St. Elizabeth HEALTHCARE

# VOLUNTEER ANNUAL TRAINING

Levels 1 & 2

# MISSION

As a Catholic healthcare ministry, we provide comprehensive and compassionate care that improves the health of the people we serve.

# VISION

St. Elizabeth will lead the communities we serve to be among the healthiest in the nation.

# VALUES

I C A R E

**INNOVATION**
I seek better ways to perform my work, find creative solutions, and embrace change.

**COLLABORATION**
I understand that mutual respect and teamwork are critical to accomplishing goals. I work with others to achieve the best individual and collective outcomes.

**ACCOUNTABILITY**
I use resources efficiently, respond to others promptly, face challenges in a timely manner, and accept responsibility for my actions and decisions.

**RESPECT**
I respect the dignity and diversity of our associates, physicians, patients and community members.
I promote trust, fairness and inclusiveness through honest and open communication.

**EXCELLENCE**
I believe in serving others by pursuing excellence in healthcare.
I compassionately care for the mind, body and spirit of each patient.

# 2023-2025 STRATEGIC PLAN


# REQUIRED REVIEW

St. Elizabeth HEALTHCARE
Volunteer Services

# THANK YOU!

***For continuing to choose to volunteer in healthcare!***

- **More laws, rules and regulations than most any other industry**
- **More than ever, to be applauded for accepting the challenge!**

# THE JOINT COMMISSION

- TJC stands for The Joint Commission
- St. Elizabeth is accredited by TJC
- TJC holds volunteers to the same standards as paid staff
- TJC is the reason annual training is required
- This is a review of policies and procedures with which we are all familiar

# HIPAA PRIVACY & SECURITY

St. Elizabeth HEALTHCARE
Volunteer Services

# PURPOSE OF HIPAA

**"HIPAA" stands for the Health Insurance Portability and Accountability Act.**

- **Its purpose - to establish nationwide protection of patient confidentiality, security of electronic systems, standards and requirements for electronic transmission of health information.**
- **The two parts of HIPAA are:**
  1. **Privacy**
  2. **Security**
- **Healthcare providers are required to train their associates and volunteers on these regulations.**

# WHAT IS PROTECTED HEALTH INFORMATION (PHI)?

**Protected Health Information (PHI) is any health information that may identify the patient, such as:**

- Name
- Address
- Date of Birth
- Telephone Number
- Fax Number
- E-mail addresses
- Social Security Number
- Medical Record Number
- Health Plan Beneficiary Number
- Account Number
- Genetic Information
- Diagnosis
- Finger or voice prints
- Facial Photographs
- Age greater than 89
- Any other unique identifying number, characteristic, or code

**HIPAA protects PHI in any form, whether verbal, electronic, paper, or computer storage.**

# PATIENT RIGHTS

**HIPAA requires SEH to provide patients access to our Notice of Privacy Practices.**

**This Notice:**

- **Tells patients what SEH is doing to protect their PHI**
- **Tells patients we will use their PHI for payment, treatment, and healthcare operations**
- **Information patients about their privacy rights**
- **Explains to patients how they can exercise their privacy rights**
- **Provides the title and phone number of a contact person if the patient wants more information or wishes to file a complaint**

# PATIENT RIGHTS

**HIPAA requires SEH to provide patients access to our Notice of Privacy Practices.**

**The Notice is presented/offered to each patient as registered.**

**It informs patients of their right to:**

- **Obtain access to their PHI**
- **Request additional privacy protections and confidential communication**
- **Request an amendment to their PHI**
- **Receive an accounting of the uses and disclosures of their PHI**
- **Be notified if there is a Breach of their Unsecured PHI**

# USES AND DISCLOSURES OF PHI

**Use: When we review or use PHI internally (treatment, audits, training, customer service, quality improvement).**

**Disclosure: When we release or provide PHI to someone (e.g., Public Health Authorities, an attorney, a patient, faxing records to another provider, etc.).**

**St. Elizabeth is permitted to use and disclose PHI, without obtaining authorization from the patient, for payment, treatment, and healthcare operations.**

# KEEP IT CONFIDENTIAL

- We are required to treat everyone and everything we “see” while at St. Elizabeth as confidential.
- Patients are NOT just those in a patient room.
- HIPAA rules apply in all situations – inpatient, outpatient, in waiting areas, on elevators and in lobbies

# KEEP IT CONFIDENTIAL - REASONABLE SAFEGUARDS

**HIPAA requires us to use "reasonable safeguards" to protect our patients' PHI.**

**Reasonable Safeguards include:**

- **Do not discuss a patient with another associate or volunteer unless you are both involved in that patient's care.**
- **When you do discuss patients, do so in a private place, when possible. If you do need to speak in a public area, keep your voice down.**
- **Do not view the medical records of anyone who is not your assigned patient.**
- **Do not leave computer screens unattended or aimed in a direction where patients or visitors can view them.**
- **Avoid leaving papers containing PHI on desks or other surfaces in plain view of others.**
- **Keep records and papers in file cabinets or drawers when not in immediate use**
- **Place paper/printed materials in shredding containers when they are no longer needed (never use trash cans)**

# KEEP IT CONFIDENTIAL

## What You Can Do:

- Cover or turn papers over so that persons nearby cannot read patient names or other information.
- Be aware of those around you – do not talk with others about patients.
- Place all notes or papers that include any PHI in a HIPAA bin or shedder before leaving.
- Do not let others look at your computer screen.
- LOG OFF whenever you leave your computer unattended.

# DISPOSE OF PHI

## Use Shredding Containers – NEVER Throw PHI in a Garbage Can

**Do NOT discuss anything with anyone that you have observed while volunteering that involves a patient outside of St. Elizabeth.**

**Sharing with friends a situation with a patient that you saw when volunteering – even if you do not use any names.**
**Mentioning to your parents/spouse friend/priest that you saw someone in the hospital – that is a breach of confidentiality and a HIPAA violation.**

St. Elizabeth HEALTHCARE

# Privacy Policies – Access of PHI

Associates/Volunteers may NOT use the St. Elizabeth Healthcare computer system (EPIC) to access medical or financial records of themselves, their children, their spouse, their neighbors, their co-workers or anyone else, without a business-based reason to do so.

St. Elizabeth Healthcare takes violations of this policy very seriously. If it is determined that an associate/volunteer has accessed PHI without a business-based reason to do so, discipline will be issued.

St. Elizabeth HEALTHCARE

# EPHI ACCESS AUDITING

***All* St. Elizabeth Healthcare computer systems are subject to a regular audit review.**

**The audit review may include:**

- **EPHI that you have accessed.**
- **Internet sites that you accessed.**

# SOCIAL ENGINEERING

**A term used for tricking someone into giving out information like passwords that will compromise system security.**

***Note: Don't be afraid to ask questions as to why someone is accessing a PC if they look out of place***

**Notify your supervisor, Security, or IS to report any suspicious activity.**

**Here are some tricks used by social engineers:**

- **An unknown person (with or without a health system badge) asks for your ID code and password**
- **Someone without an ID badge is using (or attempting) to us a PC without approval**
- **Someone asks for your ID Code and password by phone**

# EMAIL PHISHING

- Internet fraudsters that impersonate a business to trick you into giving out your personal information
- Do NOT reply to email, text or pop-up messages asking for your personal or financial information.
- Legitimate business do not ask you to send sensitive information through insecure channels
- Do not click on links within emails – even if the message seems to be from an organization you trust.  It isn't.
- If you suspect a phishing email at St. Elizabeth, call the IS Help Desk at 12541

# HIPAA PENALTIES FOR NON-COMPLIANCE

## Associate/Volunteer Discipline:

**Violations by St. Elizabeth associates may result in disciplinary action, up to and including termination from employment or volunteering with St. Elizabeth Healthcare. You are personally responsible for the access of any information using your login.**

## Severe civil and criminal penalties:

**In addition, you can be subject to civil and criminal penalties imposed by the federal government including fines and prison.**

# REPORTING CONCERNS

St. Elizabeth HEALTHCARE
Volunteer Services

# CORPORATE COMPLIANCE PROGRAM

**The Corporate Compliance Program requires each of us to know what is expected of us. We all should:**

- **Be aware of and obey all laws and regulations;**
- **Ask questions when we are unsure of what the right action or decision might be;**
- **Speak up when we discover something that doesn't seem quite right; and**
- **Support others' efforts to do the same.**

# COMMITTED TO BEING ETHICAL

**You should report anything that seems unethical including:**

- **Violations of patient, organization or associate confidentiality; HIPAA breaches**
- **Any kind of discrimination or harassment.**
- **Dishonest communications, including lying and obtaining goods and services under false pretenses.**
- **Theft or misuse of our organization's supplies, equipment, money, or labor for personal use.**

# HOW TO REPORT CONCERNS

1. Contact the supervisor in the area where you volunteer. If the supervisor is unable to solve the problem, contact their supervisor or the Volunteer Services staff.

