VOLUNTEER ORIENTATION Welcome to Jefferson Health New Jersey





You are joining an exceptional team!





Table of Contents

- About Jefferson Health AND Your Volunteer Department
- Being a Jefferson Health Volunteer
- Customer Service
- Safety Overview
- Wrap Up







LISA FEDORICK CORPORATE MANAGER, VOLUNTEER SERVICES

CHRISTINE BIANCHI ADMINISTRATIVE SECRETARY, VOLUNTEER SERVICES



YOUR VOLUNTEER SERVICES DEPARTMENT







IT'S AN HONOR

RANKED 16TH BEST HOSPITAL IN THE NATION!

THOMAS JEFFERSON UNIVERSITY HOSPITAL

Among the Top 10 in the Nation

EAR, NOSE & THROAT

OPHTHALMOLOGY

Wills Eye Hospital

ORTHOPEDICS

Rothman Institute at Jefferson

Philadelphia Hand to Shoulder Center at Jefferson

Nationally Ranked Specialties

CANCER

Sidney Kimmel Cancer Center at Jefferson

CARDIOLOGY & HEART SURGERY

DIABETES & ENDOCRINOLOGY

GASTROENTEROLOGY & GI SURGERY

GERIATRICS

NEPHROLOGY

NEUROLOGY & NEUROSURGERY

Vickie and Jack Farber Institute for Neuroscience at Jefferson

UROLOGY





— OUR MISSION —

WE IMPROVE LIVES.

— OUR VISION —

Reimagining health, education, and discovery to create unparalleled value.

— OUR VALUES —







PUT PEOPLE FIRST Behavioral Expectations

Service-Minded

Anticipates the needs of our students, patients, families, and fellow employees to provide a positive experience.

Respectful

Shows empathy and consideration for the feelings and rights of others; communicates openly and listens without judgment; demonstrates civility.

Embraces Diversity

Appreciates differences of others; works well with others to solve problems and achieve results.

BE BOLD & THINK DIFFERENTLY Behavioral Expectations

Innovative

Thinks outside the box. Embraces change and contributes to the success of new ideas.

Courageous

Respectfully challenges the process to achieve better results; speaks up even if difficult.

Solution Oriented

Looks for answers to problems and challenges.

Seeks out and/or accepts additional responsibilities.

DO THE RIGHT THING Behavioral Expectations

Safety Focused

Speaks up to create and sustain a safe environment; works to prevent errors and reduce harm.

Integrity

Demonstrates ethical behavior, honesty, and good judgment in all interactions.

Accountability

Accepts responsibility for individual actions and performance.

ONE JEFFERSON. ONE CODE.

Principles of Our Enterprise Code of Conduct and Ethical Behavior



Respect and Fairness Promote an environment free of discrimination and harassment.



High Standards of Patient Care Honor every patient's right to receive and participate in their own care.



Avoid Conflicts of Interest Disclose relationships that affect business, patient care, and research.



Integrity with Payers
Prevent, detect, and report
Fraud, Waste, and Abuse.

Honesty and Integrity
Tell the truth and do
the right thing when
no one is watching.



Maintain Confidentiality
Safeguard confidential
Information and disclose
according to relevant laws.



Academic and Research Integrity

Be honest in academic

work and research;

disclose potential conflicts.



Lawful Political and Government Activity
Do not use Jefferson's resources for political campaigns.





Safe and Healthy Environment
Speak up and promote a culture of safety for all; Follow all precautions.

Jefferson Alert Line

Report concerns confidentially and anonymously.



➡ Jefferson.MyComplianceReport.com

Enterprise Office of Corporate Compliance

Led by Sonya Lawrence, BSN, JD, CHC Senior Vice President and Enterprise Chief Compliance Officer



ComplianceQuestions@Jefferson.edu

We're Here to Help You Do the Right Thing



Being a Jefferson Volunteer....

- Guidelines
- Dress Code and Personal Appearance
- Electronic Devices/Social Media
- Responsibilities and Regulations
- Injury/Illness on Duty
- Harassment/Discrimination



THE VOLUNTEER PROCESS

- Application
 - References
 - Medical Clearance
 - Bio
- Information Session
- Orientation
- Vaccinations
- Assignments
- Training
- Service





VOLUNTEER SERVICE DISMISSAL

Jefferson Health New Jersey reserves the right to terminate your services as a volunteer if it is in your best interest or in the best interest of the organization. Volunteers are automatically dismissed for any violation of Hospital Standards or failure to comply with the policies and procedures for volunteers.



JEFFERSON HEALTH DEPARTMENT OF VOLUNTEER SERVICES GENERAL GUIDELINES

OFFICE HOURS: The Volunteer Office is generally staffed one or two days a week. A schedule will be posted on the door of the days and hours the Corporate Manager will be on site. You may always leave a detailed message at any of the following numbers and the Corporate Manager or the Administrative Assistant will return your call. It is best to leave a good time to return your call as well.

Cherry Hill 488-6852Stratford 346-7852

• Washington Twp. 582-2852 OR 218-5696 (Administrative Assistant)

Volunteer Services Email JH_NJ_VolunteerServices@jefferson.edu

**Remember: You must call the office as well as your supervisor if you are unable to report for duty on your assigned day. Please make sure you have the appropriate phone number.



General Guidelines (Continued)

- **RESPONSIBILITIES:** Volunteers are responsible to the department supervisor as well as the Corporate Manager of Volunteer Services. The Corporate Manager is responsible for placement assignments, scheduling, etc. The department supervisor is responsible for working with the Volunteers on a day to day basis and is the main contact for issues regarding duty assignments and change in scheduling. Any permanent change in scheduling must be reported to the volunteer office.
- **TELEPHONES:** Telephones in the hospital are for business purposes. Please don't use hospital telephones for personal calls except in the case of an emergency. Please don't ask your family or friends to contact you in your assigned area. Cell phones, as well as all electronic devices, must be turned off during your shift.
- SCHEDULES: Schedules will be determined by the Volunteer's schedule and department availability. Any changes must be discussed with the department supervisor and the Corporate Manager of Volunteer Services.
- **BREAKS:** Each Volunteer who works a 3.5 or 4 hour shift is entitled to a 30 minute break in the cafeteria (3 hour shifts are entitled to a meal before or after you shift). Your meal is free (a \$6.00 limit) upon presentation of you volunteer ID badge (once activated). If your meal costs more than \$6.00, you will need to pay the difference out of pocket. You must obtain the approval of your department supervisor to take your break. Make sure you report back when you return.



