



Orientation for Students

This course will cover

- Corporate Compliance
- Code of Conduct
- RPCI Policies
- HIPAA Confidentiality
- IT Security-HIPAA
- Diversity
- Public Safety
- Emergency Preparedness
- Workplace Safety
- Infection Control

This orientation material....

Is designed to give you an overview of our policies, code of conduct, safety practices and much more.

You are required to complete and sign the handout at end which indicates to Roswell Park you understand our requirements during the course of your study.

RPCI Philosophy

As people who will be working directly with our patients, families, employees, volunteers, vendors and the public you are accountable for your behavior, performance and communication while learning/working on site and in the community.

Mission and Values

Our Mission

To understand, prevent and cure cancer

Our Values

Commitment

Innovation

Teamwork

Integrity

Compassion & Respect

Corporate Compliance

To do the right thing and treat patients, co workers, and the public with dignity, integrity and respect while complying with rules, regulations and internal policies and procedures. An aspect of quality improvement.

IT'S THE RIGHT THING TO DO.

Why Corporate Compliance?

- Government agencies, insurance companies and consumers are aggressively reviewing billings, medical results and related processes throughout the healthcare industry.
- Government has the authority to question and investigate suspected violations.
- Government has no tolerance for fraud and abuse.

Corporate Compliance Program Goals

- To promote the highest standards of ethical and legal conduct.
- To protect and promote organization-wide integrity
- To ensure that RPCI upholds its high standards of business conduct.
- By following these laws, RPCI delivers quality patient care, research and education in an environment of trust and integrity.

Fraud and abuse laws – These laws are targeted at healthcare providers who submit false claims to the government. The False Claims Act prohibit “knowingly” presenting a false or fraudulent claim for payment.

“Knowingly” means:

- has actual knowledge the information is false
- acts in reckless ignorance or disregard of the truth or falsity of the information

Medicare regulations

Deficit Reduction Act (DRA) – To reduce federal spending by making significant changes to the Medicare and Medicaid programs. **Please refer to P&P [#126.1](#) Appendix for more information on Federal and State Laws that pertain to RPCI employees.**

State laws, rules and regulations:

- Confidentiality
- Professional Conduct and Licensing Requirements
- Medicaid regulations
- NYS False Claims Act
- Patient Bill of Rights

- Promotes workplace adherence to laws, regulations and Institute Policies and Procedures
- Advances the prevention of fraud, abuse and waste
- Furthers the mission of RPCI

Benefits of the Compliance Program

- Demonstrates commitment to honest and responsible conduct.
- Provides guidance
- Identifies and prevents criminal and unethical conduct.
- Improves the quality, efficiency and consistency of services.
- Encourages us to report potential problems.
- Prompt and thorough investigations of alleged misconduct.

Three Main Corporate Compliance Policies:

1. [Code of Conduct Policy #125.1](#)
2. [Corporate Compliance Summary Policy #126.1](#)
3. [Non-retaliation Policy #103.1](#)

- Code of ethical behavior that addresses how employees, volunteers, contractors and students are to treat patients, colleagues, and others that we meet or do business with.

Corporate Code of Conduct

Outlines code of conduct expectations for everyone including staff, patients, volunteers, students and contract workers:

- Harassment or inappropriate behavior
- Confidentiality
- Fraud
- Personal Politics
- Gifts
- Conflicts of Interest
- Legal Compliance

This policy states that every employee, volunteer, contract staff and student will strive to act in accordance with the provisions of any applicable law, the Corporate Code of Conduct, and will encourage other employees, volunteers, contract staff and students to act the same.

- Provides detailed information about the role various Federal and State laws play in preventing and detecting fraud, waste and abuse in federal health care programs. These Federal and State laws protect you from retaliation (or punishment) if you report a compliance concern in good faith.

Please refer to this policy's Appendix for more information on the Federal and State laws that pertain to your role.

Corporate Compliance Summary Policy (cont)

- Roswell Park will take steps to achieve compliance with its policies by utilizing *monitoring and auditing* systems designed to detect misconduct by its employees, volunteers, contract staff and students.
- Roswell Park will also promote a *reporting system* whereby employees, volunteers, contract staff and students can report misconduct within the organization without fear of retaliation.

Corporate Compliance Summary Policy (cont)

Any employee, volunteer, contractor or student who has knowledge of activities that he or she believes may violate a law, rule or regulation **has an obligation**, promptly after learning of such activities, to report the matter to his or her immediate supervisor, the Compliance Officer, or the Chief Executive Officer.

Non-retaliation Policy

- People with knowledge of actual or potential wrongdoing, misconduct, or violations of the compliance plan are to report it immediately.

People who report problems or concerns in good faith will be protected from retaliation, retribution or harassment.

