



The Valley Hospital

Self Learning Orientation Module

Students & Instructors

INSTRUCTIONS: READ THROUGH THE MATERIALS. PRINT PAGES 22 TO 28 AND COMPLETE, SIGN AND RETURN TO YOUR INSTRUCTOR ON THE FIRST DAY OF CLINICAL: STATEMENT OF CONFIDENTIALITY, STATEMENT OF UNDERSTANDING OF CODE OF ETHICS, CORPORATION COMPLIANCE STATEMENT, INFECTION CONTROL TEST, POST TEST, INSULIN TEST.

General Orientation

Self-Learning Packet

Welcome to the Valley Health System. We are committed to providing excellent service.

The Valley Health System (VHS) is comprised of three entities:

- The Valley Hospital
- Valley Home Care
- Valley Medical Group

This self-learning packet is designed to orient you to the culture, policies, and procedures of the Valley Health System.

Upon completion of this orientation, you will be able to:

- Explain the mission, vision, and values of the Valley Health System and how each sets the standards and guides the behaviors that contribute to the organization's culture.
- Recognize the Valley Health System's policies and procedures related to:
 - Corporate Compliance
 - Cultural Diversity
 - Fire Safety
 - Hazardous Materials
 - Infection Control
 - Risk Management

Service Excellence



At Valley, employees need your help to create an environment where patients, visitors, volunteers, doctors, community members, and employees are valued. In order to accomplish this goal, we look to our mission, vision, and values.

Mission

Valley Health System exists to provide healthcare services that meet the changing needs of the region and to promote all aspects of good health in our communities. The people of Valley Health System

- Respond timely
- Be a team member

Respect

- Remember everyone is important
- Recognize and encourage all
- Ensure everyone's privacy
- Take pride
- Respect diversity

Value

- Patients and families come first
- Take ownership
- Help people to their destination
- Value everyone's time
- An apology is always appropriate

Ethics

- Represent Valley positively
- Honor commitments
- Do what is right
- Play fair/tell the truth
- Be an inspiration to others

Five Fundamentals of Service/AIDET

We also utilize the Five Fundamentals of Service to provide very good care and ensure patient satisfaction.

AIDET is the acronym that enables all employees to communicate clearly with patients, visitors, and each other.

AIDET

A Acknowledge

- Smile
- Make eye contact
- Greet the individual by using his full name, unless otherwise instructed

I Introduce

- Welcome
- State your name, your department, and your role

D Duration

- State how long the procedure/process/interaction should take
- Apologize if there is a delay

E Explanation

- Explain the details regarding the procedure/process/interaction
- Offer to answer any concerns, questions, or resolve any complaints
- Ask, "Is there anything else I can do for you?"

T Thank you

- Say thank you for... choosing Valley; your patience; your help; etc.

Use of the Five Fundamentals:

- Heightens an individual's perception that we care and want to provide very good service.
- Makes a difference in patient satisfaction
- Creates satisfied employees and volunteers who give even better care.

Guidelines regarding:

a. Personal Appearance

- All employees are expected to abide by the Personal Appearance Guidelines.
Students are expected to wear a school uniform with a clearly displayed school name/logo. This allows you to be easily identified by patients, guests and hospital personnel.
- **Nursing clinical instructors** are expected to wear a white lab coat with neat attire that abides by the personal appearance guidelines OR WHITE scrubs with a white lab coat.
- **Both students and nursing clinical instructors MUST wear their photo school ID on their uniform or on a lanyard while at the hospital for the clinical rotation. If they forget this ID, students/instructors must obtain a photo ID badge from the security office for the day.**
- While the System respects and recognizes the right of every employee to express his/her social, cultural and ethnic personality in a mode of dress and grooming, the hospital has a need to present a professional appearance to the patients and our community.



Employees/students/instructors

b. Smoke Free Environment

Valley Health System is a smoke-free organization. In addition to not smoking on any campus, smoking is also prohibited on adjacent sidewalks and in any vehicle parked on Valley properties.



may not smell of smoke.

Why has Valley Gone Smoke Free?

- To promote good health and positive health behaviors.
- To provide a healthy and safe environment for employees, physicians, patients, and visitors.
- To set an example. It is the right thing to do!

b. Cell Phone Policy

Cell phones are permitted **ONLY** in designated areas throughout the hospital and its off-site locations. Patients, families, and visitors should be directed to these designated areas. When your cell phone is not being used in these approved areas, it must be completely turned off.

c. Public Places

All of the VHS public spaces are reserved for patients and their families. In order to send a confidence-building message of reassurance, professionalism, and service, employees/ volunteers/ students/instructors are asked to take breaks and hold conversations in employee designated areas such as break rooms, the employee cafeteria, etc. Students/ instructors are **NOT** permitted to loiter in the sitting areas located on the first floor.

Pre & post conferences may be held either in the cafeteria, terrace, or in a location on the clinical unit, agreed upon by the unit leadership and the instructor.

d. Elevator Etiquette

- Patients and medical emergencies **always** have priority when using the elevators.
- Do not use the elevators during a fire or fire drill.
- If you are stuck in the elevator:
 - a. Use the telephone to notify the operator or someone outside of the elevator.
 - b. Identify yourself and tell them which elevator you are on and floor location.
 - c. Alert them to other pertinent information, e.g., patient on elevator.
 - d. Remain calm and wait for assistance.