2. If you would rather not report the issue to a supervisor, call Sarah Huelsman, Director of HIPAA Privacy Officer, at (859) 301-6266.

3. You may want to report a situation without revealing your identity. For those concerns call the toll free Compliance Line at 1-877-815-2414.

# THE COMPLIANCE LINE

- The Compliance Line is a toll-free 24-hour hotline.
- The number is 1-877-815-2414 (listed in phone directory).
- Operators from an outside company make a complete report of your issue and send it to our Corporate Compliance Officer to resolve.
- All calls are confidential.  You do not need to give your name if you would prefer not to.
- Our Compliance Line does not use Caller ID and does not try to trace calls.

# NO RETALIATION POLICY

- SEH forbids retaliation against anyone who reports a concern in good faith.
- Making a good faith report will not put your volunteer position at risk. We protect every volunteer (and associate) who reports a concern in good faith.
- Anyone who retaliates in any way is subject to immediate discipline – up to and including termination.
- Report retaliation concerns immediately to your supervisor or the Corporate Compliance/HIPAA Privacy Officer – Lisa Frey at (859) 301-5580.

# SUMMARY

## COMPLIANCE

Compliance is everyone's responsibility

## PREVENT

Adhere to all laws and ethical expectations to prevent non-compliance

## DETECT & REPORT

If you detect potential non-compliance, report it

## CORRECT

Correct all non-compliance to protect patients and all involved

# HEALTH & SAFETY

St. Elizabeth HEALTHCARE
Volunteer Services

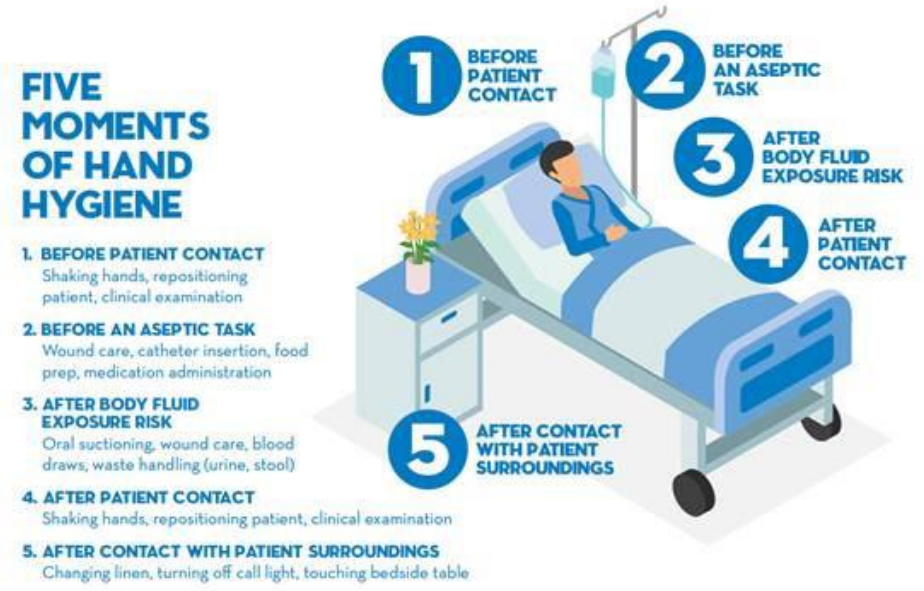
# HAND HYGIENE

- One of the most important factors in preventing the spread of infection and is the most protective practice one can use - period.

- Remember to provide patients with opportunities to perform hand hygiene, like before eating.

# HAND HYGIENE

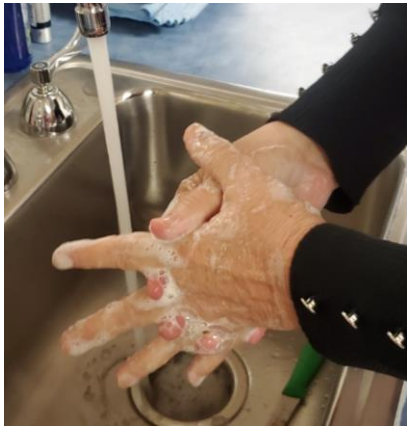
- Hand hygiene **MUST** be performed **EVERY** time you **enter** and **exit** a patient room.
- In addition to any of the other 5 hand hygiene moments.



# HAND HYGIENE

- **Hand hygiene should be performed, no matter what your volunteer position, several times during your shift.**
- **Hand hygiene can be performed using soap and water or waterless alcohol antiseptic gel or foam.**





# HAND HYGIENE

## ALWAYS use Soap and Water

- After using the restroom
- Before eating
- When hands are visibly dirty or contaminated with body substances or food

## Washing with Soap and Water

- Wet hands first then apply soap
- Rub hands together , covering all surfaces, focusing on fingertips and fingernails
- Rinse under running water and dry with disposable towel; use towel to turn off faucet; dispose of towel

# HAND HYGIENE OPTIONS

## Waterless Alcohol Antiseptic – when hands are not soiled

- Apply adequate amount of facility provided alcohol hand rub to palm of one hand
- Rub hands together, covering all surfaces, focusing on the fingertips and fingernails, until dry.
  - *This takes about 15 seconds*
- Should not be used on hands soiled with organic material (such as grease, blood, body fluids, food residue) because it is not effective.
- Alcohol antiseptic is available in every patient room and department and in many public areas.

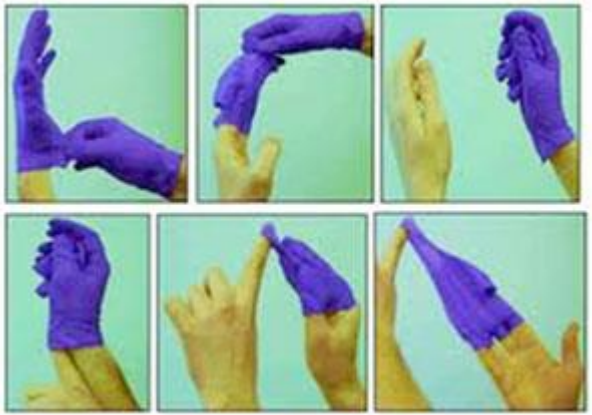
# COUGH ETIQUETTE

## To control the spread of respiratory infections:

1. Cough into your elbow or sleeve
2. Cough into a tissue
3. Turn your head away from others
4. Throw tissues in trash
5. Wash your hands

# GLOVES

- The use of gloves does not replace the need for hand hygiene
- Do not touch door handles or other surfaces with contaminated/ soiled gloves
- Do not walk in the halls with gloves
- Remove gloves after each task and perform hand hygiene; gloves may carry germs

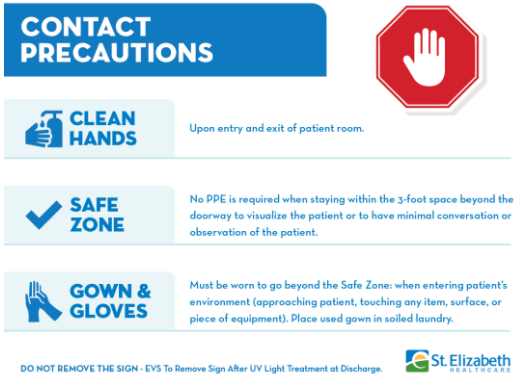


# REMINDERS

- Report water leaks, water stains, damaged caulking, and mold growth
- Do not eat or drink in a patient care area
- Use gloves when using disinfectant wipes to disinfect wheelchairs, phones, keyboards or other surfaces – surface should remain wet for 2 minutes or the time on the label
- Disinfect your work area when arriving
- Purple lidded PDI Super Sani Cloth is to be used for routine disinfection of equipment