PERSONAL APPEARANCE GUIDELINES

- Uniform Jackets: All volunteers are issued a volunteer jacket or golf shirt. Uniforms must be worn at all times while a volunteer is on duty in the hospital. Junior Volunteers must wear the junior volunteer golf shirt, khaki color pants and white sneakers.
- ID badges: must be visible (near shoulder or chest) and worn at all times.
- Overall Clothing: neat, unwrinkled and in good repair. Appropriate and modest length skirts/dresses are permitted (no mini skirts). Stretch pants, sweat pants, capri's, shorts and jeans are not permitted.
- Footwear: Clean, safe and functional. For safety reasons, sandals and open-toed shoes are not permitted.



REMINDER: PERSONAL HYGIENE/DRESS CODE

- As a volunteer, you are in contact with the public and patients. For this reason, it is important that your appearance is dignified, neat and clean at all times.
- Personal hygiene is extremely important. Breath should be fresh and body odors pleasant. Medications sometime cause patients' senses to become sensitive, and it is important to remember that while fragrances can be pleasant, they should only be used in moderation.



ELECTRONIC DEVICES/SOCIAL MEDIA

- Use of any personal communication, personal electronic device or personal phone during volunteer time is strictly prohibited. This includes, but is not limited to: texting, emailing, accessing the internet and receiving or making personal phone calls. Use should be limited to off duty time such as breaks or meal time and should be used only in non-patient care areas such as break rooms, lobbies (not behind the Information Desk) and cafeterias.
- Social Networking Sites: Jefferson Health recognizes that social networking sites have become a prevalent method of communication in our culture. Jefferson Health respects its volunteer's rights to use this medium of expression during the volunteer's own time. Jefferson volunteers are prohibited from using any and all health system computers to participate in or view social networking sites during volunteer time for non-volunteer activity. Jefferson volunteers may not disclose any Protected Health Information or any other patient identifiable information under any circumstances.



VOLUNTEER RESPONSIBILITIES & REGULATIONS

- Confidentiality All information regarding a patient's identity, admission, diagnosis or treatment is strictly confidential. Never discuss these matters with patients, other volunteers, friends or family. Do not seek information about a patient from staff members. A confidentiality statement is signed and kept in each volunteer's file.
- Loyalty It is your responsibility as a volunteer to be loyal to the Hospital and its staff members.
- Smoking No Smoking is permitted on anywhere on the premises of Jefferson Health New Jersey.
- Attendance and Punctuality As a volunteer, you are to be present and on time for your assignment. Report on time and record your hours by swiping in and out with your ID badge at any time clock at your assigned location. When you must be absent, notify your department. Continued absences will be reviewed by the Director for discussion and possible termination.
- Professional Advice Do not ask staff members for professional advice or favors for your family or yourself while on duty.



VOLUNTEER RESPONSIBILITIES AND REGULATIONS (Continued)

- Tips Hospital volunteers are not permitted to accept gratuities.
- Visiting Hours Do not visit patients who are friends or family during your shift. Volunteers must abide by the visiting hours and regulations.
- Accountability You MUST NOT leave the Hospital grounds during your shift without swiping out and notifying your department.
- Solicitation No solicitation of any type is allowed on the Hospital grounds
- Cell Phones are not permitted to be utilized during your shift. If you need to make an emergency call, you must notify your shift supervisor and then do so as quickly as possible and return to your assigned position.



VOLUNTEER RESPONSIBILITIES AND REGULATIONS (Continued)

- Whenever patients have complaints, concerns or suggestions that the Hospital should be made aware of, or have a question about their hospital bills, direct them to call the Guest Services Director. Tell them they may dial "O" on any Hospital phone and ask for the Guest Services Director at your location.
- Volunteers should not give medical or personal advice to patients or other volunteers.
- You should not provide food or beverages (including water) to any patient unless you have been instructed to do so by the patient's nurse.
- Always knock before entering a room when the door is closed. Go in quietly, smile and keep your
 comments on the pleasant side. It is important that you introduce yourself by name and as a volunteer.
 Always address the patient by title (Mr./Mrs./Ms.) and name.
- Never change the position of a patient or a patient's bed
- Leave the patient's room immediately if a doctor or nurse wishes to treat or see the patient.
- Learn to listen. Frequently, you can help anyone by being an interested listener.
- Respecting patients' privacy in this Hospital is our utmost concern. <u>Please do not question the patient</u>, family, nurse or doctor regarding the nature of the patient's illness.



VOLUNTEER INJURY AND ILLNESS

• *Injury/Illness* - A volunteer injured on the job, no matter how slight, must immediately report the injury to the supervisor of their assignment.

*After notifying your supervisor, please report to the Emergency Department and identify yourself as a volunteer.

*Please note as a volunteer, your visit and treatment are not covered by worker's compensation. You will be asked for your insurance coverage.

*During evenings and weekends, after notifying the assignment supervisor, please report to the Emergency Room.

- Incident Reports An incident report must be prepared by the assignment supervisor or the Volunteer Department. This can be done electronically, via a phone call.
- **Billing** If an injured volunteer receives a bill for services for the incident, they should immediately bring the bill to the Volunteer Service Office. The Corporate Manager of Volunteer Services will submit the bill to Administration for consideration to be eliminated.

*This practice does not apply for a volunteer who falls ill during his/her shift.

