New Employee Orientation Manual

Updated 06/2020

Invisible Architecture

Greater Regional Health is committed to providing the highest quality health care and service for all and is driven to be the healthcare provider and employer of choice.

The "Invisible Architecture" supports and establishes the *culture* of Greater Regional by defining the Values, Behaviors and Actions which we believe support this mission and vision.

COMPASSION

We are dedicated to recognize and serve each individual's specific needs through the delivery of person-centered care....

- I will recognize every individual has different needs which must be met through careful listening, empathizing and sincere nurturing.
- I will be easy to approach and will look for opportunities to help others.
- I will treat others as they would want to be treated.
- I will take action to meet the needs of my patients and my co-workers.
- I will create a joyful environment for others.

OWNERSHIP

We accept responsibility for and understand our actions reflect on ourselves and Greater Regional. We are enthusiastically engaged in providing the highest quality care and service for all in a spirit of loyalty and stewardship....

- I will be a team player, communicating and working together.
- I will be loyal to Greater Regional Medical Center.
- I will not make excuses – instead I will take responsibility for my actions.
- I will be open to constructive suggestions.
- I will be a good steward of all resources.
- I will come to work engaged and with a positive attitude.

RESPECT

We acknowledge the unique qualities of all individuals recognizing each person's contributions drive the innovative spirit and success of our organization....

- I will make everyone feel valued and appreciated.
- I will be professional, courteous, honest, thoughtful and confidential in all my interactions and communications.
- I will abide by the rules and regulations set by Greater Regional.
- I will focus on making all persons I interact with successful.

INTEGRITY

We serve and work together in an honest, humble and reliable manner while maintaining the highest ethical and performance standards....

- I will hold myself and those I work with to the highest ethical standards.
- I will talk with and not about others.
- I will listen carefully and speak honestly.
- I will choose to do the right thing – each time and every day.