Corporate Compliance

Corporate Compliance is about doing what is right! Corporate Compliance is a voluntary internal fraud detection and prevention program tied to the Valley Health System policies and Code of Ethics. Suspected violations should be reported to any supervisor or Corporate Compliance Officer. They can be reported either verbally, in writing, or by voicemail to a confidential phone line: **TVH & Valley Medical Group: (201) 447-8000 x111-2993**

You may give this information anonymously, but you need to give sufficient information so that a credible investigation may be conducted.

HIPAA

HIPAA (Health Insurance Portability and Privacy Act) is federal legislation aimed at protecting confidentiality and security of health data. HIPAA insures that your private medical information will be used appropriately for treatment, payment, and healthcare operations only. Protected Health Information (PHI) is any information, including demographics that identify an individual. Names, addresses, employers, relatives' names, date of birth, phone or fax number, social security numbers, medical record or account numbers are all considered PHI. Verbal discussions, written communications and electronic communications are all protected under the HIPAA regulations. An authorization is required to use or disclose any PHI for any purpose other than for treatment, payment or operations purposes.



Minimum Necessary Access Standard

Under HIPAA, providers must make a reasonable effort to disclose or use only the minimum necessary PHI in order to do their jobs. We need to identify people or classes of people who need access to PHI to do their jobs, and we need to consider what categories of PHI they need access to and limit access accordingly. For example, an RN needs access to much more information than a transporter.

HIPAA recognizes that there may be occasional incidental disclosures of PHI as part of our business. These are not considered a violation of the law. For example, a sign-in sheet at a reception area may include a patient's name. However, all employees need to be conscious of the Minimum Necessary Access Standard and focus on making sure our processes align with this standard.

Written Notice of Privacy Practices

This notice **MUST** be given to each patient who is admitted or registered into our system. It informs the patient and family about how we use their PHI and what their rights are related to use and disclosure under HIPAA. Every patient must sign an acknowledgment that they have received a copy of the privacy notice. If this acknowledgment cannot be obtained, we need to document why it was not obtained.

Individual's Rights under HIPAA

- Right to Inspect and copy their medical record. Our policy is to check with the attending physician first and make sure any releases are signed as needed. (Policy #34-01)
- Right to amend the medical record as appropriate.

- Right to an accounting of disclosure. The patient is entitled to a list of all people and institutions that have been given access to their medical information. (Beginning April 14, 2003, the individual has six years to request this accounting.)
- Right to request restrictions. For example, the patient may ask not to be included on the Hospital Directory and/or specify those people who may have access to medical information
- Right to request confidential communications.
- Right to a paper copy of the Notice of Privacy Practices.
- Right to file a complaint if he feels we have infringed his privacy rights under the HIPAA legislation.

Ways to Protect and Maintain Patient Privacy

- Close room doors when discussing treatment.
- Close curtains and speak softly in semi-private rooms.
- Avoid discussing patients in public areas.
- Protect charts by using cover sheets. Turn them so names, etc. are not easily visible.
- Do not leave messages on answering machines that reveal any PHI.
- Do not leave PHI unattended. Return it to its proper location.
- **Discard printed patient information; make sure it is shredded—including all patient summary reports.**
- Log off the system after you complete accessing electronic patient information. (Electronic audits will be conducted to determine who has accessed PHI.)
- Keep computer monitors turned so passersby cannot see them.
- Use screen savers to block PHI.
- Send and store information on public networks in encrypted form.
- Do not post or share passwords. Avoid obvious passwords, and change passwords frequently.
- When faxing PHI, make sure it is received by a fax machine in a secure location.
- Do not let faxed information sit on an unattended fax machine.
- E-mail: always check the address line of an e-mail before you send it.
- Never remove computer equipment or software without permission.

Sanctions

HIPAA's privacy and security regulations provide civil or criminal penalties against Healthcare Organizations that fail to keep PHI private. Valley Health System employees will be disciplined for failure to comply with HIPAA according to the policy on Employee Discipline.

HIPAA Hotline

Staff questions about HIPAA should be directed to the HIPAA hot line (x612-4472). Patients and family concerns should be directed to the Patient Relations Department at x447-8169.

Patient's Rights & Code of Ethics

- *We treat all patients with dignity, respect and courtesy.*

- *We provide quality health care to all of our patients, without regard to race, age, religion, national origin, sex, sexual preferences, handicap, diagnosis, ability to pay, or source of payment.*
- We obtain informed consent for treatment when necessary.
- We inform patients of their right to make advance directives for health care.
- All patients have a right to know the names of the professionals caring for them.
- All patients have a right to a translator or interpreter, if needed.
- All patients have a right to physical privacy, unless assistance is needed.
- All patients have the right to freedom from physical and mental abuse.
- All patients have the right to freedom from restraints, unless authorized by a physician for a limited period of time to protect themselves and/or others.
- All patients shall receive sufficient time, information and assistance for their continuing healthcare needs after discharge.
- All patients shall receive assistance in the transfer to another facility, if required or requested.
- All patients have the right to prompt access to the information in the medical record.
- All patients have a right to a copy of their medical record.
- We provide emergency medical treatment to all patients, regardless of ability to pay.
- We do not pay for referrals.
- We do not accept payments for referrals we make.
- We are committed to complying with all applicable laws, regulations, and accreditation standards.
- We will not tolerate harassment by anyone based on the diverse characteristics or cultural backgrounds of those who work with us.
- All employees shall sign a statement of understanding after receiving corporate compliance education.