Issues that should be reported include:

- Unethical relationships with vendors or contractors
- Inappropriate care of patients or equipment
- Unethical or inappropriate staff behavior
- Fraudulent or false actions
- Improper billing practices
- Breach of confidentiality (verbal or technical or other means)
- Bribes, kickbacks or incentives

To report a suspected violation:

In person:

- Your **Supervisor** or other **manager**
- **The Corporate Compliance Officer**

Marianne E. Hanley, Esq.

Main Hospital Room 8624

845-1206 Pager 642-8400

- **The Compliance Department**

Patricia Marshall and Kathy Mastrobattista

Cell & Virus Rm. 508 845-4160 and 845-8413

How to Report?

Call the **Compliance Hotline 845-3566**

- You can report an issue anonymously.
- You don't have to give your name.
- By e-mail or via the internal web . . .

You can reach **Marianne Hanley, Patricia Marshall and Kathy Mastrobattista** through RPCI e-mail

– OR –

- Through the **On-line submission** via Corporate Compliance Internal Webpage – Issues can be submitted **anonymously**.

If you report a violation:

All information is kept **confidential**.

– **No retaliatory actions** taken against informants reporting in good faith.

A successful Compliance Program

Depends on every person to:

- Know policies and procedures, laws and regulations and consistently comply with them
- Be aware of the government's focus on the healthcare industry
- Be responsible by bringing legal and ethical concerns forward

- RPCI Internal Website Corporate Compliance Webpage has information on it regarding:
- E&M guidelines
 - Code of Conduct
 - Reporting Information
 - Information on how to contact the Compliance Officers

Basic Policies

Workplace Harassment Policy #102.3

RPCI seeks to maintain a non-hostile work environment that is free of discrimination or harassment of any kind. In accordance with federal and state law, the Institute prohibits discrimination based on:

Race

Color

Sex

Religion

National
origin

Age

Disability

Sexual orientation

Marital status

Pregnancy

Predisposing genetic
characteristic

Veteran status

Use of Institute Resources

Institute Policy 105.1

- You are permitted to use Institute resources for Institute purposes only.
- Examples of Institute Resources:
 - office and medical supplies, equipment, vehicles, postage, photocopiers, computers, internet access, telephones, fax machines, e-mail, overnight mail, and other Institute resources.
- This policy prohibits the use of e-mail and computer resources for sexually explicit, inappropriate, harassing or otherwise offensive materials through e-mail, and visiting inappropriate and non-business related websites.

Weapons Possession Institute Policy 1503.1

- Everyone is prohibited from bringing, possessing and/or carrying weapons or any instrument capable of being a weapon and inflicting bodily harm on Institute grounds or in Institute vehicles.
 - This includes firearms, knives, pocket knives, black jacks, metal knuckles, etc.
- Tools needed for scraping or cutting boxes or other materials will be provided by the department, including box cutters.
 - Depending on their job duties, some people may get their supervisor's permission to carry personal multi-tools, such as a leatherman.
- [View Policy 1503.1](#)

Drug and Alcohol Free Policy

Institute Policy 205.1

- RPCI is committed to providing a drug and alcohol free workplace.
- Employees, students, volunteers and contract workers are prohibited from arriving for work under the influence of drugs and/or alcohol, and from consuming drugs and/or alcohol during their shift and breaks.
- Supervisors may send employees to the Employee Health Clinic if they have “reasonable suspicion” that the employee is impaired.
- The Employee Assistance Program (EAP) provides confidential assistance to employees for problems, including drug and alcohol problems, and can be reached at x5945.

Campus Smoke Free Environment Institute Policy 1314.1

- Smoking is prohibited **everywhere** on the RPCI campus and its satellites, both indoors and outdoors on RPCI property, including buildings, grounds, parking ramp, surface parking lots, cars parked in the ramp and surface lots, and Institute vehicles.
- For those people who wish to stop smoking, education, pharmacological aids, and smoking cessation programs are available.

- All employees, volunteers, students and contract workers are expected to adhere to each applicable Institute policy.
- Other policies that may apply to you can be found in the Institute Policies section of the internal web and in the hard copy of the manual. In addition, individual departments may maintain separate departmental policies.
- Failure to comply with Institute and/or departmental policies may result in the dismissal of an employee, volunteer or contract worker from RPCI

Institute Policies can be viewed on the RPCI Internal Web site, ask your supervisor or use the hotline process

The Health Insurance Portability and Accountability Act (HIPAA) is:

- a rule created in 1996 that mandates national standards to protect the **privacy** of personal health information
- a common standard for the electronic use and transaction of patient information within the health care industry.
 - Health Care facilities are required to comply with the regulations.
 - The HIPAA Privacy Rule is one part of the larger federal rule.

HIPAA Privacy Rule

Purpose is to define and limit the circumstances in which an individual's **protected health information (PHI)** may be used or disclosed

PHI is Protected Health Information or individually identifiable health information held or transmitted in any form whether electronic, paper, or oral.