• **Patient Accidents** - If a patient is involved in an accident, immediately notify the nurse in charge of the area. Report the accident to the area supervisor and the Director of Volunteer Services as soon as possible. An incident report must be filed.



Harassment and Discrimination

Sexual Harassment

- It is Jefferson Health's firm policy that all employees and volunteers are responsible for insuring that the workplace is free from harassment, including sexual harassment.
- No one should be put in an uncomfortable situation regarding anything of a sexual nature, their sexual preference, race, or religion.
- If you should find yourself in an uncomfortable situation, you should ask the other person to stop.
- If the behavior continues after you've asked for it to stop, this would constitute harassment.

Discrimination

- Discrimination based upon race, ethnicity, age, sex, sexual orientation, religion, or weight is not tolerated by the health system.
- Report all cases of harassment or discrimination to your department supervisor,
 Corporate Manager of Volunteer Services or Human Resource Manager.



Human Trafficking

Sex Trafficking The recruitment, harboring, transportation, provision, or obtaining of a person for a commercial sex act, in which a commercial sex act is induced by force, fraud, or coercion, or in which the person induced to perform such an act has not attained 18 years of age.

Labor Trafficking The recruitment, harboring, transportation, provision, or obtaining of a person for labor or services, through the use of force, fraud, or coercion for the purpose of subjection to involuntary servitude, peonage, debt bondage, or slavery.

22 USC \$ 7102





Who might Recognize Victims?

- ✓ Ambulatory care
- ✓ Emergency department
- ✓ Customer service staff
- ✓ Physicians & surgeons
- ✓ Nursing staff
- ✓ Social work & case management
- ✓ Sexual assault response teams (SART)
- ✓ Therapists
- ✓ Dental offices

- ✓ Psychiatric units
- Substance use disorder treatment programs
- ✓ Plastic surgery practices
- ✓ Ophthalmologists
- ✓ Community health workers
- ✓ Health educators
- ✓ Interpreters/translators
- ✓ Lab technicians
- ✓ Support staff





Use the NHTRC

1-888-373-7888

CONFIDENTIAL TOLL-FREE 24/7

www.TraffickingResourceCenter.org

NHTRC@polarisproject.org



National confidential crisis and tip line



National referral and response network



National resource and technical assistance center



Resource for hotline data and trends





What Can I do?

 Report any suspicions to your manager, supervisor or a clinical staff member. For more information call the National Human Trafficking Resource Center at 1-888-373-7888 or www.TraffickingResourceCenter.org



Why Focus on Service?

Satisfied Customers will tell 8 people about their experience



Unsatisfied
Customers will tell

16 people about
their experience





"I've learned that people will forget what you said, people will forget what you did, but people will never forget how you made them feel."

Maya Angelou



AIDET

Five Essential Communication Behaviors

- Acknowledge
- Introduction
- Duration
- Explanation
- Thank You

Decreased Anxiety



Increased Compliance



Improved health outcomes & satisfaction



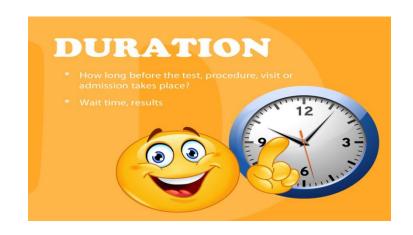
Let's Review AIDET





















Service-Oriented Behaviors



JEFFERSON HEALTH NEW JERSEY

DEPARTMENT OF VOLUNTEER SERVICES HOSPITALITY GUIDELINES

The Jefferson Health New Jersey Hospitality Guidelines have been adopted throughout the Jefferson Health New Jersey Health System. The program's goal is to make Jefferson the hospital of choice for area residents by providing the best patient services available. Patients' feeling that their stay was improved because they received extra personal attention will reflect this program's success. A little extra attention can form a strong positive image. All volunteers must abide by the Hospitality Guidelines.



SMILE... break the ice and make eye contact. Introduce yourself and call people by name. Extend a few words of concern.

TRY TO HELP... does someone look confused? Stop and assist.

EXTEND COURTESY... let the patients and visitors go first through doorways.

EXPLAIN... people area usually less anxious when they know what is happening.

ANTICIPATE ... you'll often know what people want before they ask. Act!

RESPOND QUICKLY ... when people are worried and sick, every minute seems like a long time.

RESPECT PRIVACY... it may be your hospital, but it's their room.

UNDERSTAND DIGNITY... that patient could be your parent, your friend, your patient. Close his curtain. Cover her/his legs.

CONTRIBUTE... just because it's "not my job" doesn't mean you can't help or find someone who can.

BE CONSIDERATE ... treat adult patients as adults - words and tone shouldn't insult.

LISTEN... if a person complains, don't be defensive.

HELP EACH OTHER ... and you also help a patient.

KEEP IT QUIET... noise annoys! It shows lack of consideration.

LOOK THE PART... you're part of a long medical tradition!



Service Recovery

- When service problems are brought to your attention by customers:
 - ✓ Apologize for any inconvenience we may have caused
 - ✓ "I am very sorry this happened to you, I am here now and I want to help."
 - ✓ If possible, fix the problem on the spot
 - ✓ Contact a supervisor or call 1111 if you are not able to correct the problem
 - ✓ Ask, "Is there anything else I can do for you before I leave?"





Next Steps

- Put it to action!
 - Ask, "Is there anything else I can do for you?"
 - The 5/10 rule
 - Make eye contact at 10 feet
 - Verbal greeting at 5 feet
 - When possible escort customers to their destination rather than providing verbal directions
 - The 5T's for non clinical staff
 - Telephone
 - Television Remote
 - Table
 - Trashcan
 - Tissues







I AM THE PATIENT EXPERIENCE!





It Starts With Me

Oh, I know it starts with me.