# ISOLATION

## If you see one of these signs…






## … DO NOT ENTER!

**There are specific exceptions. Department training must occur.**

# SEASONAL INFLUENZA

- **Highly contagious viral illness spread by coughing, sneezing, or contact with infected nasal secretions or contaminated surfaces.**

***An annual Influenza Immunization (a flu shot) is REQUIRED for all SEH Volunteers, Associates and Physicians. Notice provided in September.***

# PROTECTING OUR PATIENTS FROM FALLS

## IS EVERYONE'S RESPONSIBILITY

**Why is preventing falls so important?**

- **Falls are among the most common hospital adverse events reported**
- **Danger of fall resulting in death increases with age**
  - **Traumatic brain injury and hip fractures were among the *causes of death***

**Definition of a patient fall:**

**An unplanned, unassisted descent to the floor or extension of the floor, e.g., trash can or other equipment, with or without injury to the patient.**

# PROTECTING OUR PATIENTS FROM FALLS

**Three key steps:**

1. **Be aware of environmental causes**
2. **Notice when a patient is at risk**
3. **TAKE ACTION to prevent the fall**

# BE ALERT TO ENVIRONMENTAL CAUSES

- Bed alarm not turned on/wrong sensitivity used
- Chair alarm not plugged in properly
- Wheels on beds/chairs not locked
- Bed in high position
- Cords/wires in the way
- Trash on the floor
- Bed sheets/gowns on the floor

**Take Action if you see a fall hazard!**

- Immediately wipe up small spills
- Contact EVS for larger spills
- Move phone, nurse call light, etc. within reach
- Empty overflowing trash
- Let someone know about other hazards

# BE ALERT TO PATIENTS AT RISK OF FALLING

**Watch for a yellow arm band and Fall Risk Magnet on Door**

- **The patient will have a yellow arm band**
  - **If they are admitted as a result of a fall**
  - **Have fallen while a patient**
  - **If they are considered a high fall risk**

**Watch for patients who are:**

- **Unsteady when walking**
- **Attempting to get out of bed by themselves**
- **Appear confused**
- **Struggling to reach personal items**

**Everyone should be on alert for patients at risk.**

# TAKE ACTION!

If you see a patient having difficulty getting out of bed or walking, say…

"Please sit down and I will get a nurse or an aide to help you."

Then use the call light. Please stay with the patient until the nurse or aide come

Keeping patients and visitors safe takes all our eyes and ears and effort

# WHAT IS A STROKE?

Occurs when blood vessels to the brain become blocked or rupture

A stroke occurs every 40 seconds

Stroke is the fifth leading cause of death and the #1 leading cause of functional impairment

About 80% of strokes are preventable

Strokes can happen to anyone at anytime – is a myth that only occur to older adults

Around 1/3 of people who have a TIA (Transient Ischemic Attack) have a more severe stroke within one year

# SIGNS OF STROKE

## BE FAST

**B** alance - Watch for sudden loss of balance.

**E** ye – Watch for sudden vision loss.

**F** ace – Look for uneven smile.

**A** rm – Check if one arm is weak.

**S** peech – Listen for slurred speech.

**T** ime – Call 911 at the first sign

# STROKE IS A MEDICAL EMERGENCY

**St. Elizabeth Edgewood, Florence and Ft. Thomas are certified by The Joint Commission as Primary Stroke Centers**

- **St. Elizabeth Covington and Grant are certified Acute Stroke Ready by The Joint Commission**
- **If you see warning signs of a stroke in someone at St. Elizabeth - call 22222**

***We provide the highest level of care for our stroke patients***

- **Don't Drive.**
- **Don't Delay.**
- **Call 911 Right Away.**

# HEART ATTACKS HAVE “BEGINNINGS”

- **“Beginnings” can occur days or weeks before a heart attack takes place and occur in over 50% of patients**
- **If recognized in time, these “beginnings” can be treated before the heart is damaged**
- **Damage to the heart can begin 2 hours prior to a heart attack**
- **85% of heart damage occurs within the first two hours of a heart attack**

***BEFORE HEART DAMAGE OCCURS, TAKE ACTION!!***

# RECOGNIZING SYMPTOMS

- Chest pressure, squeezing or fullness or discomfort
- Pain that travels down one or both arms
- Sudden heavy sweating
- Nausea
- Upper back pain
- Shortness of breath
- Jaw pain

***People may or may not experience any or all of these symptoms***

**Sudden dizziness or light headedness, unusual unexplained fatigue and/or anxiety; may be combined with one or more of these symptoms**

# RECOGNIZING SYMPTOMS IN WOMEN

- Nausea/Vomiting
- Jaw/Arm/Upper back pain
- Chest discomfort/pressure
- Shortness of breath
- Syncope
- Sudden dizziness
- Unexplained or extreme fatigue

**Women's symptoms may be more subtle than men's and may include some that are less common**

***People may or may not experience any or all of these symptoms***

# HEART ATTACK IS A MEDICAL EMERGENCY

**You are the first link – don’t wait.**

**St. Elizabeth Healthcare is a certified Chest Pain Center through the Society of Cardiovascular Care**

**If you notice one or more of the warning signs of a heart attack in someone at St. Elizabeth, call 2-2222 Off site call 911**

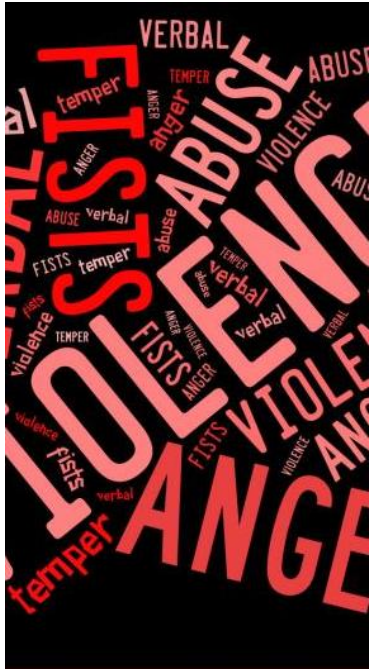
# SAFE ENVIRONMENT

St. Elizabeth HEALTHCARE
Volunteer Services

# WORKPLACE VIOLENCE

## Workplace violence is defined as any situations that may:

- Threaten the safety of a volunteer or associate
- Have an impact on any volunteer or associate's physical, emotional or psychological well-being
- Cause damage to hospital property



# WORKPLACE VIOLENCE

- Signs posted in elevators and other locations share St. Elizabeth's core value of respect
- Informs all that there is a zero tolerance for all forms of aggression
- Behavioral Assistance Response Team (BART) specially trained to respond and foster our culture of safety and compassionate caring for patients and their families when aggressive situations occur.

# ENVIRONMENTAL RISK FACTORS

- Accessible, open environment
- High stress circumstances
- Gaps in communication
- Prolonged waiting times
- Crowded, uncomfortable waiting rooms
- Full range of individuals and personalities
- Noise, rules, lack of privacy

# SIGNS OF ESCALATION

**Recognition of risk factors, potential triggers and warning signs are critical to your health and safety**

## Verbal Cues

- Speaking loudly or yelling
- Swearing
- Threatening tone of voice

## Non-verbal or Behavioral Cues

- Arms held tight across chest
- Clenched fists
- Heavy breathing
- Pacing or agitation
- A fixed stare
- Aggressive or threatening posture
- Sudden changes in behavior

# PATIENTS AND FAMILIES

- Feel vulnerable and distressed
- Fear of unknown
- Have feelings of being powerless
- May be unfamiliar with and intimidated by the healthcare system
- Not always at their best
- Emotionally raw due to circumstance

*“I am scared something bad will happen.”*
*“I feel vulnerable, I’m scared.”*

# BE EMPATHETIC

## Empathy – identifying with the feelings, thoughts, attitudes of another

### Listen to the person's frustration

- Be caring, kind, and patient
- Be interested
- Be honest
- Be attentive
- Be non-judgmental
  - What do they want that they are not getting?
  - How would you feel in that situation?
  - Can you address their concern or offer another approach?