Risk Management

The VHS' Risk Management program provides a structure to ensure that quality care and services are provided in an environment which promotes the safety of our patients, staff, visitors and volunteers.

Risk Management refers to those activities directed at preventing or reducing injuries or loss. This is accomplished by:

- Educating employees about ways to reduce risk or contain loss
- Identifying areas of potential risk so that preventive measures may be used
- Establishing policies and practices regarding safety procedures to reduce error or injury
- Investigating occurrences to determine how best to prevent or reduce them from happening again

Infection Control ***“Infection Control is everyone’s responsibility.”***

Cleanliness is the key to infection control. Hand washing is the single most effective way to prevent infections. Hand hygiene can be accomplished using soap and running water or by utilizing a sanitizing hand rub. To properly clean your hands, take off all jewelry and be sure to remove any chipped nail polish. On patient care units, natural nails are encouraged.

Fake nails, inlays, gels, tips and other augmentation are not permitted.

Soap and Water Hand Wash Protocol

- Use soap, warm water and lots of friction. Lather and scrub hands and wrists for at least 15 seconds, then rinse thoroughly. Pay attention to finger nails and areas that are creased like your palms.
- Dry hands well on paper towels. Use a dry paper towel to turn off faucets.

Hand Hygiene with Waterless Hand Sanitizers

- Follow instructions on the outside of the container.
- Put a golf ball size amount of foam into the palm of your hand.
- Rub your hands together paying attention to your nails, between your fingers and areas of your hands that are creased, like your palms.
- Continue rubbing your hands together until they are completely dry.



If your hands are visibly dirty, then you must wash using soap and running water.

When Should I Perform Hand Hygiene

- ▣ **Before:**
 - Patient contact
 - Donning sterile gloves
 - Performing a procedure
 - Inserting urinary catheters, peripheral vascular catheters, or other invasive devices that don't require surgery

- ▣ **After:**
 - Contact with a patient
 - When moving from a dirty area to a clean area on the patient
 - Contact with body fluids or excretions, non-intact skin, wound dressings
 - Removing gloves

Know the precautions you must take if there is exposure to blood or other body fluids, broken skin, or mucous membranes. In general, we follow standard precautions for all of our patients. This means that we treat all blood and body fluids as if they were infectious. This will mean gloving when having contact with a patient's blood or body fluid. You may also see some patients on transmission based precautions.

Standard precautions are meant to reduce the risk of transmission of bloodborne and other pathogens from both recognized and unrecognized sources. They are the basic level of infection control precautions which are to be used, as a minimum, in the care of all patients.

Hand hygiene is a major component of standard precautions and one of the most effective methods to prevent transmission of pathogens associated with health care. In addition to hand hygiene, the use of **personal protective equipment** should be guided by **risk assessment** and the extent of contact anticipated with blood and body fluids, or pathogens.

In addition to practices carried out by health workers when providing care, all individuals (including patients and visitors) should comply with infection control practices in health-care settings. The control of spread of pathogens from the source is key to avoid transmission. Among source control measures, **respiratory hygiene/cough etiquette**, developed during the severe acute respiratory syndrome (SARS) outbreak, is now considered as part of standard precautions.

Promotion of an **institutional safety climate** helps to improve conformity with recommended measures and thus subsequent risk reduction. Stop the chain of infection by following best practice. Objects such as bedside tables, call bells, glucometers and medication scanners can transfer Infections. **Always** Clean and disinfect equipment after every use.

For Example you may encounter a situation that you are performing an accu-check and failed to place the glucometer in a plastic bag before entering an isolation room and took the enter kit into the room with you so that you had all your supplies to perform the accu-check. Unfortunately in this scenario you have just contaminated the entire kit and the supplies. The equipment needs to be cleaned and all the supplies replaced. So before entering an isolation room, think through what you need to accomplish.

Transmission Based Precautions

In addition to consistent use of Standard Precautions, additional precautions may be warranted in certain situations as described below.

A. Identifying Potentially Infectious Patients

- Facility staff remain alert for any patient arriving with symptoms of an active infection (e.g., diarrhea, rash, respiratory symptoms, draining wounds or skin lesions)
- A special indicator will be placed on each patient electronic medical record by infection control RN to indicate to the staff what type of precautions are indicated. This can be viewed from the summary tab in the patients chart.

