



General Student Orientation

Our Promise: Whole Person Care



Mission and Vision

We have the capacity and resources to become an organization that is widely respected as a customer-focused organization that engages individuals in their health by delivering Christ-centered, wholistic, best practice care across a connected, comprehensive continuum of services.

With Christ as our example, AdventHealth cares for and nurtures people: ***our employees, our communities, our healthcare professionals, and those who trust us for care and healing.***



Regulatory Readiness



Advent Health

Corporate Compliance

- Compliance Officer
 - Responsible for overseeing the program
- Corporate Compliance Department
 - Employee issues concerning non-compliance with Local, State or Federal Regulations

(407) 975-1402 or (888) 92-Guide

Risk Management

- Help create a safe environment!
- Ways to avoid risky situations:
 - Know your scope of practice and hospital policies.
 - Do not take short cuts.
 - Draw attention to frayed wires, spilled liquids, or safety hazards.
 - Check electrical equipment for the approval safety sticker.

Origami/ Incident Report



ORIGAMI RISK

- Florida law requires all health care facilities to have a risk management program in place.
 - Nonpunitive to report (no punishment will result for an employee reporting an event).
- Electronic reporting system used by all employees and students.
 - After notifying the patient's nurse, the student under the direction of that nurse will complete the incident report.
 - Report any injuries or incidents immediately to your clinical instructor and the Education Department.

Performance Improvement

- **Purpose:** To improve the quality of care and service provided to all customers (patients, family, physicians, co-workers, or any visitor).
- Why do we do PI?
 - To support the values and mission of AdventHealth
 - Achieved through an ongoing effort by all individuals to continuously make improvements and minimize errors
 - Improve patient outcomes
 - Improve patient satisfaction
 - CMS-Condition of Participation

Performance Improvement

- We are working to improve:
 - **Quality** – publicly reported clinical measures, evidence-based care, patient satisfaction
 - **Service** – community service (Heart Walk, Relay for Life, Community Education, etc.), new services, other community outreach initiatives
 - **People** – diversity, staff satisfaction, benefits
 - **Finance** – wise use of our resources
 - **Department Specific** – each department works to improve a service or product within their department that contributes to the organization's goals and mission

Sexual Misconduct

- Notify your instructor/charge nurse immediately if:
 - A patient makes allegations of sexual misconduct
 - You feel you are being harassed

Risk Management and Administration will handle the issue once notified by the manager/supervisor.

Abuse and Neglect

- Harm or threatened harm to a person's physical or mental health or welfare is considered abuse and/or neglect.
 - Suspicious or unexplained cuts, scrapes, burn marks, or bruises
 - Old broken bones noted on x-ray
 - Failure to thrive and/or obvious fear of touch
 - Fatal injury
 - Sexual abuse
 - Social withdrawal or depression
 - Not acting the right age
 - Suicide ideation or attempt
- Florida law requires reporting of suspected abuse or neglect of children, elderly, or disabled adult (reporting person may choose to remain anonymous)
 - Reports directed to the Central Abuse Registry and Tracking System at 1-800-96-ABUSE (1-800-962-2873).

PHI (Patient Health Information) Defined

- Any information that can be used to identify a patient (whether living or deceased) that relates to the patient's past, present, or future physical or mental health or condition, including healthcare services provided and payment for those services.
- ***Students may access PHI only when necessary to perform their clinical related duties.***
 - Please note: MINIMUM NECESSARY [45 CFR 164.502(b), 164.514(d)]- This standard means that the MINIMUM amount of information to perform the duties of the job should only be accessed.

HIPAA Privacy and Security Rules

- HIPAA – Health Insurance Portability and Accountability Act of 1996
 - Federal Law designed to protect Information known as protected health information (PHI)
- HITECH Act (Health Information Technology for Economic and Clinical Health)
 - January 2013, the Department of Health and Human Services implemented HITECH's statutory amendments to HIPAA
- There are two primary HIPAA rules, as amended by HITECH:
 - Section 1: The HIPAA Privacy Rule
 - Section 2: The HIPAA Security Rule

HIPAA and Patient's Rights

- *The patient has the right to:*

- Participate in his/her plan of care, and to request or refuse treatment
- Make decisions regarding his/her care and the right to create advance directives
- Personal privacy and care in a safe setting
- Confidentiality of his/her record
- Access record information in a reasonable time frame
- Be free from all forms of abuse or harassment
- Be free from both physical restraints and drugs that are used as a restraint

Your Responsibility in Upholding HIPAA

- Part of your responsibility as a student is to REPORT to your clinical instructor and the Education Department any privacy or security breaches involving PHI.
- DO NOT
 - Print or email any patient information.
 - Look at PHI “just out of curiosity” (no harm intended, want to send a “get well card”) OR seeking info on a “High Profile Person” (Board members, employees, etc.)
 - Access information on a close friend or family thinking that you are just trying to help (ex. employee not involved as a care team member for the patient)
 - Access PHI for intent to use the information for personal advantage/financial gain (ex. selling of patient demographics to a firm soliciting for legal services) OR to gain retribution (ex. scorned spouse, etc.)
 - Leave computer screens unlocked when not in use

Remember ALL information is entitled to the same protection and must be kept private! It's the law!