# STEPS

- Be on guard for behaviors that could indicate the potential for violent behavior
- Communicate calmly, clearly and respectfully
- Keep 1.5 to 3 feet of therapeutic space between you and the individual of concern
- If you feel immediately threatened – call 2-2222 or Security at 1-2270 as soon as can safely do so
- Always report any acts of violence at SEH to Security then Volunteer Services

# SECURITY

## Call Security immediately to report:

- Suspicious people
- Vandalism
- Theft/missing property
- Disturbances or violence of any kind
- Any other event you consider security related
- Number one security problem is unattended or unsecured property like purses!

# IDENTIFYING AND REPORTING ABUSE

St. Elizabeth HEALTHCARE
Volunteer Services

# EVERY HOSPITAL ASSOCIATE/VOLUNTEER IS REQUIRED BY LAW TO KNOW:

1. The definition of abuse
2. Both Kentucky and Indiana require all citizens to report any instance where abuse is alleged, suspected, or witnessed
3. How to report abuse of a child or adult
4. That patients who are exhibiting difficult behavior are more likely to be abused

# DEFINITION OF ABUSE

## The willful infliction of:

- Injury
- Unreasonable confinement
- Intimidation
- And/or punishment

## Resulting in:

- Physical harm
- Mental anguish
- Or denial of necessary goods and services

# FORMS OF ABUSE

**Verbal – the use of oral, written or gestured language that willfully includes disparaging or derogatory terms to or about the patient/resident or family that are made within hearing distance of the resident**

**Sexual – Sexual contact without consent**

**Misappropriation – The deliberate misplacement, exploitation or wrongful use of a patient's/resident's property without consent**

# FORMS OF ABUSE

**Physical – physical force resulting in injury, impairment or pain or the threat of such force**

**Mental – the use of behaviors intended to humiliate, harass, punish or deprive the patient/resident and produce fear**

**Neglect – physical, pain, mental anguish or emotional denial of essential services by a caregiver**

**Self Neglect – an individual fails to provide for own health and safety**

# ABUSE

## Signs of abuse may include:

- Argument or tension between patient and caregiver
- Sudden changes in personality or behavior
- Agitation, apathy, withdrawal
- Rocking motions
- Dirty, unbathed, foul odors
- Inadequate/improper clothing
- Untreated medical conditions
- Dehydration and/or malnutrition

# REPORTING ABUSE

**If you witness abuse OR suspect or someone tells you they were/are abused, you are required by law to:**

- **Report the situation *immediately* to the unit supervisor or Volunteer Services**
- **The supervisor will contact Social Services who will report it**
- **The situation, by law, is then reported to the State authorities**

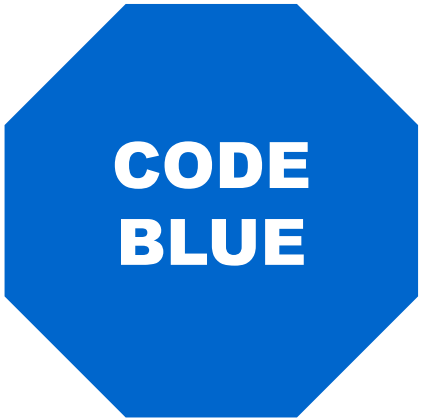
**During a State inspection a surveyor may ask you about abuse and what you would do when you hear of alleged abuse, suspect abuse or witness abuse.**

# SAFETY

St. Elizabeth HEALTHCARE
Volunteer Services

# EMERGENCY CODES – CODE BLUE

- Occurs when a medical emergency such as a cardiac or respiratory arrest has occurred somewhere in the hospital
- Dial 2-2222 to call a Code Blue within the hospitals.  Non-hospital sites call 911
- Team is notified through a pager system.  Code is not announced



# EMERGENCY CODES – CODE PINK

- When you hear a Code Pink announced, it means an Infant/Child abduction has been confirmed
- Report any suspicious person/persons with infants/children or suspicious activity to Security at 12270 ***immediately***
- Protections in place include locked units and infant/mother bracelet alarms
- All available staff need to secure doors to exits and stairways and stay alert.
- Non-critical departments should have staff report any person/persons with infants/children or suspicious activity to security immediately

# EMERGENCY CODES – TORNADO WATCH

- The US Weather Service has issued a Tornado Watch
- Conditions are favorable for a tornado or severe weather
- Keep patients and guests updated
- Remain calm and alert for further information

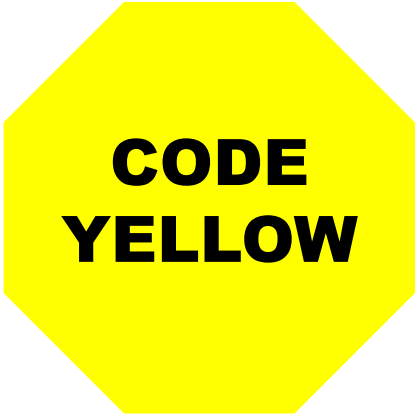
# EMERGENCY CODES – TORNADO WARNING

- A tornado has been sighted in the county
- Return to/stay in your area
- Close doors, blinds and drapes
- Move to area of safety as designated in your Disaster Plan – ask staff.
- In patient care areas, ambulatory patients and guests move to patient bathroom
- Cover patients with blankets
- For personal safety, seek cover in unit kitchen or clean utility
- Visitors seek shelter in lower-level hallway away from windows
- Issued by the US Weather Service when a tornado is sighted

# EMERGENCY CODES – CODE YELLOW

- A Code Yellow is called when a large influx of patients is expected due to a man - made (like an airplane crash) or natural disaster (like a tornado)

- Get direction from your supervisor



# EMERGENCY CODES – CODE ORANGE

- A Code Orange is called when a hazardous material spill has occurred.


S: Secure the area.

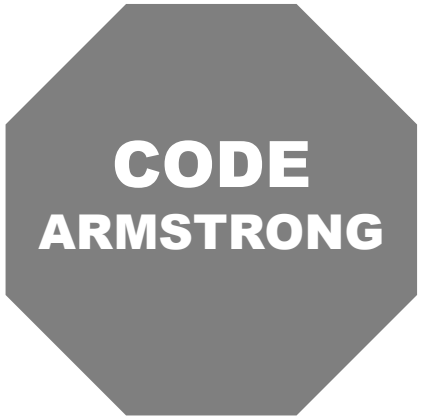
P: Protect those in the immediate area from exposure.

I: Inform others of the spill, call 2-2222.

L: Leave cleanup to trained personnel.

# EMERGENCY CODES – CODE ARMSTRONG

- A Code Armstrong is called when a hostile situation exists
- Call 2-2222 to report
- Security will respond to the area announced
- Non-trained associates and volunteers should not attempt to intervene.