Special Indicator Edit		
	Last Edited By	Last Edit Dt/Tm
Isolation Confirmed: Contact	Boeni, Deborah	03/07/16 08:31
Isolation Confirmed: Droplet	Boeni, Deborah	03/07/16 08:32

B. Contact Precautions

- Apply to patients with any of the following conditions and/or disease:
 - Presence of stool incontinence (may include patients with norovirus, rotavirus, or *Clostridium difficile*), draining wounds, uncontrolled secretions, pressure ulcers, or presence of ostomy tubes and/or bags draining body fluids
 - Presence of generalized rash
- Prioritize placement of patients in an exam room if they have stool incontinence, draining wounds and/or skin lesions that cannot be covered, or uncontrolled secretions
- Perform hand hygiene before touching patient and prior to wearing gloves
- PPE use:
 - Wear gloves when touching the patient and the patient's immediate environment or belongings
 - Wear a gown if substantial contact with the patient or their environment is anticipated
- Perform hand hygiene after removal of PPE; *note*: use soap and water when hands are visibly soiled (e.g., blood, body fluids), or after caring for patients with known or suspected infectious diarrhea (e.g., *Clostridium difficile*, norovirus)
- Clean/disinfect equipment such as glucometer and BP cuff after each use.

C. Droplet Precautions

- Apply to patients known or suspected to be infected with a pathogen that can be transmitted by droplet route; these include, but are not limited to:
 - Respiratory viruses (e.g., influenza, parainfluenza virus, adenovirus, respiratory syncytial virus, human metapneumovirus)
 - Bordetella pertussis
 - For first 24 hours of therapy: *Neisseria meningitides*, group A streptococcus
- PPE use:
 - Wear a facemask, such as a procedure or surgical mask, for close contact with the patient; the facemask should be donned upon entering the patient room
 - If substantial spraying of respiratory fluids is anticipated, gloves and gown as well as goggles (or face shield in place of goggles) should be worn
- Perform hand hygiene before and after touching the patient and after contact with respiratory secretions and contaminated objects/materials; *note*: use soap and water when hands are visibly soiled (e.g., blood, body fluids)
- Instruct patient to wear a facemask when exiting the exam room, avoid coming into close contact with other patients, and practice respiratory hygiene and cough etiquette.

- Equipment such as glucometer that is entering the patients room should be covered with a plastic bag while in use and Clean/disinfect after each use.

D. Airborne Precautions

- Apply to patients known or suspected to be infected with a pathogen that can be transmitted by airborne route; these include, but are not limited to:
 - Tuberculosis
 - Measles
 - Chickenpox (until lesions are crusted over)
- Patient is placed in a special room with Hepa-filtration. The door to this room must be kept closed to maintain the appropriate air pressure in the patients' room.
- PPE use:
 - Wear a fit-tested N-95 or higher level disposable respirator, if available, when caring for the patient; the respirator should be donned prior to room entry and removed after exiting room.
 - **Do not enter the patients room unless you have been fit tested for a N95 respirator**
 - If substantial spraying of respiratory fluids is anticipated, gloves and gown as well as goggles or face shield should be worn
- Perform hand hygiene before and after touching the patient and after contact with respiratory secretions and/or body fluids and contaminated objects/materials; *note:* use soap and water when hands are visibly soiled (e.g., blood, body fluids)
- Instruct patient to wear a facemask when exiting the exam room, avoid coming into close contact with other patients , and practice respiratory hygiene and cough etiquette
- Equipment such as glucometer that is entering the patients room should be covered with a plastic bag while in use and Clean/disinfect after each use.

Immunizations

To protect you, your loved ones, other clinical staff, and our patients and families from the influenza virus, **we require all clinical personnel to obtain an influenza vaccination during 'flu season'**. TVH is required to submit information to the Centers for Medicare and Medicaid Services regarding this immunization for all persons caring for patients in any capacity. We will require documentation of vaccination status for all students and instructors at the hospital during flu season.

Communicable Diseases

Do not come to work, if you are experiencing any of the following:

- | | |
|--------------------------|----------------|
| ➤ Sore throat with fever | Conjunctivitis |
| ➤ Skin rash | Chicken pox |
| ➤ Shingles | Nausea |
| ➤ Vomiting | Diarrhea |

Fire Safety

Introduction

Everyone working in a health care facility is responsible for fire safety by recognizing and reporting fire hazards and by knowing and practicing what to do in case of fire.

To promote fire safety

1. Keep all exit doors closed.
2. Keep stairways and corridors clear.
3. Use all electrical equipment safely.
4. Know the location of the nearest fire alarm pull boxes and fire extinguishers on your unit.
5. Keep all combustibles such as paper products, linen and clothing away from heat producing devices such as reading lamps.

If you see smoke, fire, the RED PILLOW (which indicates a fire drill in the hospital), or hear the alarm, initiate the RACE procedure:

- R** Rescue – Remove patients, visitors or other personnel from fire area.
- A** Alarm – Call 111-2233 giving exact location and extent of fire or activate nearest pull box. If you are at an off-site location, dial 9-911.
- C** Confine –Close all doors and windows.
- E** Extinguish or evacuate.