PATIENT RIGHTS

 Jefferson Health New Jersey must notify every patient regarding his or her "rights" as a patient within a healthcare organization. Patient Rights posters are located throughout the hospitals in visible areas, such as waiting and patient rooms. They are also located within the *Patient Guide*. We must treat our patients with respect, dignity, courtesy and consideration for individual needs. Our organization does not discriminate based upon age, race, gender, ethnicity, language, sexual orientation, gender identity, religious beliefs, disability, socioeconomic status, national origin and/or cultural expectations.



How Can You Support Patient Rights?

- Introduce yourself
- Let the patient know what you are there to do
- Communication barriers do not always relate to just speaking a foreign language, but can also be caused by sensory impairments and/or medical conditions such as being hard of hearing or blind. You must identify the communication barrier and implement strategies to promote effective communication.
- Assess the preferred language for discussing healthcare. Even if a patient indicates that they speak English, they may prefer their healthcare information in another language. We must ask the question. If a patient is non-English speaking, limited in their English speaking, or indicates that they prefer to use another language, always use certified interpreters available via the language line. Staff and family are not permitted to translate healthcare-related information.
- Contact your supervisor or Guest Services Department if you need help.



Patient's Bill of Rights

contains information for patients on the following topics:

- Medical care
- Communication and Information
- Medical records
- Cost of hospital care
- Discharge planning
- Transfers
- Personal needs
- Freedom from abuse and restraint
- Privacy and confidentiality

It is important to respect and consider the patient's rights in our daily routines.



AGE- SPECIFIC CRITERIA

- Everyone who works in the hospital should have the knowledge, skills and ability to respond to age-specific needs of patients and families. They need to recognize and respond to the person's physical, mental, emotional and developmental needs in relation to the specific age group to which they are assigned. We need to be aware of:
- What is "normal" behavior for each age group?
- What "problems" in health and safety each age group has.
- How to communicate with a particular age group appropriately.
- The strategies needed to give them care and respond to their needs.



Key Points to Remember:

- **Birth to 1 year**: Support the head, no toys with small parts; cuddle and hug; limit strangers; keep crib rails up at all times; never leave unattended on raised surface without guard rails.
- **Toddlers**: Easily distracted; give one direction at a time; create a "child-proof" environment for safety.
- Adolescents: Provide privacy; allow friends to visit; involve in decision making; encourage questions.
- Adults: Recognize the impact of hospitalization/illness to patient's personal life.
- **Elderly**: Involve family in care decisions; be aware of possible decreased sensory responses and mobility; speak slowly and distinctly; provide activities to reminisce.



CULTURAL DIVERSITY

• Each patient has a right to have his or her cultural, psychosocial, spiritual and personal values, beliefs, and preferences respected. Jefferson Health New Jersey supports the right of each patient to personal dignity, and is committed to accommodate the right to pastoral and other spiritual services for our patients.



Questions?



**Please note any questions you may have, up to this point, for discussion at in-person orientation.



EMTALA

- Laws passed in 1986 that prohibit the denial of emergency care or unjust transfer based on the patient's ability to pay.
- All patients are entitled to a medical screening.
- Hospitals must provide treatment if the organization has the capacity.
- Always escort patients seeking medical care to the Emergency Department.
- Report suspected violations to the Corporate Compliance Hotline (856-429-3546).





"I understand your privacy concerns, Mrs. Smith, but . . ."



HIPAA RULE OF THUMB

10 Points of HIPAA Privacy

- Protect PHI* at all times. Never access your own records, your family (including spouses/children, etc.), friends or others unless this access is connected to performing a job-related duty or responsibility.
- Access, use and/or provide only the minimum necessary PHI needed for a task or request.
- 3. Cover, turn over, or lock up PHI that is not in use.
- Never discuss PHI in public areas, such as elevators and the cafeteria.
- Don't discuss PHI, medical or billing records outside of work under any circumstances.
- Protect PHI in emergencies, but only after the emergency is resolved.
- Dispose of PHI in secure shredder boxes. Never dump unshredded PHI into regular trash receptacles. If you can't find a box, ask someone!
- If discussing PHI around others, ask the patient's permission (if applicable), lower your voice or move to a more private area if possible.
- Protect PHI on computers, cell phones, fax machines, smart phones, and all other electronic devices.
- 10. If you have a privacy or security question, ask your supervisor or Privacy Officer.

10 Secrets of HIPAA Security

- Protect PHI* at all times. Never access your own records, your family (including spouses/children, etc.), friends or others unless this access is connected to performing a job-related duty or responsibility.
- Protect your password! Never: share it, write it on a post-it or scrap paper or leave it open in a public area.
- Use a strong password and time-based screen savers on all laptops, workstations and electronic devices.
- 4. Log off or lock computers and electronic devices containing ePHI if you need to walk away from them.
- Use encryption, for emailing ePHI or don't send it electronically.
- Beware of hackers and scammers impersonating staff. Know that the KH Help Desk staff will never ask for your logon and password.
- Always file, lock, shred and/or properly dispose of PHI. Contact IT for disposing of devices containing ePHI.
- Protect ePHI on computers, cell phones, fax machines, smart phones, portable media devices as well as all other electronic devices.
- Immediately report security violations to the Privacy Officer or your supervisor.
- 10. If you have a privacy or security question, ask your supervisor or Privacy Officer.



HIPAA Privacy and Security

What is HIPAA?

The acronym **HIPAA** stands for the Health Insurance Portability and Accountability Act. It is a Federal law which means that compliance is mandatory. The purpose is to ensure that no one affiliated with the organization shall use or disclose patient information unless there is authorization for the release of the information or the information is necessary for treatment, payment or operations purposes.



HIPAA Basics

- Introduction
- HIPAA is a federal law that protects the privacy of patients and all information about them.
- Health information privacy and security
- HIPAA gives patients the right to have their information kept private and secure. It is more than just a good idea-it is a federal law with penalties – even criminal ones – for violations.