Privacy Policies and Practices

- Protect our patients' PHI
- Required by law (HIPAA, N.Y. State Law)
- Expected by patients
- Supports community trust/RPCI reputation

Policies Directly Affecting You

- 1. Authorization**
- 2. Minimum Necessary**
- 3. De-Identification**
- 4. Record Retention**
- 5. Mitigation**
- 6. Business Associates**

Authorization:

- Use or disclose PHI **without the patient's authorization** for treatment, payment, and health care operations activities including quality assurance activities, fraud/abuse detection and compliance activities.
 - If our patient gives their **permission**, the clinician can discuss information with their family or caregiver.
- Obtain the patient's written authorization** for any use or disclosure of protected health information that is not for treatment, payment or health care operations

You may not access your own record, you must request your information from your doctor or from the Health Information Management Department.

You may not access your family member's record without authorization and if you have authorization the request must be made through their doctor or the Health Information Management Department.

Use, disclose, and request only the **minimum amount** of PHI needed to accomplish the intended purpose of the use, disclosure, or request.



“Be the Patient/ Loved One” Test

If you or somebody you love was the patient,
how would you want your/their PHI used?

De-Identification

There are no restrictions on the use or disclosure of **de-identified** health information as it provides no reasonable basis to identify an individual.

De-identification involves removing specified identifiers from the information, such as:

- Names
- All elements of dates (except year) for dates directly
- Related to an individual
- Social security numbers
- Medical Record Number
- Biometric identifiers, including finger and voice prints
- Full face photographic images and any comparable images
- Any other unique identifying number, characteristic, or code

Record Retention

- Roswell maintains privacy policies and procedures, privacy practices notices, disposition of complaints, and other actions, activities, and other required information until **six years** after the later of the date of creation or last effective date
- **Do not dispose of PHI** unless you have your supervisor's permission.
- PHI **must be shredded**, not disposed of in trash containers or recycling bins
- PHI is **not to leave the Roswell campus** in any form.

Monitoring Access

Regular Auditing

(Weekly, Monthly, Quarterly, etc.)

- Patient
- User
- Remote
- Researcher
- Random Clinic/Unit

Incidents of Questionable Access...

- **Reported to supervisor & HR**
- **Investigated**
- **Findings reviewed**
- **Disciplinary actions applied which may include termination.**

How can we keep PHI safe?

IMMEDIATELY report any suspected or actual:

- Loss of PHI
- Unauthorized release of PHI
- Misuses of PHI or;
- Theft of PHI

to any of the following at RPCI:

Cheryl Canfield, Privacy Officer (x5991)

Mike Mineo, Security Officer (x2349)

**HIPAA Security Officer/AVP Information Technology Security –
Security Analyst – Colleen Ethier (845-3922)**

RPCI HOTLINE – 845-3566

****Your own direct clinical supervisor from school/institution or school administrator***

How can we keep PHI safe?

- Do not share computer passwords - use your own individual account.
- We use “Role based” access within systems.
- IT logs user activity within PHI systems.
- Keep printers and fax machines in secure areas so visitors cannot view paper with PHI.
- Pre-program numbers in fax machines whenever possible.
- Do not discuss/share any patient information at anytime

Public Safety Role

- All Officers are Sworn New York State Peace Officers
- Public Safety Officers are on duty 24 hours a day, seven days a week
- The Division of Public Safety is located just inside the hospital entrance
(Hospital Main Entrance, Ground Floor)

Emergency / Non-Emergency #'s

Calling from Inside RPCI

• Pick up the phone and say **Public Safety** and you will be directed to the **Public Safety Command Center** or call

- **Emergency - ext. 3333**
- **Non-Emergency – ext. 3069**

Calling from outside RPCI

- **Non Emergencies call 845-3069.**
- **For Emergencies call 845-3333**

Division of Public Safety is Responsible for;

- Protecting staff, patients, visitors, students, and property
- Investigating and recording incidents, thefts, disturbances, vandalism, accidents, and traffic accidents
- Enforcing New York State Laws
- Patrolling Campus
- Building Access Door Control

Role of the Division of Public Safety

- Responding to Emergency Codes
- Interfacing with our Public Relations staff to direct & control media access during press conferences and events.
- Escort Services;
“As Available” Assist patients, visitors, students, staff
- Parking Enforcement
- Protecting staff, patients, visitors, students, and property
- Investigating and recording incidents, thefts, disturbances, vandalism, accidents, and traffic accidents
- Enforcing New York State Laws
- Patrolling Campus
- Building Access Door Control

Secure Building Access

Follow procedures which include:

- Personal escort (i.e. Public Safety Officer or Authorized Staff member)
- Sign in at the Public Safety Office
- Provide photo ID
- Use your employee ID card with the appropriate access information encoded
- Receive prior written approval

Identification / Uniform

- Always wear your ID badge; picture side out (visible) and above the waist
- Protect your ID badge and your RPCI - issued uniforms so they cannot be misused. You are responsible for property assigned to you.
- If your identifications badge is lost, contact Public Safety immediately to report the loss and have the card deactivated.