# EMERGENCY CODES – CODE SILVER

- A Code Silver is called when an armed person is sighted
- Weapons are prohibited on SEH property
- If you see an armed person, go to a safe area and then call 2-2222 *immediately*
- Do NOT approach or attempt to disarm
- If Code Silver is inside Hospital, operator will announce location of incident

# EMERGENCY CODES – CODE SILVER, ACTIVE SHOOTER

## If you see an armed individual or a Code Silver is announced:

- Remain Calm
- Evaluate the situation and determine if you should:
  - Run
  - Hide
  - Fight
  - The key to a safe outcome is *Knowledge and Preparedness*

# EMERGENCY CODES – CODE SILVER, ACTIVE SHOOTER

***If you are approached by an aggressive individual but DO NOT see a weapon:***

- **Remain calm.**
- **Be aware of your posture, gestures, tone of voice, speed of speech.**
- **Keep communication simple, supportive, positive and direct.**
- **Don’t argue; speak calmly and with respect.**
- **Call 2-2222 or 911 when you can safely do so.**

# EMERGENCY CODES – CODE SILVER, ACTIVE SHOOTER

***When Code Silver is announced over the P.A. System***

***and it is NOT in your area in a hospital:***

- **Remain calm and "Shelter in Place"**
- **Stay away from the area where the incident is occurring**
- **Shut the doors to your unit or area**
- **Stay away from doors and windows**
- **Grab anything that can be used as a weapon, such as a fire extinguisher**
- **Assist patients/guests with barricading themselves in a room – if possible push the beds up against the doors and lock the wheels or use any heavy object**

# EMERGENCY CODES – CODE SILVER, ACTIVE SHOOTER

***NOT* in your area in a hospital**

- **Barricade yourself in a room**
- **Turn off all lights and silence cell phones and pagers**
- **Remain in hiding until you hear the "*All Clear*" or are ordered to do so by Police or Security**
- **If you are ordered to move by the Police, do so in an orderly manner with your hands visible and above your head**

# EMERGENCY CODES – CODE SILVER, ACTIVE SHOOTER

**If you see an armed individual in your area or you hear a Code Silver announced for your area**

**RUN**

- **Remain calm and save yourself first, you cannot help others if you are wounded**
- **If you can safely evacuate patients, visitors, and yourself, then do so by using the closest stairwell**
- **Do not stop because others will not go**
- **Leave personal belongings behind**
- **If you are able, call 2-2222 or hit a panic button**

# EMERGENCY CODES – CODE SILVER, ACTIVE SHOOTER

## HIDE

- If you cannot safely evacuate, then Shelter in Place
- Grab anything that can be used as a weapon, such as a fire extinguisher
- Barricade yourself in a room – if possible, push the beds up against the doors and lock the wheels or use any heavy object
- Stay away from doors and windows
- Turn off all lights and silence cell phones and pagers
- Remain in hiding until you hear the *All Clear* or are ordered to do so by Police or Security
- If you are ordered to move by the Police, do so in an orderly manner with your hands visible and above your head

# EMERGENCY CODES – CODE SILVER, ACTIVE SHOOTER

**If you are confronted by an armed assailant**

**FIGHT**

- ***FIGHT AS A LAST RESORT***
- **If you must fight do so in an aggressive manner, your life may depend on it**
- **Use anything you can find as a weapon – spray them with a fire extinguisher, throw things at them, do whatever you can to disable them**

# EMERGENCY CODES – CODE SILVER, ACTIVE SHOOTER

**If you are off-site,**

**Run:**

- Leave the building if you can safely do so and respond to your designated assembly point

**Hide:**

- Barricade yourself in a room by locking the doors and placing large pieces of furniture in front of door, turn off lights, and silence cell phones and pagers

**Fight:**

- Only do this as a last resort to save your life. If you must fight do so aggressively and use anything you have available as a weapon - i.e. fire extinguisher, letter opener

**Call 911 as soon as you are able**

# BOMB THREAT

## Information Gathering

**Person receiving the threat should record as much data as possible**

- Exact words of caller and time
- Sex of caller
- Speech traits
- Location of device
- Detonation time & type
- Background noises if discernable
- Look at display and write down phone number on screen/ask for help to retrieve phone number when caller hangs up

## Notification

**Person receiving the threat informs the security department who notifies the operator to call the following:**

- Call 22222. Offsite call 911.
- Local police & fire, administrator on call, Director of Plant Engineering
- Other administrative personnel

## Security

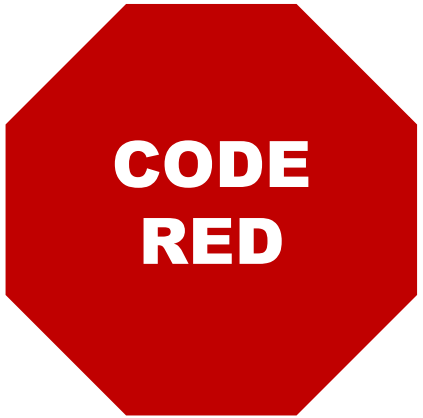
- Notifies Nursing Supervisor who notifies all nursing units.

***This information is not announced over the public address system.***

# EMERGENCY CODES – CODE RED

**If you detect smoke and/or flames of any type you must take**
**IMMEDIATE ACTION**

- **Pull the nearest fire alarm**
- **Call 2-2222**
- **Report Code Red**
- **State your name and fire location**
- **Outside Facilities**
  - **Dial 911**
  - **State your name and fire location**



# R.A.C.E.

| | |
|---|---|
| R - | Rescue / Relocate all people in immediate danger from the fire. |
| A - | Activate the nearest fire alarm. |
| | Alert all people in the area. |
| C - | Confine/contain fire and smoke. Close all windows and doors. |
| E - | Extinguish the fire if possible. Evacuate the area as instructed. Escape the area. |

# FIRE SAFETY

## Activate the nearest alarm

- Fire alarm pull stations near exits and stairwells.
- Never obstruct the view of fire alarm pulls or fire extinguishers
- When a fire alarm pull station is activated:
  - The fire alarm will sound
  - Fire doors will close. *Do not block emergency/exit doors.*
  - Strobe lights are activated.

# FIGHTING FIRES

## Before you consider fighting a fire,

- Determine whether the fire is small and not spreading
- Confirm you have a safe path to exit
- Your first defense in a fire is the fire extinguisher
- Assisting a person in immediate danger without risk to self

# FIRE EXTINGUISHERS

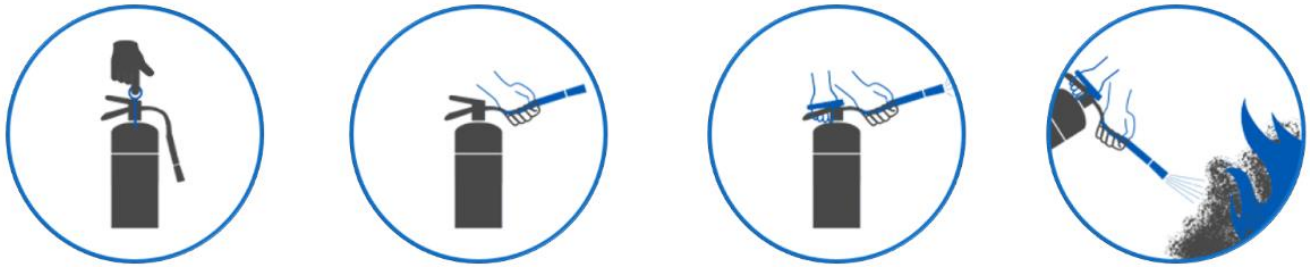
**Red ABC fire extinguishers are used in most areas throughout the hospitals for A, B and C type fires–not type D**

**A Type Fires = Combustibles**
**B Type Fires = Chemicals**
**C Type Fires = Electric**
**D Type Fire = Metals**

| CLASSES OF FIRES | TYPES OF FIRES | PICTURE SYMBOL |
|---|---|---|
| A | Wood, paper, cloth, trash & other ordinary materials. |  |
| B | Gasoline, oil, paint and other flammable liquids. |  |
| C | May be used on fires involving live electrical equipment without danger to the operator. |  |
| D | Combustible metals and combustible metal alloys. |   |

# USING THE EXTINGUISHER

## P.A.S.S.



**P – Pull pin.**

*Allows Discharge.*

**A – Aim at base of fire**

*Hit the base, hit the fuel. Don't aim at flames.*

**S – Squeeze handle**

*Release the pressure.*

**S – Sweep side to side**

*Side to side from 10 ft. away slowly moving forward*

# FIRE DRILLS

**Practice**

Provide practice and critique of our Fire Training & Response

**Improve**

Promotes targeted efforts to strengthen preparedness

**Required**

Are required by TJC and require full participation

**Unannounced**

Occur on an unannounced basis

**Assess**

Identify strengths and weaknesses

- **Prepared**
  - Drills prepare you for an actual event. Ask questions if in doubt.
- **Elevators**
  - Edgewood fire alarms are activated by department/area. Fire alarm only rings where the problem occurs.
    - Ex: If a fire alarm is activated on the 5th floor, the elevator would still work unless they are in alarm.
    - All other elevators and floors would work as normal
  - At all other facilities, there is a general alarm and everyone needs to respond.
    - The elevators would not work until cleared by the fire department

# EMERGENCY CODES – ALL CLEAR

- This code represents the conclusion of most of the emergency situations

- Not announced after a Code Blue

# BIOHAZARD WASTE

- **Biohazard symbol** indicates item contains or soiled with blood or body fluids
- Also referred to as “Infectious Waste”
- If a concern arises regarding exposure to blood or other potentially infectious material (OPIM), immediately contact your supervisor, Volunteer Services and go to Emergency Department


**Red biohazard waste bags are used for infectious waste disposal**


**Yellow waste bags are used for chemo waste only**

# GENERAL WASTE DISPOSAL

- Paper, plastic, glass
- Food
- Blue pads
- Items such as diapers containing urine, feces, gastric contents
- Sanitary napkins
- Emptied urinary drainage bags
- Vials of saline/sterile water
- Emptied and rinsed containers that held any body fluids.

