paper for writing
  - b. Use pictograms
  - c. Use family members with caution and as a last resort. Use of an interpreter is needed for all medical interpretations
- 5. Document services and outcomes in the medical record

# **PATIENT RIGHTS**

Connecticut Children's is committed to protecting patient rights in all aspects of our patient care and service delivery. The following are some of the processes and sources of information concerning these rights:

- The Medical Center's Patient Bill of Rights is posted in every patient care area. A hospital policy explains these rights and includes Connecticut Children's Patient Bill of Rights
- Hospital policies exist that address patient information contained in patient records and on computers
- Medical center employees have access to the Ethics Committee for the resolution of patient care dilemmas
- A hospital policy and process exist for resolution of patient complaints. For more information, please refer to policies on the Intranet

#### ADVANCE DIRECTIVES

Advance directives are decisions made by adult patients in advance that clearly state what they would like done in the event of an irreversible or terminal illness. Advance directives only apply to patients over age 18. We include the family in health care decisions as well as the child to the extent that the child can developmentally participate. If there is an Advance Directive in place, the wishes delineated in the directive will be respected and care tailored to meet those wishes.

# **CORPORATE COMPLIANCE**

Connecticut Children's is committed to providing compassionate, quality healthcare to all the patients and the communities we serve. To achieve and maintain patient trust, Connecticut Children's acts with integrity, fairness and honesty in everything we do. Guided by our values and our mission, the Corporate Compliance Program and Code of Conduct set forth the principles that guide our delivery of patient care and services, as well as the way we conduct business and behave in the workplace. The Code of Conduct is everyone's responsibility in the performance of daily activities at Connecticut Children's. If you have any concerns about a situation you are facing, feel free to discuss with your manager, or the confidential Compliance Hotline at 877.363.3073 (si habla espanol 800.297.8592). Remember, everyone has a duty to report concerns about quality of care, patient safety and waste, fraud, and abuse and inappropriate release of information (e.g. PHI, SSN, and Personal Information)

### RISK MANAGEMENT

Report any actual or potential events or patient safety concerns to risk management by filling out an Occurrence report form or by calling 860.837.5592. Adverse events in which a patient is injured must be reported to the Director of Risk Management immediately by pager (860.220.4439).

### SENTINEL EVENTS

It is the policy of Connecticut Children's that serious events involving the health and safety of patients will be investigated using Root Cause Analysis or other performance improvement methods to identify causes and reduce the probability of the same or similar events occurring in the future.

 Report all adverse patient-related events immediately to the Director of Risk Management

- The Director of Risk Management will investigate non-serious incidents in accordance with standard follow-up and analysis procedures
- If the event is "serious" or potentially a sentinel event, the Director of Risk Management will inform Administration and the Patient Safety Committee chairman
- A Root Cause Analysis Team may be formed to identify factors/processes that contributed to the occurrence. An action plan will be developed based on the findings of the Root Cause Analysis Team. Risk reduction strategies will be identified, and recommendations for charge will be reported to the patient safety committee

### RESTRAINTS

It is the Medical Center's philosophy to have an environment of "least restrictive" measures possible when deciding whether or not it is necessary to place a patient in restraints. For more information, refer to Connecticut Children's Policy on Restraints and Seclusion available on the Intranet.

### SMOKING AND TOBACCO USE

Connecticut Children's exists to support the wellbeing of the children and families we serve. To this end we will maintain a smoke-free environment, and no smoking or tobacco use will be allowed inside the buildings or on the grounds that comprise Connecticut Children's Medical Center, including the campuses in Hartford, Waterbury and all other satellite locations where we provide our services. For more details, refer to Connecticut Children's Policy: Smoke & Tobacco Free Facility.

## SEXUAL HARASSMENT

Connecticut Children's believes that all individuals are entitled to be treated with personal and professional respect. It is the Medical Center's policy to provide a work environment free from sexual harassment.

- No employee should be harassed on the basis of gender by another employee, vendor or visitor
- No patient, vendor or visitor should be harassed by an employee on the basis of gender
- Sexual harassment is defined as any unwelcome advances, requests for sexual favors, or other verbal or physical conduct of a sexual nature where:
- Submitting to advances is a term or condition of employment
- Submitting to or rejecting advances affects employment decisions
- Such conduct creates an intimidating, hostile or offensive working environment which unreasonably interferes with an individual's work performance
- •

Sexual harassment can involve:

- "Quid Pro Quo," which literally means "this for that," where any statement or action by a supervisor or other management person is made that implicitly or explicitly makes a connection between sexual favors and conditions of employment.
- A "hostile work environment," which can involve a wide variety of unwanted, unwelcome and repeated behaviors such as: Sexually suggestive statements or questions, offensive jokes, pornography, sexual innuendoes, offensive touching, patting, repeated requests for dates, etc.

### **DIVERSITY, EQUITY, & INCLUSION**

Connecticut Children's is committed to an organizational awareness and recognition of diversity, equity and inclusion (DEI)

• Diversity:

Understanding, accepting and valuing differences among people • Different races, ethnicities, genders, ages, religions, disabilities and sexual orientations • Differences in education, personalities, skill sets, experiences and knowledge bases

• Equity:

An approach or process Ensures everyone has access to the same opportunities • Recognizes that we do not all start from the same place because advantages and barriers exist • A process that acknowledges uneven starting places and seeks to correct the imbalance

• Inclusion:

An outcome Collaborative, supportive and respectful environment that increases the participation and contribution of all • Removes all barriers, discrimination, and intolerance • Everyone genuinely feels included, valued, and supported

# WEARE Connecticut Children's