Workplace Violence General Statement of Policy

- Roswell Park Cancer Institute is committed to our employees' Health and Safety.
- Our Goal is to promote the safety and well being of all staff, patients, and visitors.
- Roswell Park does not tolerate violence in the workplace and will make every effort to prevent violent incidents from occurring through the [Workplace Violence Prevention Program.](#)
- Contact a supervisor or public safety if you feel you are in immediate danger

Workplace Safety

The best emergency equipment will be of no use if it is in disrepair or inaccessible.

Do not block access to:

- ✓ Doors or hallways
- ✓ Eyewashes
- ✓ Fire alarm stations
- ✓ Fire extinguishers
- ✓ Spill kits

Emergency Action Plans

Codes:

- Red, White, Blue, Pink

Weather Emergencies

Utility Interruptions

Threats

Chemical Emergencies

Easy to remember- **R A C E**

Rescue

Alarm

Confine

Evacuate

(includes oxygen shutoff)

CODE WHITE Disaster Plan

- ✓ Remain or return to your work area
- ✓ Direction will be communicated throughout the institute buildings
- ✓ Departments will support staffing of the Labor Pool as requested by the individual in Charge

CODE BLUE

Medical Emergency

CODE BLUE can be called for a patient, employee or visitor

✓ Call 3333

Give exact location and nature of emergency

✓ Stay with the person

Provide care to the level of your ability

✓ Automatic Electronic Defibrillators are available in all buildings

✓ A CODE BLUE team responds to all CODE BLUE announcements.

No one else should respond to the CODE area

CODE PINK

Missing Person

- ✓ Immediately upon suspicion notify the Nursing Supervisor
- ✓ If this is delayed for any reason, notify Security directly
- ✓ Prepare a description of the individual
- ✓ Continue to search the area

Weather Emergencies

Tornado Procedure

- Watch: weather conditions are right for the formation of tornados
- Warning: funnel clouds have been observed

Snow Emergency

- Transportation plans are in place call in if you need assistance
- Roswell Park does not close, please discuss plans with your supervisor

Utility Interruptions

We have emergency plans are in place to
Deal with interruptions of:

- Water
- Natural Gas
- Electricity

As in a Code White, information will be
provided regarding any actions to be taken

Hazardous Materials Emergencies

Radiological, Biological, Chemical

Follow the direction given at your department specific training regarding the handling of a spill or release.

When in doubt, call the OES office at 5998, or use the Emergency number 3333 for guidance and assistance.

Critical Circuits

- ✓ Backup power is provided through a set of emergency generators.
- ✓ All of the fixed critical equipment is
- ✓ Connected to the generator.
- ✓ Portable equipment is covered only when it is plugged into a RED outlet.
- ✓ Do not use red outlets for high load non critical devices.

Electrical Equipment Inspection Program

- ✓ Every electrical device in use in the Hospital must be inspected prior to being used.
- ✓ This includes personal items.
- ✓ Use the Work Order Request process to schedule an inspection of your item or discuss with your supervisor
- ✓ Do not use equipment with Lock-Out/Tag-out or Do not use signs.

Waste Separation

Be sure dispose of waste properly

Clear Bag

- **General Trash**

Red Bag

- **Biohazardous Materials**

Sharps Containers

Yellow Bag

- **Chemotherapeutic Wastes**

Grey Bins

- **Confidential for shredding**

Emergency Operations Plan

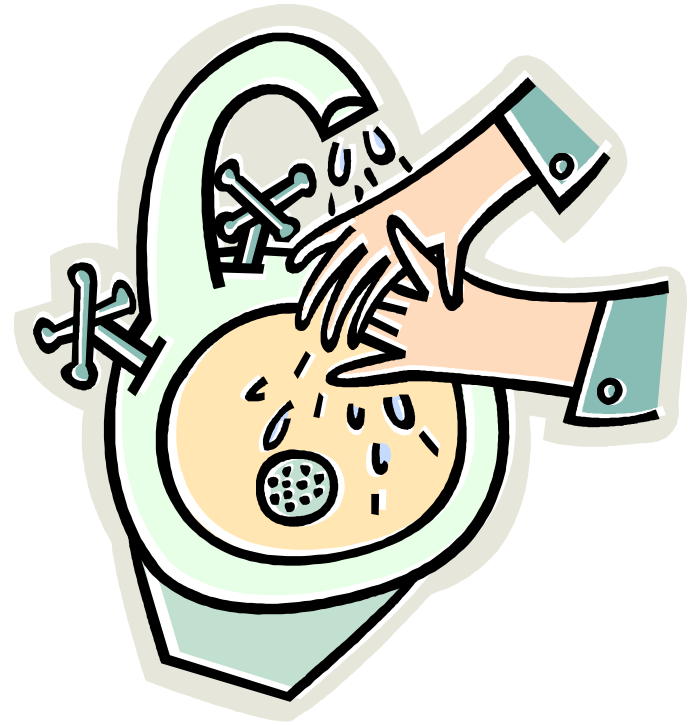
- The RPCI Emergency Operations Plan is located on the home page of the Institute's intranet.
- Departments have written their own Department Emergency Operations Plans (**DEOP**) specific for:
 - ✓ protecting their operations
 - ✓ for responding when normal department functions cannot occur
 - ✓ for responding to Institute or community emergencies.