# ETHICS COMMITTEE

St. Elizabeth HEALTHCARE
Volunteer Services

# PURPOSE OF COMMITTEE

## Consultation & Policy Review

- To advise and serve as a resource to St. Elizabeth associates, administration, and medical staff
- To clarify complex ethical issues that arise in the care of our patients

## Education

- To assist in the development of educational programs related to bioethics

# ETHICS CONSULTATIONS

- Usually called when there is confusion and/or disagreement about how to proceed in a difficult clinical situation.
- Most commonly, these conflicts arise over end-of-life care and mother/baby concerns or complications.

# HOW THE ETHICS COMMITTEES HELP

## An Ethics Consult Committee includes:

- Listening to patients, families, physicians, and clinical associates
- Identifying the conflicting bioethical issues
- Supporting all through the process to resolve complicated, stressful patient care situations

**Hospital Bioethics Committees do not make decisions.**

- This is a common misconception about their role.
- Final decisions are made by the patient, family and the health care team.

# OUR FAITH BASED HERITAGE

## Ethical and Religious Directives for Catholic Health Care Services

- St. Elizabeth Healthcare follows the United States Conference of Catholic Bishops

A copy of these directives can be found:

- On the website: nccbuscc.org/bishops/directives.htm
- With the manager in the area where you volunteer

# PRINCIPLES OF ETHICAL DECISION-MAKING

**Beneficence – Do good.**

**Nonmaleficence – Do no harm.**

**Autonomy – Right of the individual to make own decisions**

**Justice – Fairness to all**

**Fidelity – Faithfulness to commitments**

**Veracity – Telling the truth**

# WHEN TO CALL ETHIC COMMUNITY

**Any patient, family member, physician, associate or volunteer may contact the Ethics Committee:**

- **To ask questions or seek consultation on ethical and/or moral questions that arise.**
- **To discuss ethical and/or moral issues or concerns.**
- **To seek help to deal with a conflict with patient/family issues regarding care or treatment decisions.**

# HOW TO CONTACT THE ETHICS COMMITTEE

- Nursing Supervisor on duty (best method)

- Hospital chaplain on duty

- Ethics Committee Member

# DIVERSITY

St. Elizabeth HEALTHCARE
Volunteer Services

# DIVERSITY STATEMENT

**At St. Elizabeth, diversity, equity and inclusion are the driving spirits in everything we do for our patients, community and each other – connecting the compassionate care we deliver and healthy community we envision with an assurance of dignity and respect for all.**

# DIVERSITY

## Respect is the foundation of a culture of diversity and inclusion

**It is:**

- **Learning about those who are different from us is an ongoing process.**
- **The tool that works even when you don’t know what to do.**
- **Curiosity with the openness to learn and demonstrate the information you learn.**

# DIVERSITY

## When you don’t know what to say, you can try this approach

- I want to assist you; can you help me understand what you need?
- Tell me more about that please.

# DIVERSITY

**If you feel you have inadvertently upset someone, a respectful apology is always appropriate**

- **I'm sorry if I have offended you.  I did not mean to, and I want to do better; please help me with that.**
- **Move the focus back to the individual**

# DIVERSITY – RESPECTING DIFFERENCES

**Differences are not always obvious:**

- **Only when we meet people functioning with a different set of values do we become aware of our own.**

**We tend to be ethnocentric:**

- **We tend to relate more to those who look like us, talk like us, and act like us. We use our own rules as a basis of comparison. Everyone we meet also assumes *their* reality is the norm.**

**We all have unconscious biases:**

- **These are sometimes called implicit biases, and we all have them. Biases are personal and sometimes unreasoned judgement.**

**Being able to quickly categorize people and react are important:**

- **If we work to become aware of our own unconscious biases, we can consciously decide not to act on them and get to know this person on an individual basis**

# DIVERSITY – SPIRITUAL DIVERSITY

**It would be impossible to know all the traditional of the many cultures and their associated spiritual beliefs.**

**As non-direct caregivers, we should:**

- **Reflect on what we share in our relationships both with our co-workers, fellow volunteers, and those people who are using services at St. Elizabeth.**
- **Be open to the practices and beliefs of others.**
- **Be aware of, and sensitive to, the similarities and differences between ourselves and others.**
- **Treat everyone with respect and care – it is the universal language.**
- **Learn as much as possible and expose yourself to different cultures and traditions.**

# DIVERSITY – LANGUAGE & COMMUNICATION

## One of the ways we differ is language and communication styles

- The inability to communicate easily will increase the level of frustration for the speaker and the listener
- An important factor affecting communication is your awareness of people who have Limited English Proficiency (LEP)
- The same law that directs us to provide an interpreter to the deaf also directs us to do so for those with LEP

# DIVERSITY – LANGUAGE & COMMUNICATION

## St. Elizabeth has:

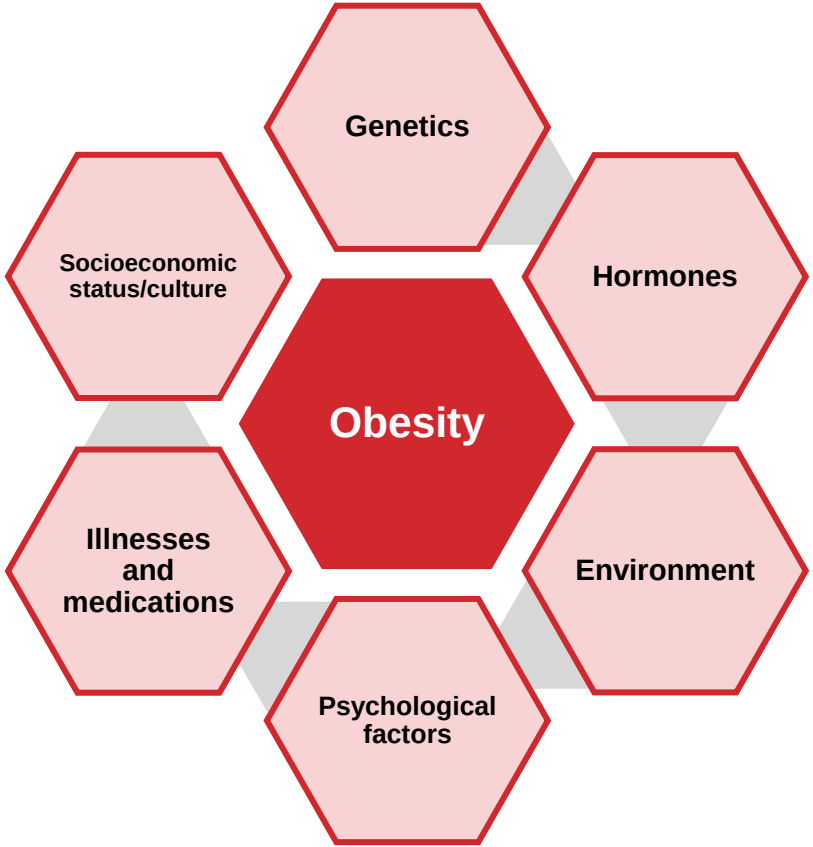
- Telephone Interpreters
- Live video interpreters
- In-person interpreters
- Translations of written documents into language other than English
- Sign Language Interpreters – available for the deaf and hard-of-hearing

**Services are provided at no cost to the patient.**

- Information is in every department
- Contact the Patient Representative or the Nursing Supervisor with questions

# DIVERSITY – OBESITY

- Between 2019-2021, the national 20% of adults nationally were obese. Kentucky (36.5%) and Indiana (36.3%) both report high rates
- Obesity is a complex, chronic disease that has many causes



# DIVERSITY – OBESITY

- Nearly 95% with the disease of obesity feel like they have been discriminated against
- Ask yourself:
  - Am I comfortable with people of all shapes and sizes?
  - Am I sensitive to the concerns of obese individuals?