HIPAA and You

As a volunteer you have a constant access to patient information. You may regularly see or care for patients, work with the dietary information or handle discarded notes or other papers containing patient information. So it is important for your to understand what HIPAA requires in terms of privacy and security.



PHI

What does it stand it stand for?

HIPAA protects patient health information.

Protected health information is known as PHI.

What does it include?

HIPAA set s rules for when and how healthcare staff members may use or release patient's PHI. PHI includes any health-related information that can be lined to a specific patient. This includes demographic and financial information, (such as address, insurance ID number) as well as health information such as diagnosis code. PHI takes many forms such as paper, oral or written.



Medical Information

Medical Information

PHI also includes medical or health-care related information if it can be one specific patient, including:

- Information regarding the patient's current, past or future health condition, treatment or medications.
- b. Testing results
- c. Discharge planning information such as physical therapy or home health visits.
- d. Billing information

Treatment, payment and healthcare operations

HIPAA permits healthcare staff members to use and share PHI to do their job for three reasons without needing patient permission:

- 1. Treatment
- 2. Payment
- 3. Operations



Case 1 Scenario

A famous celebrity arrives at the hospital - you walk into the patient's room and are surprised to see this celebrity in the hospital bed.

What do you do?



Celebrity Sighting

Later that morning while you are on break in the cafeteria, you ask around to see if anyone knows why he is in the hospital.

Two other staff members over hear your conversation. The three of you start to talk about the rumor that he is really dating the local sportscaster.



Celebrity Sighting – (continued)

The BIG question

This chit chat seemed harmless because it is among friends/staff members who all work at Jefferson. It's not like you are going to go home and tell your neighbor that you met Mr. Big. There's no harm no foul as you didn't do anything inappropriate.

Or did you?



Celebrity Sighting (continued)

THE ANSWER

In a word, YES. You shouldn't have revealed that this celebrity was a patient. It was inappropriate for you to talk about this individual since your friends/staff members may not be known. Additionally, this conversation wasn't part of your job responsibilities and it took place in a very public area - the cafeteria.

This is a violation of the patient/celebrity's right to privacy. You are allowed to use, disclose or tell someone PHI ONLY when it is necessary for your job. Otherwise, disclosing information about a patient that you have no responsibility for, is prohibited.



Famous Cases

Here are some famous cases in which healthcare staff members have violated a someone's right to privacy:

- In March 2008, the UCLA Medical Center fired 13 employees and suspended 6 others for snooping in Brittany Spear's medical records.
- In April 2009 Kaiser Permanente fired or suspended 45 employees for snooping in the new octuplet's mother's medical record
- In July of 2011, the University of California at Los Angeles Health System agreed to settle potential HIPAA violations for \$865,000, resolving two separate complaints, filed with the Office of Civil Rights (OCR) on behalf of two celebrity patients who received care at one of their healthcare facilities.



Minimum Necessary

Need to Know

Only staff members who "need to know" PHI to do their jobs may have access to it. HIPAA requires healthcare workers to use or share ONLY the "minimum necessary" information to do their jobs. Ask yourself the following questions before looking at patient information:

- Do I need this information to do my job?
- What is the least amount of information to do my job?

Examples of using minimum necessary and need to know standards

You may need to know dietary information about a particular patient to your job. But you probably don't need to know other medical information about the patient to do your assigned tasks. Therefore, do not look at other information about this patient, or any other patients.

Or perhaps you come across some discarded test results as you are cleaning a room after a patient has been discharged. Don't look at the information since you do not have a need to know about this patient. If you should recognize this patient's name, remember you must keep this information to yourself.



Privacy

Don'ts for protecting privacy

- Do not discuss patients with anyone except when necessary for work-related purposes.
- Do not share information that you accidentally overhear or see with anyone who doesn't need to know the information to do his or her job.
- Do not discuss a patient's condition or treatment with family members or other visitors.
 Instead, politely, refer these people to the clinical staff member who can handle their questions appropriately.

Discarded patient information

Don't throw away patient information in a wastebasket without shredding it or following your organization's procedures for destroying confidential information. The wastebasket could get knocked over, or the contents could fall off a recycling truck and blow down the street.

If you should come across PHI in a trash bin, left unattended on a countertop or discarded in some other way, you should tell your supervisor or another person in authority so the PHI can be disposed of properly.



Case Scenario #2

Sometimes you just want to share...

You deliver lunch to a patient that you recognize is your parent's neighbor. You chat with the patient for a few minutes to catch up on "old times" and then go back to work. You are careful not to ask the patient about why she is in the hospital.



Case Scenario #2 (continued)

Later that evening when you return home you call your mother and you tell her that you saw her neighbor today at the hospital.

Should have shared this information with mom?



Case Scenario #2 (continued)

In a word, NO, you should not have shared anything about the neighbor's visit to the hospital with your mom.

Chatting with the patient is okay as long as she initiates the conversation. But you should absolutely not tell your mother that you say her neighbor as it is a HIPAA violation to share information you learn at work with people outside the hospital. Consider that the patient may not want your mother or anyone else for that matter to know that she has been hospitalized.

Again, you shouldn't share patient information with anyone who doesn't have a need to know it. This includes your family members!



Patients and HIPAA

Patient Directory

A patient directory is a list of patients within a facility. It provides certain information to people, including visiting clergy, family or friends, who ask for the patient by name.

Directories are permitted by HIPAA to include the following information:

- Name
- Location
- General Condition

Patients do not have to be included in the directory if they do not wish to be listed. If a patient choses not to be listed in our facility directory their name will not be listed on our census. Should know that an individual is in the facility, but is not listed on the census you cannot acknowledge that the patient is in the hospital.



Family and Friends

HIPAA requires hospitals and other healthcare providers to get permission from a patient before sharing PHI with the patient's family members or friends. At Jefferson Health New Jersey patients are provided a Confidentiality Code which is a unique 4 digit code that they can share with the individuals they designate to receive PHI. Without this code only general information such as the patient's condition and location.