In the event of a fire or drill

- At the Hospital: Remain where you are; do not walk through closed fire doors;
- Off-site Locations: evacuate the building and stand with whom you are working.
- Wait for instructions or until an “all clear” has been announced before proceeding.
- Remain calm and move in an orderly manner.
- Do not use elevators.

Fire Extinguishers

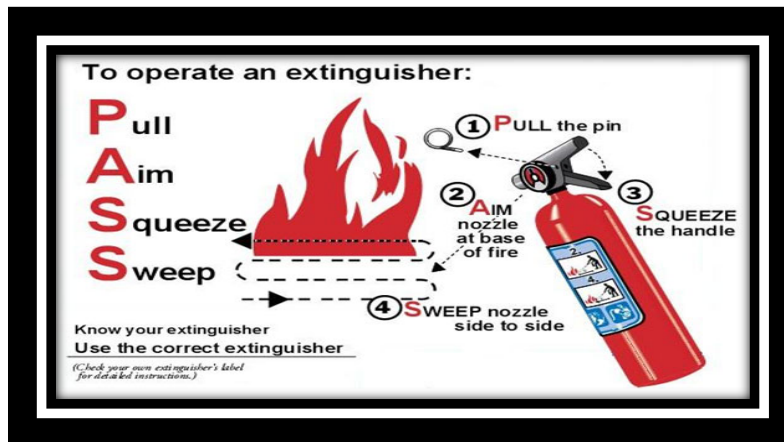
A fire extinguisher is a storage container for extinguishing agents such as water or chemicals. It is designed to put out a small fire, not a large one. VHS has universal extinguishers, which can be used on fires from wood/cloth/trash, flammable liquids, electrical or chemical sources. Use good judgment and caution in extinguishing fire until the Fire Department arrives.

How to Use a Fire Extinguisher

The **PASS** acronym is an easy way to remember these steps:

- P** Pull – Pull the pin (plastic or metal seal will break).
- A** Aim – Aim the extinguisher nozzle at the base of the fire.
- S** Squeeze – Squeeze the operating lever and handle together

S Sweep – Sweep the nozzle from side to side at the base of fire until it goes out.



Hazardous Materials

Right to Know

Performing your duties in a health care facility can expose you to potentially hazardous substances. OSHA (Occupational Safety and Health Administration) has outlined safety guidelines for handling these substances. The State of New Jersey has a well-defined system for reporting on and distributing information regarding the use of hazardous substances in the workplace. The system is defined under the "Right to Know Act." This act states that you have a right to know about potentially hazardous substances in the workplace and their side effects.

Information is available to all personnel regarding hazardous substances through:

1. Right to Know Manual
2. SDS Sheets (Safety Data Sheets)
3. Container Labels
4. Education and Training

For a complete listing of hazardous substances used within the institution, you may access the Safety Department web page on our intranet to access the SDS needed. Be sure to use personal protective equipment when working with potentially hazardous materials. They are located on every unit.

There are also hazardous drugs administered by students/instructors and nurses. Precautions must be adhered to when handling hazardous drugs. Gloves must be worn when removing pills from packaging. Other personal protective equipment (PPE) should be used if administering hazardous drugs in liquid form. PPE includes gowns, gloves, goggles, and duck bill masks.

MRI Safety for Hospital Personnel

Magnetic Resonance Imaging (MRI) technology utilizes a powerful magnet field to produce images that aid diagnosis. The magnet is always on. No ferromagnetic objects can be taken into the MRI unit.

Items include:

- Defibrillators
- Stents
- Hearing aids
- Oxygen tanks
- IV pumps
- Wheelchairs
- Stretchers
- Personal items: keys, hairpins, credit cards, id tags, etc.

Therefore **NO ONE** can enter the MRI room without being screened by the MRI staff.

It is your responsibility to be informed, to be aware of potential hazards, to know the proper use of substances, to practice safety, to ask questions, and to use personal protective equipment as necessary.

AM Care/Linen Changes

Please also note our Linen Change policy. To conserve on linen and costs, we change linens every “even” day. We inform patients about our policy upon admission. If they prefer daily linen changes, or if soiled, linen is changed daily or as frequently as needed.

THE VALLEY HOSPITAL

Ridgewood, New Jersey

PATIENT CARE SERVICES (PCS) POLICY AND PROCEDURE

SUBJECT: In Patient Bed Change Policy

POLICY: To effectively and efficiently manage linen resources, while maintaining quality patient care and comfort.

PROCEDURE:

A total linen change will consist of the following items:

- 1 Fitted sheet
- 1 Flat sheet
- 1 Pillowcase – to be changed daily.
- 1 Thermal blanket - to provide increased warmth for the patient, a flat sheet should be placed on top of the thermal blanket to create needed insulation and extra warmth instead of using extra thermal blankets.

If needed:



1 Draw sheet

1 Reusable under pad

Reusable under pads are intended for use for incontinent patients or for containment of bodily fluids.

Note: Pillowcase and patient gown should be changed daily. The rest of the bed linens are to be changed as frequently as necessary.

2. Additional linen for patient use will include the following:

1 Wash Cloth

1 Towel or bath blanket

1 Patient gown – to be changed daily.

3. Upon admission, ask patient/family/SO if they prefer daily total linen change, otherwise total linen change will be completed every “even” day.