***We are committed to eliminating weight bias at St. Elizabeth.***

**How might you feel if…**

- you are in the hospital and the gown is too small?
- you overheard someone asking for the “big wheelchair?”

# DIVERSITY

## What does diversity mean at St. Elizabeth?

- Diversity encompasses a collection of individual attributes and unique differences and similarities that our associates, patients, families, physicians, volunteers, and community bring to our environment
- These characteristics include but are not limited to age, culture, traditions, national origin, socioeconomic status, veteran or military status, religious beliefs, sexual orientation, gender, gender identity, race, physical and developmental abilities

# DIVERSITY, EQUITY & INCLUSION PLEDGE

- I will support Diversity, Equity and Inclusion
- I will *not* judge but seek to understand others and their viewpoints
- I will *open* my mind to learn about differences and *treat* everyone with dignity and respect.
- I will *lead* by creating a safe environment for everyone
- I will make it my responsibility to act in accordance with the ICARE values

# VOLUNTEER UPDATES

St. Elizabeth HEALTHCARE
Volunteer Services

# VOLUNTEERS NEEDED!

- YOU are our best referral source!!
- Refer a new person; once they begin volunteering YOU get a $25 gift certificate to the Gift Shop
- Please use info pads to help spread the word

# HIGH SCHOOL VOLUNTEER SCHOLARSHIPS

## Volunteer Scholarships

**St. Elizabeth Florence Auxiliary, Ft. Thomas Auxiliary and Edgewood Gift Shop awarded six $1,000 college scholarships to current graduating teen volunteers.**

***High School Volunteers must accumulate a minimum of 100 hours of service by December 31st of their senior year.***

**Winners:**

**Elaine Chan, Kira Kent, Kathryn McLagan, Morgan Shipp, Matthew Wyatt Sunday, Kenzi Vennefron**

## St. Elizabeth Healthcare Scholarship

**The St. Elizabeth Scholarship Program provides $2,000 scholarships to Northern Kentucky and Southeastern Indiana high school seniors pursuing a degree in the healthcare field including public health, biochemistry, nursing, medicine, behavioral, occupational health, environmental health, quality, safety, or other health-related disciplines.**

***23 of 25 recipients were St. Elizabeth Volunteers or Service Interns!***

# TB TESTS

- **June is mandatory TB testing time for volunteers.**
- ***Beginning in 2020, only volunteers  in high patient-contact positions are required to complete an annual TB test (Level 1 positions).***
- **If you are one of the volunteers required to complete this requirement, your Annual Requirements communication would have included information on how to complete this.**

# VOLUNTEER SURVEY

- Later this summer, we will be sending out our Volunteer Satisfaction Survey.
- The survey will be available online or on paper, per request.
- We are aiming for 100% participation!
- We look forward to reviewing your survey responses and, once again, documenting how St. Elizabeth is a Best Place for Volunteers to Volunteer!

# SELF-REVIEW & CONTACT INFORMATION

## Volunteer Self-Review:

- ***Thank you*** **for returning this** ***required*** **review!**
- **Will be reviewed individually**
- **Can expect follow-up within 2 months, if requested**

## Updating Contact Information:

- **Cell Phone and Email**
- ***LET US KNOW!***

# $10 OFF UNIFORM PURCHASE THROUGH JUNE 30

- Many styles to choose from
- Stop by the Volunteer Office to see samples and get an order form!

# YOU ARE THE PATIENT EXPERIENCE

St. Elizabeth HEALTHCARE
Volunteer Services

# A.I.D.E.T

## Our tool for complete communication:

**Acknowledge – 10/5 Rule**

**Introduction – Yourself and/or your service**

**Duration/Destination – Provide a timeframe or directions**

**Explanation – Give as much information as you can**

**Thank You – My pleasure to assist you!**

# A.I.D.E.T

## How does A.I.D.E.T impact our patients/guests?

**Acknowledge- increases sense of security**

**Introduction- decreases anxiety**

**Duration- increases chance for successful encounter**

**Explanation- increases quality of experience**

**Thank You- increases satisfaction with encounter**

# BEST PRACTICE

## Escort Guests to their Destination:

- Nothing exceeds expectations than being escorted all or a portion of the way
- Not always possible
  - Provide clear direction – 3 steps at most
  - Do not point!
    - Can be misread – use open hand gesture if needed

# DRESS CODE

## Wear your badge:

- On your upper body
- At all times when volunteering
- The I.D. badge identifies you as a member of the St. Elizabeth team.
- Must be returned if you cease volunteering.


## St. Elizabeth is a professional environment; the dress code for Volunteers and Associates reflects that expectation:

- Volunteers are required to wear their uniform at all times when volunteering
  - Easy to identify
  - Professional appearance
  - Some specific exceptions

# DRESS CODE

## Slacks/Pants:

- Solid color dress or casual style
- Ankle length (NO capris or shorts)
- Not made of denim or nylon

## Shirt/Tops (if not uniform shirt):

- Dress or casual shirt or top
- No T-shirts, hoodies or sweatshirts
- No sleeveless tops with the vest
- No shirts with writing or logos except St. Elizabeth

# PERSONAL TECHNOLOGY

## Cell Phone Use:

- Must be on vibrate or silent; customer service is FIRST
- If must take a call or text, excuse yourself and move out of ear shot
- Never text in a patient room or in front of a guest
- NOT to be used to check websites or play games

## Laptops and Tablets:

- Laptops and Tablets are not to be used while volunteering unless specifically permitted by your Area Supervisor

# VOLUNTEER HEALTH

**Report any injury to your supervisor to complete a *Patient/Visitor/Volunteer Incident Report***

- **Inform Volunteer Services**
- **Depending on the severity of the injury; will be asked to see your doctor or go to Emergency Room**
- **Volunteers are covered under St. Elizabeth's liability insurance**
- **St. Elizabeth will cover any injury related costs incurred while volunteering, regardless of fault**

# VOLUNTEER HEALTH

- **You need to notify the Volunteer Office if you are:**
  - **Hospitalized;**
  - **Off for a medical reason;**
  - **Have any COVID-19 symptoms or are around someone COVID positive**
  - **Be under medical care for an illness or condition that impacts health or safety *even if for a short time***
  - **Hospital policy requires you to have a physician complete a *Return to Volunteer* form**
  - **Any Volunteer Office can provide you with the form**

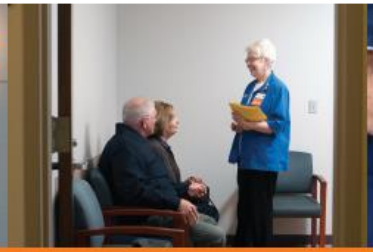
# VOLUNTEER POLICY REMINDERS

- Act within the boundaries of your Volunteer position description, accepting the direction of the supervisor where you volunteer
- Talk with Volunteer Services if you have concerns about your position, your supervisor or any other issues
- Complete all required training and health testing/immunizations annually

# VOLUNTEER CONDUCT

## Volunteers may be dismissed for:

- Serious or intentional breach of confidentiality
- Misappropriation of funds
- Failure to comply with hospital policies as:
  - Abuse of alcohol or drugs
  - Violating the No Smoking policy
  - Discriminatory or inappropriate conduct
- Falsification of information given to the Volunteer Office




# Volunteers...Enhancing St. Elizabeth.

*"St. Elizabeth volunteers are passionate about their role in making a positive difference in the patient experience."*




# TJC REVIEW

St. Elizabeth HEALTHCARE
Volunteer Services

# TJC REVIEW

**Please get out your Review Sheet!**

***Make sure to print your name on the top.***

# TJC REVIEW

1. I am familiar with St. Elizabeth's Mission, Vision and ICARE Values.

A. True
B. False

# TJC REVIEW

2. The Joint Commission holds volunteers to the same standards as associates.

A. True
B. False

# TJC REVIEW

3. Which of the following describes the function of the Notice of Privacy Practices offered to all patients?

A. Lets patients know what the Health System is doing to protect their PHI
B. Informs patients about their privacy rights.
C. Explains to patients how they can exercise their privacy rights.
D. All of the above.