Even if the family member has "the code" be careful NOT to provide a patient's family or friends with information you learn while doing your job. If the patients or their family or friends ask you do so, alert the nurse or another staff member who is caring for the patient so that he/she can provide the assistance the patient requires.



High-Risk Situations

Elevators, lobbies and other public areas

There are high-risk areas where you might be tempted to ask about a patient, probably without realizing the risk. Remember these places and situations where it is probably appropriate to discuss PHI.

Elevators - Elevators can be convenient place to talk to you to go from floor to floor, but it is probably impossible for outsiders to avoid listening in.

Lobbies or other public places - DO NOT TALK about patients in public places, such as cafeterias. Be sure to keep your voice low or move to a private place if all possible.

Printouts - DO NOT LEAVE printed information lying around, and file it or dispose of it properly when you are finished. Never take PHI outside your facility unless you have specific permission from your supervisor or privacy officer.



Protecting Physical Security

You can help protect physical security by doing the following:

- Do not use a computer unless you have authorization to do so and you have been given your own user ID (sometimes called username or logon ID).
- If you need to use a computer to do your job, keep your computer screen tilted away from public areas or use a privacy screen. Log off the computer when you finish.
- If you see disks or CDs lying around that may have PHI on them, turn them over to your supervisor.
- If you work with PHI, don't leave information lying around. Always remember to turn papers over that contain PHI so that this information is out of public view.
- Always use the shredder boxes located throughout our facilities when disposing of documentation that contains PHI. NEVER put patient information into waste baskets.
- If you see unprotected PHI as you do your job, turn it over to a supervisor.

 HOME OF SIDNEY KIMMEL MEDICAL COLLEGE

Consequences for Breaking the Rules

Fines - Breaking HIPAA's privacy or security rules can mean either civil or criminal penalties. Under the HIPAA Omnibus Final Rule, civil monetary penalties range from \$100 to \$50,000 for each violation, not to exceed \$1.5 million for all such violations in a calendar year.

Criminal and Civil Penalties - Criminal penalties for wrongful disclosure of patient information can include not only large fines, but also prison time.

The criminal penalties climb as the severity of the offense increases. For example selling treatment information about a celebrity's hospital visit to the local news media, or using your job to gain access to patient's financial and/or insurance information and then selling it to identity thieves may carry a much stiffer penalty than gabbing about the celebrity in the cafeteria. Penalties for these types of violations can go as high as \$250,000 fine and 10 years in prison.



Reporting Violations and Getting Help

Jefferson Health expects that it's entire workforce which also includes our volunteers, medical and nursing students, etc. to adhere to its privacy and security policies, but it recognizes that some people may break the rules. Under HIPAA, part of our responsibility as an organization is to monitor compliance and investigate any breaches or privacy/security complaints.

Report violations and suspected violations

You should report violations and suspected violations to our Privacy Office or Corporate Compliance Office by calling 1-855-235-1959.

Do not fear retaliation

If you should report a violation or a suspected violation you should not fear retaliation. In fact, consider it as being part of your job to report instances in which you suspect that someone is violation our privacy and security policies.



....FOR YOUR INFORMATION

Jefferson Health has a self-exam process as it relates to patient medical records as required by the government. Jefferson Health uses Fair Warning, the software that monitors the access of patient medical records to ensure that they are being accessed only for legitimate reasons. As part of the self-exam, Jefferson Health audits whether associates access their own medical records, which although not a HIPAA or privacy violation, is a separate Jefferson violation. All associates and volunteers sign a document and are given training that they may use their Jefferson-issued password for work purposes only and which is necessary to perform their job. Any other use is considered a violation.



Conclusion

As you do your job keep in mind the importance of patient privacy and security. It is not enough for Jefferson Health to have the right policies for protecting privacy. Your must follow those policies and take an active role our compliance efforts.

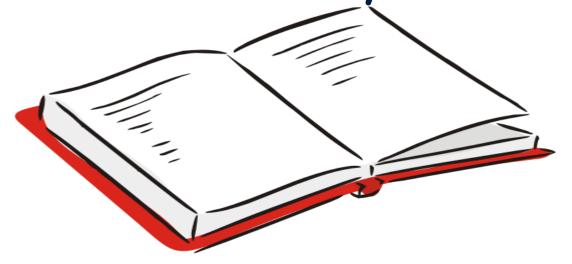
Parting Notes:

- Protecting patients' privacy and confidentiality is part of everyone's job.
- The next time you overhear or see a privacy violation, be empowered to bring this situation to a supervisor's attention.
- Lastly, always remember to value the privacy of others the same way you want the confidentiality or your private health information to be respected.



REMEMBER:

It's not our story to tell!





Most Important....

What happens in the hospital, Stays in the hospital!





SAFETY OVERVIEW





KNOW YOUR CODES

RED - FIRE

BLUE - ADULT MEDICAL EMERGENCY

WHITE - PEDIATRIC MEDICAL EMERGENCY

AMBER - ABDUCTION

ECHO - ELOPEMENT

CODE 45 - INTRUDER WITH A WEAPON

YELLOW - BOMB/BOMB THREAT

GRAY
 SECURITY EMERGENCY

ORANGE - HAZARDOUS MATERIALS INCIDENT

TRIAGE - DISASTER

BROWN - FIRE ALARM SYSTEM OUT OF SERVICE

GREEN - ALL CLEAR



FIRE SAFETY

• R.A.C.E

- Rescue- remove all patients visitors or other personnel from the fire area
- Alarm call 2222 giving the extact location and extent of the fire AND activate the nearest pull box.
- Confine close all doors and windows.
- Extinguish or Evacuate the area.



P.A.S.S



- Pull the Pin
- Aim the Nozzle
- Squeeze the Handle
- Sweep



Also, in the event of a fire or drill, remember to:

- Follow the instructions of the area supervisor.
- Remain calm and move in an orderly fashion.
- Do not use the elevators.
- Wait until a code "green" is announced before returning to your normal duties.