Bed Linen Change Scripting for Employees:

“As part of Valley Hospital’s ongoing commitment to improving the environment by using less energy and creating less waste, we offer a solution: During your stay, we will change bed linens every other “even” day, while still refreshing your room daily. If you do not wish to participate in this program, please notify your nurse and your linens will be replaced daily”.

4. Upon patient transfer to another room/unit all blankets are to remain with patient

5. All unusable torn and stained clean linen, as well as linen with small holes are not to be used and to be placed in the soiled linen hamper. No linen should be thrown away.

6. Clean linen is not to be stored in bed stands or closets in patient’s rooms.

7. Clean linen should not be taken into the rooms of patients who are anticipating discharge.

8. Linen is not for employee personal use.

MANDATORY INSULIN EDUCATION—Read Information and answer quiz at end of packet.

**FOR NURSING STUDENTS/NURSING INSTRUCTORS
AT THE VALLEY HOSPITAL**

Insulin Safety

S: Insulin safety

B: Insulin known to be high risk medication.

A: 5 “RIGHTS” of medication administration
MUST be followed

R: All student nurses will complete post-test after reading this material. Clinical instructor must supervise your insulin administration.

Types of Insulin at TVH

- HUMALOG(Insulin lispro) Rapid Acting
 - Inject within 15 minutes before meals or immediately after meals
- Humulin R (Regular Insulin) Short Acting
 - Inject within 30- 60 minutes before meals
- Humulin N(NPH Insulin) Intermediate
 - Administer as per health care provider order
- Levemir (Insulin detemir) Long acting
 - Administer once or twice daily
- Lantus (Insulin glargine) Long acting
 - Administer once or twice daily

Types of Insulin at TVH (cont.)

- Novolin Mix 70/30
 - 70% NPH and 30% Regular
- Novolog Mix 70/30
 - 70% NPH and 30% Novolog

Joint commission states “Insulin will not be borrowed or shared”---- EACH patient will receive his OWN vial of insulin from pharmacy

- Write date on label when opened
- Keep vial in marked insulin bin in med. room when not being used
- Discard in sharps container upon pt. discharge
- Do NOT share vials
- May return to pharmacy if unopened upon discharge

AT TVH, ONLY Safety Glide Insulin Syringes are used

- Insulin syringes are always 100 unit per ml
- Can come in three sizes – 30,50, 100 unit/ml
- All insulin doses to be administered via subcutaneous rout at 90 degree angle
- Under unique circumstance, regular insulin can be given IV

Other Forms of Insulin Delivery

- While insulin pens are popular for home use they are NOT to be used at TVH for adults. If patient brings their own pen and insists on using, it must be sent to pharmacy for identification and only patient self-administers as per PMD order.
- ONLY pediatric inpatients may use insulin pens with supervision for education purposes

When to request a Diabetes Education Consult???

- New diagnosis
- DKA/Hypoglycemia/Hyperglycemia
- A1c > 9%
- New to insulin
- Need for glucometer and instruction
- Pt/ Family request
- Ask primary RN to submit diabetes education consult/dietary consult if nurse assessment identifies need of education.

ACCU-CHEK Inform System

- Pre-meal Accu-check glucose readings should be taken NO More than 30 minutes prior to meal and insulin administration
- Download glucometer immediately after glucose obtained
- NOTE: If meter is NOT returned to base for download within 1 hour, meter will not allow operator to use. Meter MUST be returned to base

Critical Results identified by glucometer

- Above 400
- Under 50

These results are reportable and require a venous blood draw to confirm. Treat any glucose reading of 70 mg/dl as hypoglycemia whether patient is symptomatic or not.

Inpatient Blood Glucose Targets/ADA

For critically ill patient in ICU

- Maintain glucose level between 140mg/dl and 180 mg/dl
- Lower glucose targets may be appropriate in selected patients BUT targets below 110mg/dl not recommended
- Use continuous insulin infusion to maintain this control
- For NON critically ill medical surgical patients
- Pre-meal glucose target should generally be less than 140 mg/dl
- Random level less than 180 mg/dl

Hypoglycemia

- As per the ADA
 - Any glucose less than 70 mg/ dl, with or without symptoms MUST be treated with 15 grams carbohydrate (ex:4 ounces fruit juice-apple juice if renal patient)
 - Recheck accu-check again in 15 minutes. If glucose remains low, retreat and check again in 15 minutes ETC..... “Rule of 15”
 - IF PATIENT UNRESPONSIVE, CONTACT Rapid Response Team, Beeper # 50-0776

Insulin Pump

- If patient is admitted with own Insulin Pump
- Refer to Patient Care Services(PCS) Policy #44.61