Organizational Chart
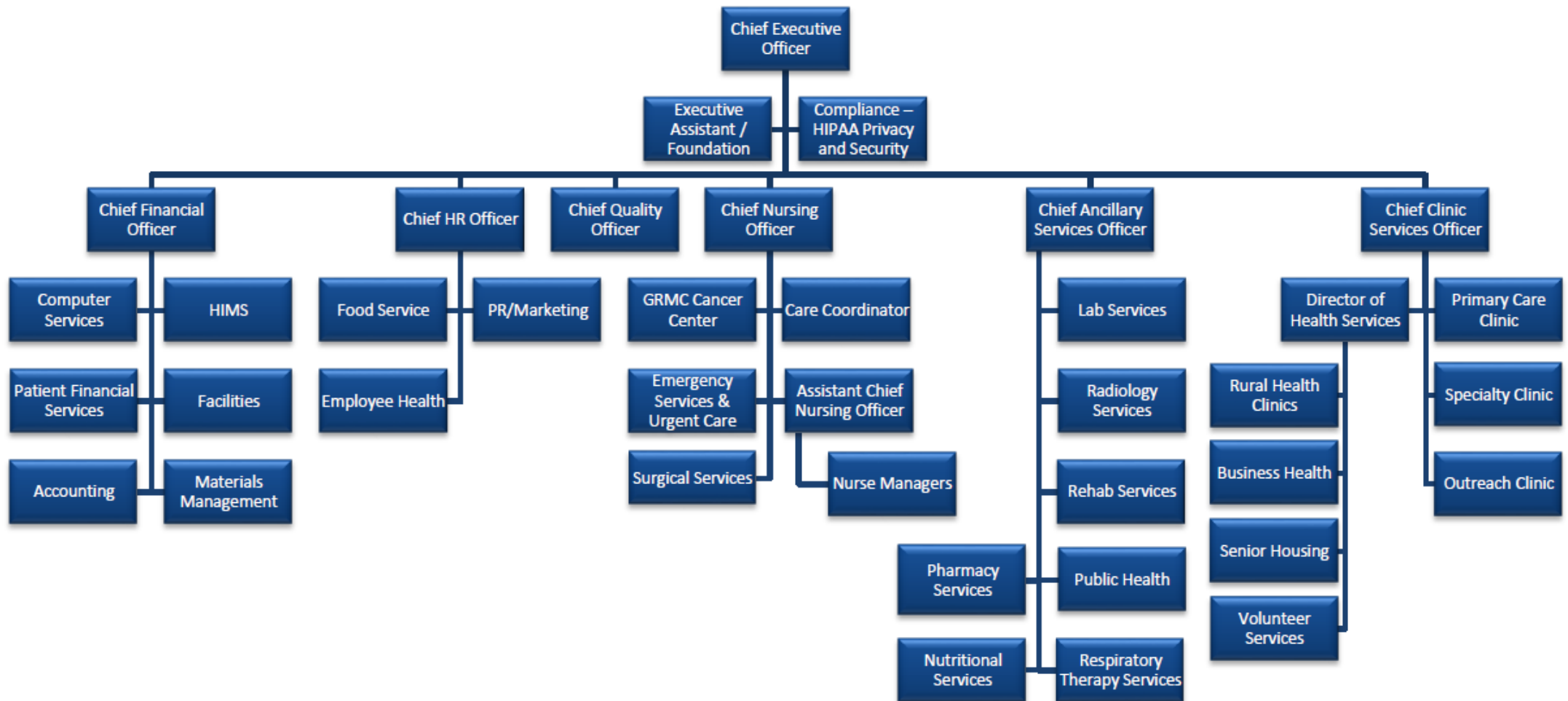
Key Personnel

Community Relations:

Kayla Hoffman, PR and Marketing Coordinator– Ext 3824

Compliance and Confidentiality:

Karla Alford, Information Security Officer – Ext 3523

Amy Kelsey, Compliance and Privacy Officer – Ext 3651

Employee Health:

Nancy Anthony, Employee Health and Wellness RN,BSN – Ext 3518

Human Resources:

Amy Rieck, HR Officer – Ext 3524

Jen Kenyon, Payroll and Benefits Coordinator – Ext 3666

Nicole Shawley – Payroll Coordinator – Ext 3227

Terri Siglin, Recruiter– Ext 3679

Diane Teno, HR Coordinator – Ext 3818

Greater Regional HEALTH

Policies

- Tobacco Free Campus

- Cell Phone – Speak to your supervisor about the details

- FMLA/Short Term Disability/Long Term Disability – See HR for paperwork

- Attendance – Know the rules for unexcused absences

- Breaks – Speak to your supervisor about the details

- Dress Code – Speak to your supervisor about the details

Policies

- Workplace Violence
  - Greater Regional is committed to maintaining a bias-free workplace for employees and to preventing retaliation against employees who assert their right to work in the bias-free environment.

- Substance Abuse
  - The medical center prohibits the use, possession, concealment, sale, purchase, distribution or manufacture of illegal or unauthorized drugs, including alcohol throughout its operations.

Policies

Worker's Compensation
- All injuries are to be reported immediately to your supervisor and to Human Resources. The incident should also be logged in the Healthcare Safety Zone Portal.
- Do not seek treatment on your own, on campus or elsewhere without HR approval.
- Injuries not reported at the time of incident may be rejected due to non-report.
- GRH does have a light duty program and will strive to accommodate all restrictions given while undergoing treatment.

AIDET

What is it?