GENERAL SAFETY

 Each Volunteer has the responsibility to work in such a way that he/she does not cause injury to

himself/herself or to others.





JEFFERSON HEALTH NEW JERSEY SAFETY HOTLINE 856-582-2899

- Unsafe working conditions
- Broken or unsafe equipment
- Electrical Equipment that appears unsafe or unsanitary.



NUMBERS TO KNOW!

	Cherry Hill Campus	Stratford Campus	Washington Campus
FIRE or SECURITY Emergency Remote sites should call 911	856-532-6999 / Ext: 2222	856-532-6999 / Ext: 2222	856-532-6999 / Ext: 2222
CODE BLUE	Ext: 2222	Ext: 2222	Ext: 2222
Rapid Response Team	Ext: 2222	Ext: 2222	Ext: 2222
CHEMICAL SPILL	Ext: 2222	Ext: 2222	Ext: 2222
Security Escorts and non-emergencies	609-682-4805 / Ext: 2222	856-346-6358 / Ext: 2222	856-582-3133 / Ext: 2222
FACILITIES	Ext: 2222	Ext: 2222	Ext: 2222

EMERGENCY LOCATIONS

Building Area of Refuge

A location in a building designed to hold occupants in the event of a fire or other emergency in the building when evacuation is not possible.

Recommended Relocation Site

Designated site away from effected area.

This Building's Shelter Area

Area within the building where occupants can go in order to escape from exterior hazards or other outside emergency.

WHAT TO DO...

Fire

- R RESCUE anyone from immediate danger.
- A ALARM pull the nearest fire alarm pull station and call security. For areas not serviced by security call 9-1-1.
- CONFINE by closing doors in the fire area to contain smoke and heat.
- E EVACUATE away from smoke and heat.
 EXTINGUISH small fires.
- Do not enter the building until authorized to do so by emergency personnel.

Building Evacuation Procedures

- When instructed follow evacuation procedures for the area or department.
- DO NOT use elevators.
- Take personal belongings (ID, keys, purses, wallets, etc.) and dress appropriately for the weather.
- Upon exiting, proceed away from the building to a safe open location.

Shelter-in-Place

- Purpose: To shelter occupants inside the building in the event of a hazardous/biological material or other emergency incident outside the building.
- When notified, go inside the nearest building and report to the building's shelter area.
- Close all windows and doors.

Suspicious Packages

- Any package found or received that arouses concern.
- Do not touch or disturb the object or package.
- Call security. For areas not serviced by security call 9-1-1.
- Notify your supervisor.

Chemical Spill

- For spills smaller then 500ml (average water bottle) follow departmental procedures
- For spills greater then 500ml contact security
- Notify your supervisor

Bomb Threat

- Remain calm.
- Get as much information as possible from the threatening caller.
- Call security. For areas not serviced by security call 9-1-1.
- Notify your supervisor.

Suspicious Behavior

- Do not physically confront the person exhibiting the behavior.
- Do not let anyone into a locked room/building.
- Do not block a person's access to an exit.
- Call security. For areas not serviced by security call 9-1-1.
- Notify your supervisor.

Code Amber/Infant Abduction or Missing Child

- Upon notification of Code Amber, immediately monitor all egresses on your unit/area; including doors, elevators, stairwells, and ramps.
- Report all suspicious activity to security immediately.





Active Shooter Response Plan

Quickly Determine the Most Reasonable Way to Protect Your Own Life Given the Circumstances

RUN

- Have an escape route
- Evacuate even if others don't agree to follow
- · Leave belongings behind
- · Help others escape if possible
- Keep hands visible
- Follow instructions of police
- Do not attempt to move wounded people
- If you are a patient care provider there may be times when you may have to leave your patients to save your own life

HIDE

- Hide out of view
- · Lock or barricade door if possible
- Silence cell phones and other devices
- Turn off noise sources
- Close doors and curtains
- Hide behind large items
- Remain quiet and calm

ACT

- Attempt to disrupt or incapacitate the shooter
- Act aggressive
- Throw items
- Use improvised weapons
- Yell
- Commit to whatever actions are necessary for you to survive



Once Safe or Secure

- Call security
- For areas not serviced by security dial 9-1-1
- Alert dispatcher of the active shooter location
- If unable to speak, leave the line open so the dispatcher can listen



When Law Enforcement Arrives

- · Remain calm and follow officers' instructions
- Put down any items in hands
- Immediately raise hands and keep them visible
- Avoid pointing, screaming or yelling
- Do not stop to ask officers for help or direction when evacuating
- Proceed in the direction in which officers are entering the area



REGISTER TO RECEIVE EMERGENCY ALERTS OR UPDATE YOUR INFORMATION Jefferson.edu/JeffALERT









SEE SOMETHING ~ SAY SOMETHING





Hazard Substances/Right to Know

 It is your responsibility to be informed, to be aware of potential hazards, to know the use of a substance, to practice safety, to ask questions, and to use personal protective equipment (PPE) as necessary.



SENSITIVE AREAS

- Some areas of the hospital have restricted access, open only to authorized personnel. These include, but are not limited to: Medication Rooms, The Emergency Department, Critical Care Areas, Operating Rooms and Recovery, and all areas of the Maternity Center.
- All patient areas should be considered sensitive and should not be entered unless you are authorized to be there or sent there on hospital-related business.



Rapid Response Team (RRT)

What is a Rapid Response Team?

A group of specially trained healthcare providers who help facilitate early medical intervention to a patient at the initial signs of a decline in his or her medical condition-such as chest pain, difficulty breathing, sudden mental confusion, and/or seizure.

What is the PURPOSE of an RRT?

To bring medical intervention to a patient at the first signs of a decline in his or her medical condition **BEFORE** a **CODE BLUE** occurs. The sooner the intervention, the better the outcome for our patient.



What Is An OBERT?