- a. I must respect every patient's privacy. I'm sorry I cannot do that.
 - b. I'll try to find out where he is and tell him you said hello.
 - c. I'll ask his nurse how he is doing and if he can have visitors.
9. We inform patients of their right to make advance directives for their health care.
 True False
10. The most effective way to prevent infections is to:
 a. See the doctor once a year
 b. Take vitamins
 c. Wash your hands
11. In the event of a fire, in what order would you do the following? [Number 1 to 4]
 _____ Extinguish the fire or evacuate
 _____ Activate the nearest fire alarm
 _____ Rescue people in immediate danger
 _____ Confine the fire – close all doors and windows
12. The "PASS" acronym [Pull, Aim, Squeeze, Sweep] is an easy way to remember how to use a fire extinguish.
 True False
13. Police and fire personnel may enter the MRI room at any time during an emergency.
 True False
14. The "Right to Know Act" states that I have a right to know about potentially hazardous substances in the workplace.
 True False

THE VALLEY HOSPITAL

MANDATORY INSULIN SAFETY EDUCATION FOR NURSING STUDENTS--POST-TEST

****Please use answer sheet – do not write on this test! ****

1. Prior to administering insulin, every student nurse MUST have dose, time and type of insulin to be given double checked by:
- a. Clinical instructor
 - b. Primary nurse IF clinical instructor NOT available
 - c. a and b

- d. Double check not needed at all. May carefully draw up and administer without supervision if clinical instructor gives permission
2. Your patient is to receive Humalog (insulin lispro) pre meal for accu-chek coverage. WHICH ONE OF THE FOLLOWING RESPONSES IS TRUE? You know that:
 - a. Accu-chek glucose pre meal readings should be taken NO MORE than 60 minutes prior to meal and insulin administration
 - b. Humalog insulin coverage should NOT be administered until meal tray is in front of patient
 - c. From unit to unit, meals will always be served at the same time each day in the hospital
3. Critical Results identified by glucometer require venous blood draw to confirm. They are :
 - a. Glucose above 250 and under 70
 - b. Glucose above 350 and under 60
 - c. Glucose above 400 and under 50
 - d. Glucose above 200 and under 45
4. You check a routine accu-chek for your patient who is an insulin dependent, Type 1 diabetic . He tells you he is feeling good. His accu-chek reading is 60 mg/dl. You know that according to standard diabetes guidelines any glucose reading under 70 mg/dl is considered to be hypoglycemia. What is your next action?
 - a. Because he is asymptomatic , do not take any action
 - b. Treat this glucose as hypoglycemia and administer 30 grams of carbohydrate (ex: 8 oz. orange juice)
 - c. Treat this glucose as hypoglycemia and administer 15 grams of carbohydrate (4 oz. orange juice). Recheck accu-chek within 15 minutes and if glucose remains below 70 mg/dl, retreat with 15 grams Carbohydrate etc.....(“ Rule of 15’s “)
 - d. None of the above
5. Random Glucose target goal for the hospitalized patient with diabetes is to maintain glucose below 180 mg/dl a. True b. False
6. Please review following statements about insulin administration. Which is NOT true??
 - a. Insulin syringes at The Valley Hospital are ALWAYS 100 units per ml
 - b. Insulin syringes can come in 3 sizes – 30 unit, 50 unit and 100unit. If very small doses, using a smaller syringe gives better visibility for accurate dosing

- c. All insulin is to be administered via subcutaneous route at 45 degree angle
 - d. If appropriate and needed, regular insulin can be given IV as bolus or administered as continuous IV infusion (250 units insulin in 250 ml 0.9% Sodium Chloride) on medical surgical unit. B.2A, and critical care units have different protocol for IV insulin infusions.
7. Lantus (insulin glargine) will be administered to your diabetes patient once or sometimes twice daily. If once per day, usual time of administration is at bed time. All except ONE of the following statements about Lantus is true. Please identify the INCORRECT comment.
- a. Level of insulin will rise within one hour and remain steady until time for next dose.
 - b. If patient is to receive a 2100 accu-chek coverage dose of insulin lispro, in addition to his lantus, you may mix both together and save your patient an extra injection
 - c. Each patient will receive his own labeled vial of each insulin ordered from pharmacy for his use only throughout this admission
 - d. Upon discharge, your patient's vial(s) of insulin are to be discarded in the Sharp's container – no matter how much insulin is remaining. If was never opened, it may be returned to pharmacy.
8. Your patient is a Type 2 diabetes patient who seems to lack understanding of diabetes dietary guidelines and general self -management skills. What resources are available for you to access and which response is most appropriate?
- a. Initiate nursing consult request for Diabetes Dietary Instruction
 - b. Initiate diabetes education consult for diabetes educator to assess for other diabetes education needs
 - c. Refer patient to Telehealth Patient Education Video system and videos appropriate for his diabetes self -care needs. Ask RN or Diabetes Educator if unable to access.
 - d. All of the above.
9. If your adult patient has his own Insulin Pump, what is your responsibility?
(Refer to PCS Policy #44.61)
- a. Remind patient that he must provide all his own pump supplies and change site every 3 days
 - b. Observe that patient is completing daily flow sheet at bedside
 - c. Assess for patients ability to safely manage his own pump
 - d. All of the above
10. If your adult patient is unable to safely manage his Insulin Pump, you MUST do all except which of the following.