Protecting Our Patients Share Your Care Not Your Germs

Kimberly M. Hinckley RN, BSN, CIC
Gale M. Liddell BS, MT, CIC

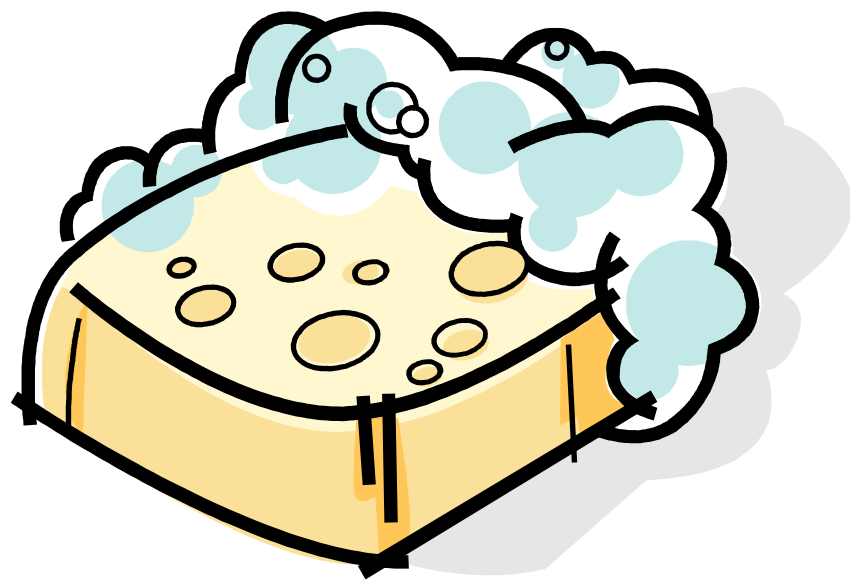
Hand Hygiene is the Foundation of Infection Prevention

- ✓ Hand hygiene lowers the risk of transmitting infections from one person/object to another
- ✓ Wearing gloves does not replace hand hygiene



When to Use Soap and Water

- ✓ When hands are visibly soiled
- ✓ When alcohol based hand sanitizer is not available
- ✓ After using the restroom/bathroom



Washing With Soap and Water

- ✓ Wet hands with water and apply soap
- ✓ Rub hands together for at least 15 seconds
- ✓ Rinse and dry with a disposable towel
- ✓ Use the towel to turn off the faucet

Using Hand Sanitizer/ Gel



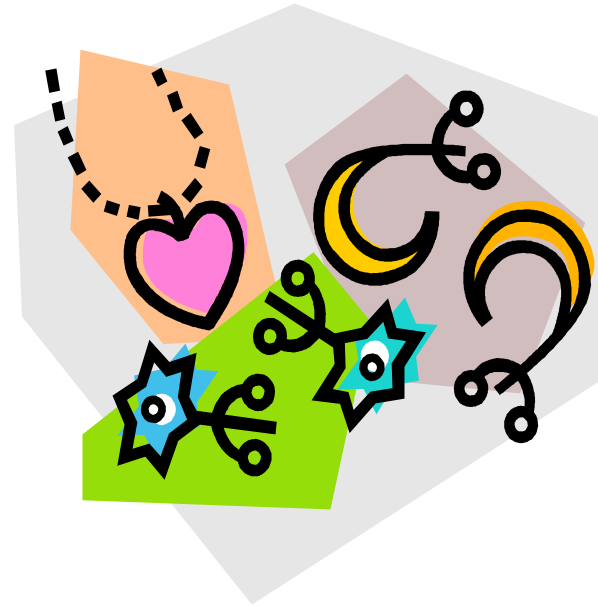
- ✓ Apply the product to the palm of one hand and rub hands together
- ✓ Cover all the surfaces of hands and fingers and rub until hands are dry (at least 15 seconds)
- ✓ Don't forget your thumbs!