- **When -** Quality healthcare will be provided by Greater Regional at all times
- **Where -** Across all departments daily and in our community at all times.
- **Why -** It is a part of who we are!
  - Greater Regional Core Values: Compassion, Ownership, Respect, Integrity
  - Quality requirements are also set forth by Medicare and Medicaid.
- **What -** What do you desire when receiving healthcare?
  - Give your patient the same – Golden Rule!
- **Who -** Everyone is responsible for delivering quality care at all times. Even YOU!
- **How -** Quality care is basic care
  - It starts with AIDET –
    - Acknowledge, Introduce, Duration, Explain, Thank
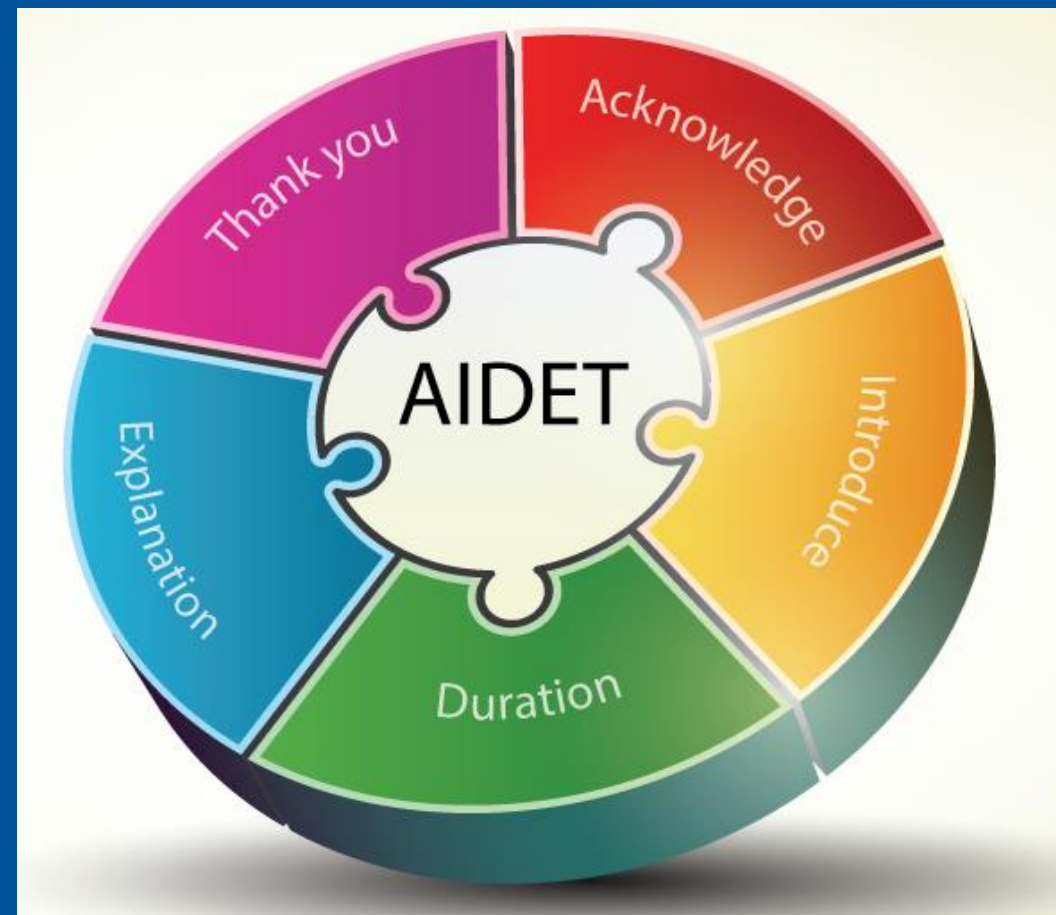
Excellence

- Service Excellence
  - Meeting the needs of those who come to us for care and those with whom we work in a way which leaves them feeling fulfilled and satisfied

- Operational Excellence
  - Delivering clinical quality that is measurable by standards
    - Example:
      - Keeping food at appropriate temps
      - Keeping humidity in OR rooms appropriate
      - Following Policy/Procedures
      - Many more!

EMTALA

Emergency Examination/Medical Screening and Transfer Policy

The **Emergency Medical Treatment and Labor Act** (**EMTALA**) is a federal law that requires anyone coming to an emergency department to be stabilized and treated, regardless of their insurance status or ability to pay, but since its enactment in 1986 has remained an unfunded mandate.