- a. Contact Diabetes Educator on In-house Beeper #50 – 0664
- b. Request RN to contact physician about removing pump and obtain subcutaneous insulin orders
- c. Call family and ask if anyone is willing to come in and assume responsibility for pump
- d. Document carefully, change in mental status or deterioration of physical condition that would make it unsafe for patient to manage pump independently.

The Valley Hospital
Self-Learning Orientation Module Post Test
Answer Sheet

1 = 97%
2 = 94%
3 = 91%
4 = 89%
5 = 86%
6 = 83%
Passing = 80%

NAME: _____

DATE: _____

1. TRUE ____ FALSE ____

2. TRUE ____ FALSE ____

3. TRUE ____ FALSE ____

4. TRUE ____ FALSE ____

5. TRUE ____ FALSE ____

6. Answer _____

7. Answer _____

8. Answer _____

9. TRUE ____ FALSE ____

10. Answer _____

11. Numbered order: ____ ____ ____ ____

12. TRUE ____ FALSE ____

13. TRUE ____ FALSE ____

14. TRUE ____ FALSE ____

Passing score= 80%

INFECTION CONTROL POST TEST

Circle the correct answers. Hand in to your instructor.

Name: _____

Date: _____

1. Hand washing/hand hygiene is the single most important way to prevent the spread of infections.

True False

2. In order for hand washing to be effective, I must scrub my hands for a minimum of 1 minute.

True False

3. I have a deadline for completing a special project today. In the interest of saving time, it's okay to skip handwashing after taking off a pair of gloves.

True False

4. I have a sore throat and a fever, but I think I can make it through the day so I come to clinical.

True False

5. If I enter a patient on contact isolation, I must stop at the door and put on a gown and gloves at minimum.

True False

**STATEMENT OF UNDERSTANDING AND COMPLIANCE WITH THE
VALLEY HOSPITAL'S CODE OF ETHICS**

NAME: _____

TITLE: _____

SCHOOL: _____

As a student at The Valley Hospital, I certify that I have been educated in the Corporate Compliance Program and the Corporate Code of Ethics and agree to abide by them during the terms of my engagement.

I acknowledge that I have a duty to report any alleged or suspected violation of the Code of Ethics or the Corporate Compliance Program

Today's Date: _____

Signature: _____

Print Name: _____

AGREEMENT OF CONFIDENTIALITY-STUDENT & INSTRUCTOR

The Valley Hospital ("Hospital") has a legal and ethical responsibility to safeguard the privacy of all patients and protect the confidentiality of their health information. In the course of my participation in the ("College")("Program") at the Hospital, I may come into the possession of confidential patient and other information.

I understand that such information must be maintained in the strictest confidence both while I am a student and after my participation in the Program is terminated or concluded. As a condition of my participation in the Program and assignment to the Hospital, I hereby agree that I will not at any time during or after my assignment(s) with the Hospital disclose any patient or other confidential information whatsoever.

When patient or other confidential information must be discussed with any health care practitioners or Faculty in the course of my work, I will use discretion to assure that such conversations cannot be overheard by others who are not involved in the patient's care.

I understand the user ID/password assigned for access to any Hospital computer system is unique to me and for my use only and in connection with authorized functions related to the Program. This code identifies me in the computer system. I am accountable for system access and entries performed with my personal security code. If issued a password, I agree not to release it to anyone else. I will not post, share or otherwise distribute my password. I will contact the Information Systems Department immediately if I have reason to believe the confidentiality of my password has been broken. I will be required to create a new password.

By signing below, I acknowledge that I have read the above and accept the responsibility associated with these statements. I understand that violation of this Agreement may be cause for immediate termination of my assignment with the Hospital.

Student/faculty Name _____

Student/faculty Signature _____ **Date** _____

**THE VALLEY HOSPITAL
CORPORATION COMPLIANCE CERTIFICATION**

_____ certifies that he/she has read and understands the Code of Ethics and Corporate Compliance Program in force at The Valley Hospital and agrees to abide by it during the entire term of his/her relationship with The Valley Hospital.

_____ understands his/her obligation to fully comply with all federal and state laws and regulations that apply to the services being rendered by him/her.

_____ understands that he/she has a duty to report any alleged or suspected violations of the Code of Ethics, the Corporate Compliance Program or federal and state laws and regulations to a Corporate Compliance Officer at The Valley Hospital.

Completed By: _____

Date: _____

**The Valley Hospital
Infection Control Department
Products for Sharps Safety**

Pursuant to: NJ State Bill #3546



ReadyLance
Safety Lancets



BD SafetyGlide
Shielding Injection Needle



Covidien Syringe & Needleless Med
Prep Cannula Combination



MediHeel™
Heel Stick

Make an X in the boxes under the picture if you have received instruction on use and feel competent to use the safety device.

Print Name _____ Signature _____ Date _____

The Valley Hospital
Ridgewood, NJ

INSULIN SAFETY EDUCATION FOR NURSING STUDENTS/NURSING INSTRUCTORS

NAME: _____

SCHOOL NAME: _____

DATE: _____

Place your answer on the line that corresponds to the number on your test.
Hand this into your clinical instructor. Passing grade=100%.

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____