✓ Only RPCI approved/
provided lotion is permitted
due to bacterial concerns



Jewelry Limitations for Clinical and Ancillary Departments

- ✓ Keep to a minimum
- ✓ Nothing dangling



Personal Hygiene



- ✓ Regular bathing or showering
- ✓ Clean uniforms or clothing
- ✓ Long hair should be pulled back or up for clinical and ancillary staff



Bacteria are germs that can usually be killed with antibiotics, such as:

- ✓ Strep throat
- ✓ Staph infections
- ✓ Tuberculosis
- ✓ Clostridium difficile

Viruses are germs that cannot be killed with antibiotics

- ✓ Chicken pox/ shingles
- ✓ Flu
- ✓ Hepatitis
- ✓ HIV/AIDS
- ✓ Measles

There are vaccines to prevent some viruses



Big Bugs Need Big Guns

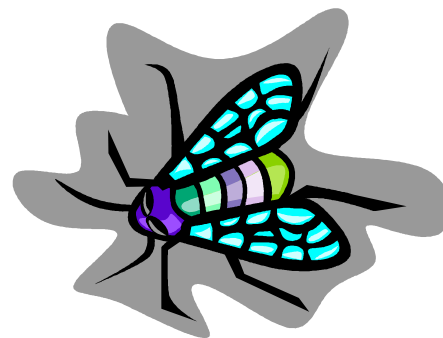
- ✓ Super bugs are bacteria that are resistant to most antibiotics
- ✓ Examples:
 - ✓ MRSA- Methicillin Resistant Staph Aureus
 - ✓ VRE- Vancomycin Resistant Enterococci
- ✓ Protect yourself, your patients and your family by:
 - ✓ Using good hand hygiene
 - ✓ Good environmental cleaning
 - ✓ Following isolation guidelines
- ✓ Some people are colonized (carriers) without even knowing it

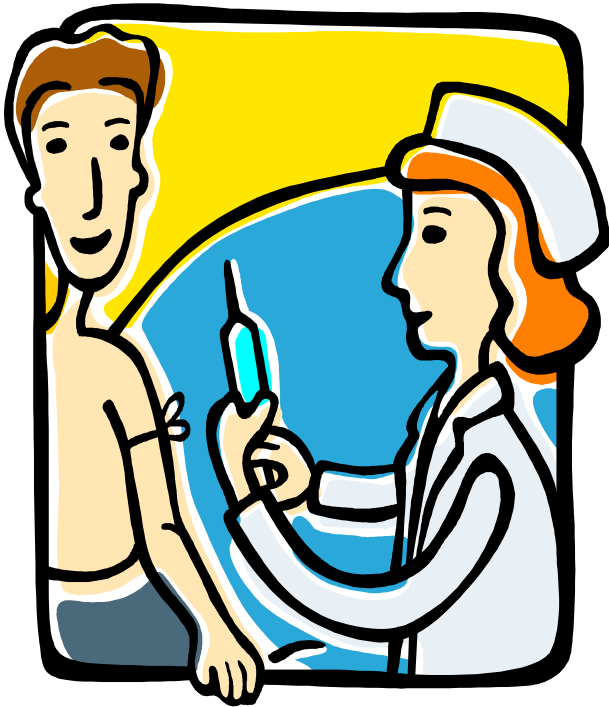
Water, Mold and Insects

Report any of these to your supervisor immediately

- ✓ Stagnant water
- ✓ Water leaks
- ✓ Mold
- ✓ Insects/pests inside the buildings

These conditions can be very harmful to our patients



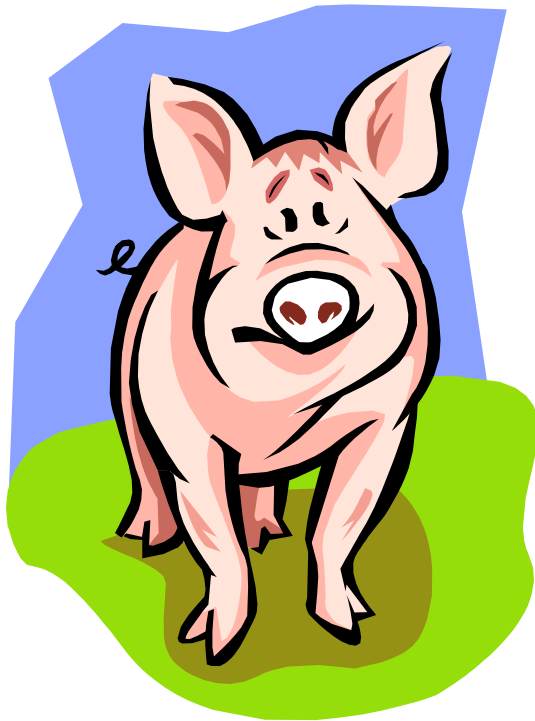


Vaccines are important to protect yourself, your family and your patients

✓ Examples:

- ✓ Chicken Pox
- ✓ Hepatitis B
- ✓ Influenza- both the seasonal influenza vaccine and the new H1N1 (swine flu) vaccine