- Non-compliance with this policy could lead to sanction, loss of accreditation and/or fines.

Compliance & Confidentiality

The HIPAA Privacy Rule establishes national standards to protect individuals' medical records and other personal health information and applies to health plans, health care clearinghouses, and those health care providers that conduct certain health care transactions electronically.

The Rule requires appropriate safeguards to protect the privacy of personal health information, and sets limits and conditions on the uses and disclosures that may be made of such information without patient authorization. The Rule also gives patients rights over their health information, including rights to examine and obtain a copy of their health records, and to request corrections.

Remember:

- Do not access your medical record, your friends or family.

- Do not share information about who is being seen or treated at GRH.

- The only medical records you are to review are for those you are working with directly while on the job.

Basics

- PHI is accessible to those who need it
- Used only to perform job duties
- Access only the minimum necessary
- Do not share unless other party has legitimate "need to know"
- Use and share as allowed by HIPAA or with patient's written permission (Notice of Privacy Practices)

HIPAA Potential Violations

Separation of Duties (taking care of yourself)
- Keep a professional "distance" from your own record when you are working and are also a patient, **do not**
  - Schedule your own appointments or those of family members
  - Register yourself for visits
  - Call in own prescriptions
  - Post own payment/remits to accounts of self or family
- Failure to separate yourself opens the door for self access and potential performance issues
  - Hand off the task to another staff or as your supervisor has instructed to prevent perception of and/or privacy violations
- Always log off or lock computer when walking away to avoid others using any system under your username/password
  - You are responsible for what is done under your username
- Never share your username/password with anyone
  - Notify Information Technology if you believe your login has been compromised
- Report any concerns immediately to your immediate supervisor, Privacy Officer or Information Security Officer

Volunteer Services

Objectives
- To provide volunteer services to Greater Regional, its patients, their families and the community at large
- To raise funds to provide needed equipment and capital improvements for Greater Regional
- To serve individually and collectively as ambassadors of Greater Regional

Information Guides
- Staff information desks at Main Registration and in the MAP atrium with two shifts per day Monday through Friday
- Greet patients as they enter
- Assist directing people throughout the medical center
- Provide assistance with wheelchairs

Gift Connection
- Gift Shop operated by Greater Regional Auxiliary
- Staffed by volunteers
- Open 10-3 Monday through Thursday and 10-1 on Friday
- Employees can use payroll deduct for payment

SHIIP (Senior Health Insurance Information Program)
- Volunteers assist seniors with questions about Medicare supplemental insurance, long term care insurance, claims and benefits

Tours
- Volunteers provided guided tours to visiting groups from schools and other organizations
- Volunteers also assist with a variety of projects sponsored by the Greater Regional Auxiliary

BLS/ACLS/PALS

- Certain positions require more than just licensure. Certifications are required.

- Turn in your BLS, ACLS and/or PALS at the time of hire (and any other certifications you hold).

- BLS, ACLS and PALS certifications are offered through the Resuscitation Quality Improvement (RQI) program.

Emergency Response Plan

- The Hospital Incident Command System (HICS) is an incident command system designed for hospitals and intended for use in both emergency and non-emergency situations.

- Incident Command will direct the activation of a Disaster Alert!

❑Announcement by Switchboard

  ❑"Your attention please, Disaster Alert. All personnel activate your Emergency Management Plan."

  ❑Call departments, and if needed, dispatch messenger

  ❑After hours - initiate staff notification with School Messenger (Incident Command will determine staff to be called in)

Incident Command System

❑ Is a management tool for meeting emergency needs.

❑ May be used for planned events, natural disaster and acts of terrorism.

❑ Is a key feature of the National Incident Management System (NIMS).

❑ Meets requirements for OSHA, DNV, and NIMS.