# TJC REVIEW

4. You can look yourself up in Epic because, after all, it is your own personal information.

A. Yes
B. No

# TJC REVIEW

5. If you see a friend from church standing at Registration in the Cancer Center, it is ok to call the church office and ask to put them on the prayer chain.

A. Yes
B. No

# TJC REVIEW

6. HIPAA violations by St. Elizabeth associates/volunteers may result in disciplinary action up to and including termination from employment or volunteering.

A. True
B. False

# TJC REVIEW

7. St. Elizabeth is committed to being ethical in every way. If you think something isn't right, we want you to communicate your concerns.

A. True
B. False

# TJC REVIEW

8. If you have a concern to report, you may contact:

A. St. Elizabeth's Corporate Compliance Officer
B. The Compliance Hotline
C. Your supervisor
D. Volunteer Office Staff
E. All of the Above

# TJC REVIEW

9. The toll free Report Line is open 24 hours a day, 7 days a week and is totally confidential for the caller.

A. True
B. False

# TJC REVIEW

10. Prevention of hospital associated infections is best accomplished by performing hand hygiene before and after patient contact in addition to the 5 Moments of Hand Hygiene.

A. True
B. False

# TJC REVIEW

11. If you do not volunteer in a patient care area, then hand hygiene and disinfecting your work area are not important.

A. True
B. False

# TJC REVIEW

12. Alcohol foams and gels are effective for hand hygiene on unsoiled hands but are NOT effective on hands visibly dirty or contaminated with body substances, food, or after using the restroom.

A. True
B. False

# TJC REVIEW

13. It is okay to enter a patient room marked “Isolation” or “Precaution” when you are volunteering.

A. True
B. False

# TJC REVIEW

14. Receiving an influenza vaccination, unless allergic, is an annual requirement for SEH volunteers, associates and physicians.

A. True
B. False

# TJC REVIEW

15. What does a yellow arm band on a patient mean?

A. Yellow is their favorite color.
B. They are considered to be at a high risk of falling.
C. They have an allergy.

# TJC REVIEW

16. You observe that a patient who is walking down the hall alone appears unsteady and confused. You should:

A. You do not need to do anything. The yellow armband means she is OK.
B. Pay no attention. You are not a nurse, so this doesn't have anything to do with you.
C. Stay with the patient and call for a nurse or a Nurse Assistant.

# TJC REVIEW

17. Preventing falls is the responsibility of:

A. Nurses
B. Transporters
C. Volunteers
D. Phlebotomists
E. Every member of the St. Elizabeth team

# TJC REVIEW

18. You need to report water leaks, water stains, damaged caulking, and/or mold growth.

A. True
B. False

# TJC REVIEW

19. Which of the following is a symptom of stroke?

A. Facial droop
B. Arm weakness
C. Slurred speech or difficulty speaking
D. All of the above

# TJC REVIEW

20. If you believe someone inside St. Elizabeth is having a stroke, you should call 2-2222.

A. True
B. False

# TJC REVIEW

21. If you observe anyone with the signs/symptoms of a heart attack inside the hospital you call 2-2222.

A. True
B. False

# TJC REVIEW

22. Which of the following is an example of workplace violence?

A. A patient who assaults a healthcare professional who is trying to treat him.

B. An associate or volunteer who routinely berates and verbally demeans those with whom he works.

C. The domestic partner of a volunteer who shows up at the hospital and threatens his or her partner

D. All of the above

# TJC REVIEW

23. If you are a victim of workplace violence, you need to immediately report it to your supervisor or Security.

A. True

B. False

# TJC REVIEW

24. St. Elizabeth has a zero tolerance for all forms of aggressive behavior.

A. True

B. False

# TJC REVIEW

25. You are required, by law, to report witnessed, suspected or alleged abuse.

A. True

B. False

# TJC REVIEW

26. You should call 2-2222 whenever a hostile or violent situation exists, and a Code Armstrong will be called.

A. True

B. False

# TJC REVIEW

27. When noticing a patient or guest has a weapon, once safe, you dial 2-2222 for a Code:

A. Armstrong

B. Silver

C. Yellow

D. Pink

# TJC REVIEW

28. If a Code Silver-Active Shooter is announced outside of your area in a hospital, what should you do?

A. Stay away from the area of the shooter
B. Turn off lights, cell phones and pagers
C. Shut doors and shelter in place
D. All of the above

# TJC REVIEW

29. If a Code Silver-Active Shooter is announced in your area in the hospital, you should:

A. Save yourself first, you cannot help someone if you are wounded
B. Evacuate if you can safely do so
C. Grab anything that can be used as a weapon
D. Barricade yourself in a room and push a bed or heavy object against the door
E. All of the above

# TJC REVIEW

30. Any volunteer who detects smoke and/or flames of any type must take immediate actions and follow the plan R.A.C.E.

A. True
B. False

# TJC REVIEW

31. If there is a fire in your area, what do you do?

A. Call the operator and move everyone downstairs
B. Yell fire and allow people to go to another area
C. Rescue anyone in danger, activate the alarm, contain the fire if possible, and extinguish the fire or evacuate.
D. Call Security and put out the fire.

# TJC REVIEW

32. The PASS concept stands for:

A. Medication administration procedures
B. The steps to take in using a fire extinguisher correctly
C. Safer driving technique on 2 lane roads

# TJC REVIEW

33. The red ABC fire extinguisher can be used on what types of fires?

A. Chemical
B. Electrical
C. Combustible
D. All of the above

# TJC REVIEW

34. The biohazard symbol indicates that the item contains or is soiled with blood, body fluids or other potentially infectious materials.

A. True
B. False

# TJC REVIEW

35. A Safety Data Sheet (SDS) contains information about the hazards of a chemical and how to control them.

A. True
B. False

# TJC REVIEW

36. The Ethics Committee makes decisions for the patient, family and healthcare team.

A. True

B. False

# TJC REVIEW

37. The St. Elizabeth Ethics Committee is guided by the Ethical and Religious Directives for Catholic Health Care Services.

A. True

B. False

# TJC REVIEW

38. St. Elizabeth Healthcare is committed to creating an environment of diversity, equity and inclusion. We are all in this together.

A. True

B. False

# TJC REVIEW

39. We are required by law to provide an interpreter to patients with limited English proficiency and to those who are deaf.

A. True
B. False

# TJC REVIEW

40. Studies have documented weight bias in healthcare against patients that suffer from the disease of obesity.

A. True

B. False

# TJC REVIEW

41. I know that I am the patient experience.

A. True
B. False

# TJC REVIEW

**42. AIDET is a communication tool that stands for:**

**A. Arrive; Identify; Deliver; Edit; Terminate**
**B. Acknowledge; Introduce; Duration; Explain; Thank**
**C. Announce; Initiate; Decide; Educate; Terminate**

# TJC REVIEW

43. I understand that we have a Dress Code and I am expected to wear my Volunteer I.D. badge on my upper body whenever I am volunteering.

A. True
B. False

# TJC REVIEW

44. If you are hospitalized, off for a medical reason, or under medical care for an illness or condition that impacts your health or safety (even for a short time), you are required to have your physician complete a *Return to Volunteer* form.

A. True

B. False

# THANK YOU!

**You have completed your 2023 Annual Training!**

**Please bring your TJC Answer Sheet to your Volunteer Office.**