H1N1 (Swine Flu) Influenza



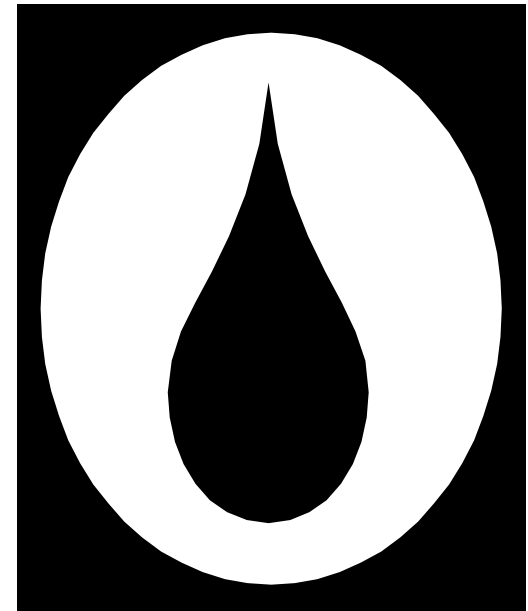
- ✓ Type of influenza that originated with pigs
- ✓ Symptoms include:
 - ✓ Temperature greater than or equal to 100F or 37.8C
 - ✓ WITH a cough and/or sore throat
 - ✓ Employees with these symptoms should contact Employee Health for further direction before coming to work
 - ✓ A new H1N1 vaccine will be released shortly

What If You Are Sick

- ✓ Notify your supervisor and consult with Employee Health
- ✓ Should not come to work if you have a communicable disease such as: chicken pox, measles, influenza, etc.
- ✓ Should not come to work if you have any of the following:
 - ✓ Temp >100
 - ✓ Acute diarrhea
 - ✓ Contagious rashes/ draining lesions
 - ✓ Acute illness

Standard Precautions

- ✓ Used to be called **Universal Precautions**
- ✓ Treat all blood, body fluids, secretions, excretions (except sweat, non-intact skin and mucous membranes) as if they are infected



Transmission Based Precautions

- ✓ Designed for patients with proven or suspected infection/colonization with pathogens (germs) that are more serious and/or are easily spread to others
- ✓ Additional precautions beyond Standard Precautions are needed
- ✓ Examples:
 - ✓ Airborne Precautions
 - ✓ Droplet Precautions
 - ✓ Contact Precautions
 - ✓ Contact Plus Precautions

Airborne Precautions



- ✓ Used for small organisms (germs) that stay suspended in the air and can travel long distances (ex. tuberculosis)
- ✓ Requires:
 - ✓ N-95 respirator masks
 - ✓ Respirators require fit testing
 - ✓ Patient must be in a private, negative pressure room
 - ✓ Door must remain closed

Watch for 'Airborne' Signs...



AIRBORNE PRECAUTIONS (IN ADDITION TO STANDARD PRECAUTIONS)



**NEGATIVE
PRESSURE
ROOM,
DOOR CLOSED.**



RESPIRATOR MASK REQUIRED.

- ☐ Isolation Mask
- ☐ N95 Respirator Mask



**PATIENT TRANSPORT:
LIMIT TO ESSENTIAL
PURPOSES ONLY.
PLACE ISOLATION MASK
ON PATIENT.**

Wash Your Hands.

VISITORS: Report to Nurse's Station Before Entering Room.

Droplet Precautions

- ✓ Used for organisms (germs) spread through respiratory secretions or contact with mucous membranes
- ✓ Do not stay suspended in the air over long distances (ex. pertussis, seasonal and H1N1/swine influenza)
 - ✓ Does not require special ventilation
 - ✓ Does require private room but door can be open
 - ✓ Requires isolation mask (not N-95 mask)



Watch for 'Droplet' Signs...



DROPLET PRECAUTIONS

(IN ADDITION TO STANDARD PRECAUTIONS)



PRIVATE ROOM

NOTE:
Special air handling
and ventilation
are NOT necessary.
Door may remain OPEN.



**MASK
REQUIRED**



**DEDICATED
NON-CRITICAL
EQUIPMENT**

Wash Your Hands.

VISITORS: Report to Nurse's Station Before Entering Room.

Contact Precautions



- ✓ Used for organisms (germs) spread by direct or indirect contact with the patient or the patient's environment (ex. MRSA, VRE)
- ✓ Requires:
 - ✓ Private room
 - ✓ Gown and gloves
 - ✓ Dedicated equipment
 - ✓ Meticulous hand hygiene

Watch for 'Contact' Signs...



CONTACT PRECAUTIONS

(IN ADDITION TO STANDARD PRECAUTIONS)



**PRIVATE
ROOM**
(Door may
remain open)



**GOWN
REQUIRED**



**GLOVES
REQUIRED**



**DEDICATED
NON-CRITICAL
EQUIPMENT**

Wash Your Hands.

VISITORS: Report to Nurse's Station Before Entering Room.

Contact Plus Isolation

- ✓ Used for patients with *Clostridium difficile* (has a hard shell like a nut)
- ✓ Requires:
 - ✓ Gown and gloves
 - ✓ Dedicated equipment
 - ✓ Wash hands must be washed with soap and water (not hand sanitizer) to penetrate the shell



Watch for 'Contact Plus' Signs...