GRH Incident Command Structure

Incident Command Position	Primary	Secondary	Tertiary
Incident Commander	Monte Neitzel-CEO	1st Admin Staff on site	2nd Admin Staff on site
Medical-Technical Specialists	CCSO & CQO	CCSO & CQO	Quality Dept. Representative
Liaison Officer	Teresa Sparks – Emergency Preparedness Coordinator	Amy Willett – Director of Clinic Operations	Luke Neitzel – Director of Health Services
Safety and Facilities Security Officer	Matt Buck – Safety Officer	1st Maintenance staff on site	2nd Maintenance staff on site
Information Technology Officer	Karla Alford Director of Computer Services	1st IT Staff on site	2nd IT staff on site
Public Information Officer	Kayla Hoffman Marketing Coordinator	Jen Keynon HR Coordinator	Jessica Duncan – Exec Asst. Note: Amy Rieck also has PIO training
Operations Chief	Amanda Mohr -CNO	Michelle Lents –ACNO	Nurse Manager/Nurse Lead
Logistics Chief	Jay Bochart –Materials Mgmt.	Clarissa Pashek- Materials Mgmt.	Materials Mgmt. 2nd on site
Planning Chief	Amy Rieck - HRO	1st HR staff on site	2nd HR staff on site
Finance Chief	Matt McCutchan - CFO	Lisa Wilkinson- Controller	Shelly West- Accounting
Medical Staff Chief	1st Physician on call onsite	Chief of Medical Staff	Executive Medical Staff

Incident Facilities

- Incident Command Post/Emergency Operations Center (EOC)
  - CEO Administration Suite
  - Human Resources Suite
  - Nursing/Quality Administration Suite
- Casualty Collection Points (patient care)
  - Immediate Treatment – *Emergency Department*
  - Minor Treatment – *Rehab Services*
  - Delayed Treatment – *Registration Front Lobby Main Entrance*
  - Deceased Holding Area – *To be determined by Incident Command depending on the type of event and infection prevention risks*
- Staging Area (resource location)
  - Personnel Pool – *DV Richardson Conference Room/Cafeteria*
- Miscellaneous
  - Visitor Control Center – *To be determined by Incident Command depending on the type of event and infection prevention risks*
  - Discharge Station – *To be determined by Incident Command*
  - Media Communication Center – *PR/Marketing Offices*

Incident Command Vest

- Incident Command - White Vests
- Operations – Red Vests
- Planning – Blue Vests
- Logistics – Yellow Vests
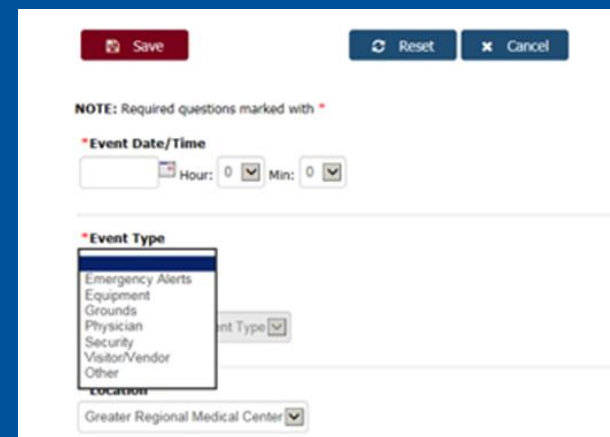- Finance – Green Vests

Department Tasks

- **Health Information Management Systems -**   *Medical Records*
- **Surgery -** *Triage/Surgery*
- **Radiology -** *Normal tasks or Personnel Pool*
- **Laboratory -** *Normal tasks or Personnel Pool*
- **Respiratory Services –** *Normal tasks or Personnel Pool*
- **Pharmacy -** *Normal tasks or Personnel Pool*
- **Food Services/Nutritional Services -** *Normal tasks or Personnel Pool*
- **Quality –** *Medical Technical Specialists*
- **Public Health/Outreach – U***nion County Emergency Response/Normal tasks*
- **Case Management/Care Coordinators -** *Inpatient assessment for possible discharge or transfer; provide support to Families of victims*
- **Materials Management –** *Normal tasks or Personnel Pool*
- **Registration/Switchboard/Business Office –** *Normal tasks or Personnel Pool*
- **Facilities -** *Normal tasks or Personnel Pool*
- **Personnel Pool –** *All other employees not assigned will be assigned where needed and will include roles assisting with security/runners/messengers/etc.*