OBERT - Obstetrical Emergency Response Team

- □ This is a specialized emergency response team with key responders needed for an emergency in any obstetrical area.
- It equates to an "RRT" called for all other areas in the hospital.
- OBERT is specifically designed to improve outcomes for our obstetrical patients.

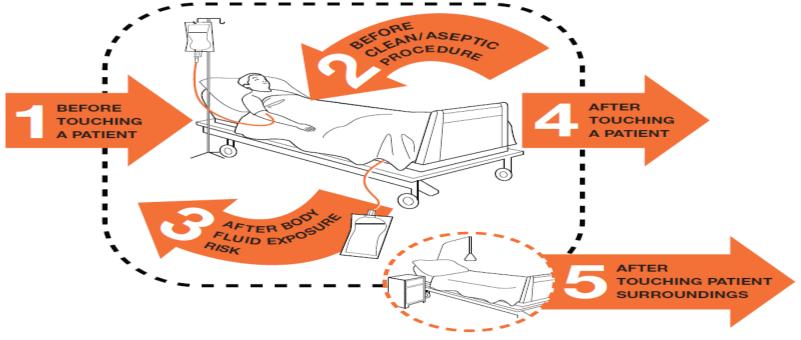
Who can call a RRT/OBERT?

ANY associate, patient, family member, or visitor can make the call. The process is designed to involve all healthcare professionals and visitors in recognizing a patient in trouble and requires immediate medical attention. This includes, Housekeeping, Dietary, Guest Services, Laboratory, Medical Imaging, etc. There is no room for mistakes. Don't hesitate to call! The patient needs all healthcare professionals and visitors to keep an eye out and help when needed.

How do you initiate a RRT/OBERT call?

For inpatients, dial the hospital operator at 2222. Jefferson Surgical Center (JSC) associates can initiate an RRT by paging 641 and requesting anesthesia to the patient's bedside.

Your 5 Moments for Hand Hygiene





1	BEFORE TOUCHING A PATIENT	WHEN? WHY?	Clean your hands before touching a patient when approaching him/her. To protect the patient against harmful germs carried on your hands.	
2	BEFORE CLEAN/ ASEPTIC PROCEDURE	WHEN? WHY?	,,,,,,	
3	AFTER BODY FLUID EXPOSURE RISK	WHEN? Clean your hands immediately after an exposure risk to body fluids (and after glove removal). WHY? To protect yourself and the health-care environment from harmful patient germs.		
4	AFTER TOUCHING A PATIENT	WHEN? Clean your hands after touching a patient and her/his immediate surroundings, when leaving the patient's side. WHY? To protect yourself and the health-care environment from harmful patient germs.		
5	AFTER TOUCHING PATIENT SURROUNDINGS	WHEN?	Clean your hands after touching any object or furniture in the patient's immediate surroundings, when leaving – even if the patient has not been touched. To protect yourself and the health-care environment from harmful patient germs.	



Patient Safety

A World Alliance for Safer Health Care

SAVE LIVES Clean Your Hands

All reasonable precautions have been taken by the World Health Organization to verify the information contained in this document. However, the published material is being distributed without warranty of any kind, either expressed or implied. The responsibility for the interpretation and use of the material lies with the reader. In no event shall the World Health Organization be liable for damages arising from its use.

WHO acknowledges the Höpitaux Universitaires de Genève (HUG), in particular the members of the Infection Control Programme, for their active participation in developing this material.







Infection Control/Hand Hygiene

- Infection control is everyone's role. We can stop the spread of infections by hand washing, the single most important technique in prevention. Wash hands before and after eating, before and after using the restroom, between patient contacts, after taking off a pair of gloves, when your hands are dirty and at the beginning/end of your workday.
- How to wash your hands:
 - 1. Stand by the sink but avoid touching it; get a paper towel and tuck it under your arm.
 - 2. Wet hands and wrists with warm water.
 - 3. Apply soap generously to cupped palms.
 - 4. Rub hands vigorously together applying friction to all surfaces, especially between fingers and under nails.
 - 5. Wash hands and wrists for 15 seconds.
 - 6. Rinse hands and wrists in a downward motion.
 - 7. Use the paper towel and dry hands and wrists.
 - 8. Use same or new towel to turn off faucets.
- REMEMBER: Always Gel In and Gel out of every patient room (with sanitizer) regardless of your physical interaction with a patient. Germs can be found everywhere.



Infection Control/Hand Hygiene cont'd

- Reporting Exposures Do not report for volunteer duty if you are sick or have an injury or skin condition that prevents you from hand washing. It is important that you report to the Infection Control office exposures to any disease that you haven't had or been vaccinated against.
- **Tuberculosis Testing (PPD) Adult** Volunteers are required by the NJ State Department of Health to have a TB testing prior to enrollment and then one annually thereafter.
- FLU All Jefferson Health Volunteers are required to have a current flu shot.
- Standard Precautions are utilized for all patients. This means that:
- Hand washing is performed between patient contacts.
- Only clean items are provided for patient use.
- Spills of blood and body fluid are cleaned up immediately and use of barrier technique are employed, i.e., gloves are worn for contact with blood and body fluids; face mask and eye shield if splashes to the face are anticipated and gowns if splash or soil to clothes is anticipated.
- Isolation rooms are indicated by a sign on the door. Watch for these signs and <u>Do Not Enter</u>.
- Exposures to Blood & Body Fluids If you get any body fluids on uncovered hands or arms, and your skin is intact, wash immediately. If you should have exposure to blood or body fluids such as a cut or stick with a dirty or sharp object, splash to the face or eyes or contact with open skin, wash or flush the area immediately and call Infection Control at your hospital location.



HAND HYGIENE







Questions?

**Please note any questions you may have, up to this point, for discussion at in-person orientation.



FINAL CHECKLIST

Please make sure you leave the following documents:

- **✓ EMTALA Form**
- **✓ HIPAA Form**
- ✓ Orientation Checklist
- ✓ Post Test
- ✓ PPD/Flu Documentation



THE END!