CONTACT PLUS PRECAUTIONS (IN ADDITION TO STANDARD PRECAUTIONS)



PRIVATE ROOM
(Door may remain open)



GOWN REQUIRED



GLOVES REQUIRED



**DEDICATED NON-CRITICAL
EQUIPMENT**

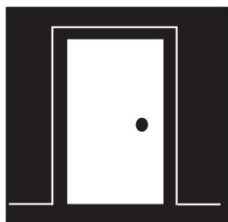
- Hands **MUST** be washed with **SOAP** and **WATER** after removing gloves and gown.
- Environmental Services **MUST** use the **BLEACH WIPES** for cleaning all surfaces in the patient room.
- Use of **DEDICATED NON-CRITICAL EQUIPMENT** **MUST** be strictly adhered to.

Watch for 'Protected Environment' Signs...

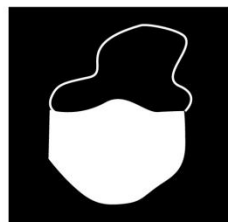


PROTECTED ENVIRONMENT

This policy does not restrict access of staff or visitors to patient rooms.
Doors should be closed promptly upon entering or exiting.



**DOORS ARE TO
REMAIN CLOSED**
(unless clinical
condition excludes
that patient).



**MASKS ARE TO BE
WORN BY PATIENT...**
when being transported **OUT**
of the PE to other areas
within the facility.

Type of Mask to be Worn:

- KC PCM 2000 (Duckbill Mask)
- KC Child's Face Mask
(for ages 3-10 yrs old)



**A PORTABLE HEPA
FILTRATION UNIT**
will be placed
in the room
and turned on
(except for existing PE:
5th floor,
6 North and ICU).



VISITORS
Hands must be
washed **prior**
to each entry
and after exit
from the
patient's room.

VISITORS: Please notify the nursing staff if:

- You had a **fever**, an **infection** or recent **exposure** to infection within the ***past three weeks***
- You have recently been **immunized with a live virus**
- You have any signs of **respiratory illness**

Key Points About Personal Protective Equipment (PPE)

- ✓ Put on before anticipated contact with patient
- ✓ Put on before entering the patient's room
- ✓ Remove and discard at the doorway before leaving room (except for N-95 respirator masks- remove these after leaving room)
- ✓ Perform hand hygiene

Sequence for Putting on PPE

- ✓ First-gown
- ✓ Second- mask or respirator (if needed)
- ✓ Third- goggles or face shield (if needed)
- ✓ Last- gloves

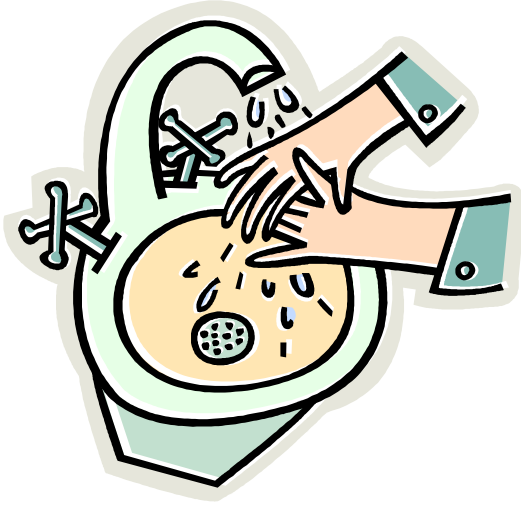


Sequence for Taking Off PPE

- ✓ Sequence is important so you minimize the chance of contaminating your skin and clothing
- ✓ First remove gloves
- ✓ Second- face shield or goggles
- ✓ Third- gown
- ✓ Last- mask or respirator



Perform Hand Hygiene Immediately After Removing PPE



- ✓ If hands become contaminated during PPE removal, wash hands before continuing removal
- ✓ Share your care and not your germs!

- ✓ Report blood and body fluid exposures to Employee Health or your supervisor immediately
 - ✓ Immediate post exposure follow-up and prophylaxis (if indicated) is critical
 - ✓ Employees who have not received the Hepatitis B vaccine and can be exposed to blood and body fluids at work, should really consider receiving it- contact Employee Health
- ✓ Roswell Park is continually looking for safer sharps available on the market to protect our employees



Only You Can Help Us Prevent the Spread of Infections!

- ✓ RCPI has over 3200 employees with 2 Infection Control Practitioners
- ✓ This means everyone (clinical and non-clinical) has a role in Infection Prevention
- ✓ We have a special patient population with immune systems that cannot fight off infections like you and me
- ✓ It is our responsibility to work as a team to fight the battle of Infection Prevention



Call Us!

- ✓ Infection Control staff always welcomes calls and questions
- ✓ We are here to help you and our patients
- ✓ Ext 4038 or 3425



This is the end of your Orientation Program.
Please complete RPCI paperwork.

If you will be working in a Scientific Lab, you
may be required to complete the Chemical
Hygiene course.

Please discuss with your supervisor or
contact the HR Training office at ext 1089.