Emergency Alerts

- Dial '77' to report any type of alert – speak clearly and give as much detail as possible
- Confirm alert message with operator before alert is announced. Repeat back.
- Give your name and number so switchboard can call back after announcing alert for additional information
- Each alert will be announced overhead 3 times in succession
    - Your safety and the safety of those we care for is **<u>very</u>** important
    - With your feedback and participation our shared safety goals will be met
- School Messenger will be utilized to notify all staff that are needed to respond
- When You Respond
    - Bring employee badge
    - Park in south parking lot by gazebo
    - Enter at the DV Richardson conference room entrance - show your employee badge - sign in
    - Report to appropriate station or the personnel pool

Event Tracking

- The Healthcare Safety Zone Portal assists with tracking emergency alerts and events to help identify areas of hazard vulnerability at GRH.

- Use the Non Patient Events Form to report security, grounds and equipment related concerns.

- Report anything that is out of the ordinary!

Quality Terminology

- **CMS - Centers for Medicare & Medicaid Services**
  - Administers Medicare and in partnership with state governments Medicaid—establishes rules and regulations for health care facilities
- **DNV-GL - Det Norske Veritas (GRH was accredited in 2016)**
  - Purpose: Safeguard life, property and the environment.
  - A Norwegian company approved by CMS to survey healthcare organizations for compliance to quality standards and for accreditation purposes.
- **NIAHO® - National Integrated Accreditation for Healthcare Organizations**
  - List of standards used by DNV-GL for hospital accreditation. These standards mirror the required CMS Conditions of Participation (CoPs).
- **ISO—International Standards Organization**
  - An international standard by which organizations manage the quality, business and compliance of the organization.
  - Within healthcare, ISO
    - Promotes the adoption of a process approach for developing and improving quality products and/or services
    - Improves patient care and organizational performance
    - Provides a team oriented culture for management
  - Is the Foundation of our Quality Management System.

Quality Survey Questions

Instead of saying "I don't know" please reply "I will find out"

Q. Have you heard of ISO?   *A: yes*

Q. Have you heard of the Quality Policy? *A: yes*

Q. Do you know the mission, vision and values of GRH?
                    A. yes

Q. Where would you go to access a policy or procedure?
Surveyor will say "Show me."

                    A. F-drive or office

Q. How do you know it's the most current version?
        A. The last review is dated

New Employee Orientation Acknowledgement

I have been provided access to and understand that it is my responsibility to read and understand GRH's policies and procedures.
I agree to abide by these policies.
I understand that if I have any further questions about any of the policies, I should ask my supervisor or HR.
All hospital policies can be found in the Hospital Portal. I understand that GRH has complete discretion to determine whether and to what extent to apply its policies and procedures to me in any circumstance.

Initial _____ I have received and reviewed the New Employee Orientation Manual

I have received and understand the expectations on:
Initial _____ the Invisible Architecture
Initial _____ the organizational chart/my dept. leader
Initial _____ tobacco, cell phone use and break times
Initial _____ worker's compensation policy
Initial _____ quality measures/customer service
Initial _____ AIDET
Initial _____ EMTALA
Initial _____ compliance and confidentiality
Initial _____ disaster plan
Initial _____ HICS
Initial _____ HIPAA

In addition to the overall acknowledgment, I specifically acknowledge and agree to:

Initial _____ I understand and agree that it is my responsibility to report any harassment that I have experienced or witnessed to my supervisor, HR or administration.
Initial _____ I understand my phone calls and email correspondence may be monitored for quality.
Initial _____ I understand my network and internet activity maybe be monitored for appropriate use.

Name (Print): _____ **Signature:** _____ **Date:** _____