EMTALA

- If an individual is presented to an emergency department and a request is made by the patient, or in his/her behalf, for examination or treatment of an emergency medical condition...
 - The hospital **must provide for an appropriate medical screening examination of that condition, without delay or interference**, to the extent of that hospital's emergency department capability, without consideration of the patient's ability to pay for the care.

Grievances and Complaints

- Use chain of command and notify clinical instructor and clinical leader on the unit.
- Both Joint Commission and AHCA have reporting hotlines you can access on the internet.

Employee Health




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Employee Health

- A drug and alcohol-free environment.
 - All campuses are smoke free.
- Influenza Vaccines
 - Required for all students and employees
 - Protect your patients, your loved ones and yourself with vaccinations
 - Each year more than 80,000 people die from influenza and related complications
 - Must sign consent or declination form

**** If declining vaccine, must wear a mask in ANY patient care area during flu season October-April. *****



TB Screening and Fit Testing

- TB is a disease that is spread through the air.
- A PPD/Chest X-ray is required annually.
 - Students may not enter airborne precaution rooms unless you have proper proof of fit testing for N95 mask.

Needle sticks, Contaminated Sharps, Related Injuries or Blood Exposures

- **Immediate first aid**
 - Wash skin with soap and water; mucous membrane - rinse with water.
- Notify clinical instructor and clinical leader on the unit immediately.
- Call Exposure Hotline 1-888-807-1020 ASAP.
 - Post Exposure Nurse (PEN) will meet exposed individual in Employee Health.
 - Based on PEN instructions, the student will need to follow-up with their PCP/insurance and school for additional services.

Patient/Staff Safety and Infection Prevention



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Patient Safety Program

- Goal: *To keep patients safe by recognizing possible safety risks and putting processes into place to prevent mistakes, accidents and patient harm.*
- Patient safety efforts
 - National Patient Safety Goals (NPSG) – Safety interventions by The Joint Commission to prevent mistakes in patient care.
 - Speak Up – Encouraging patients to “Speak Up” with any questions about their care or safety
 - Preventing infections with Hand Hygiene (Clean hands)

Safety Concerns

- If you have a safety or quality concern:
 - Talk to your clinical instructor and clinical lead on the unit
 - Call your Education Department
- Reporting safety and quality concerns is important to help AdventHealth correct problems.
- If concerns are not resolved, you may contact the Joint Commission at 1-800-994-6610.
 - There will be no retaliatory discipline for reporting concerns to the organization or TJC.

Fall Prevention

- Inpatients

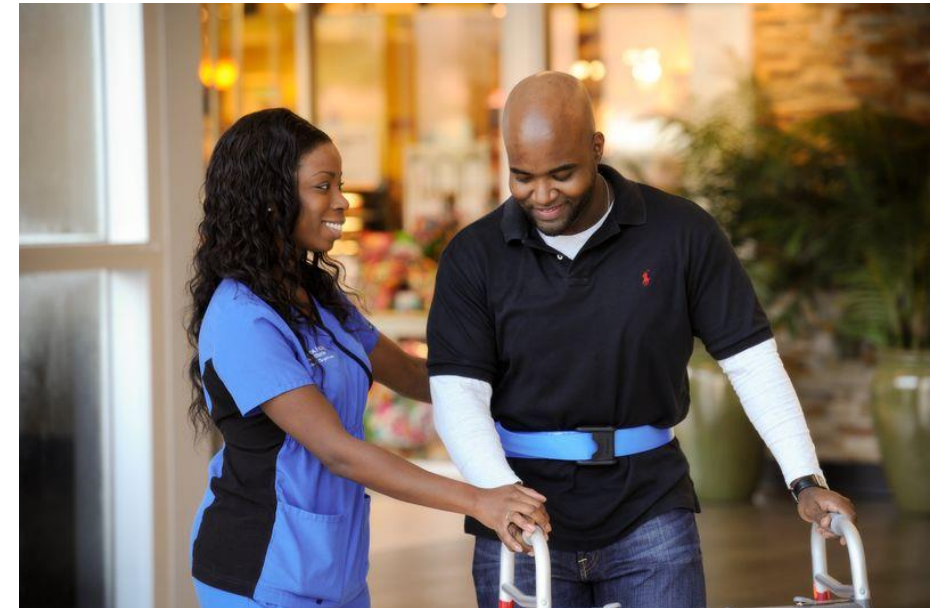
- Make sure all items such as the call bell, tissues, water, etc. are in reach
- Skid-free socks for patients when out of bed
- Bed in low position, wheels locked
- Bed/chair alarms
- Make sure the area is safe – no clutter, spills, tripping hazards
- Stay with patients who might fall and call for help

- Outpatients

- Help outpatients who may be at risk for falling by transporting them in wheelchairs or accompanying them to their destination.

Body Mechanics – Basic Steps to Correct Lifting

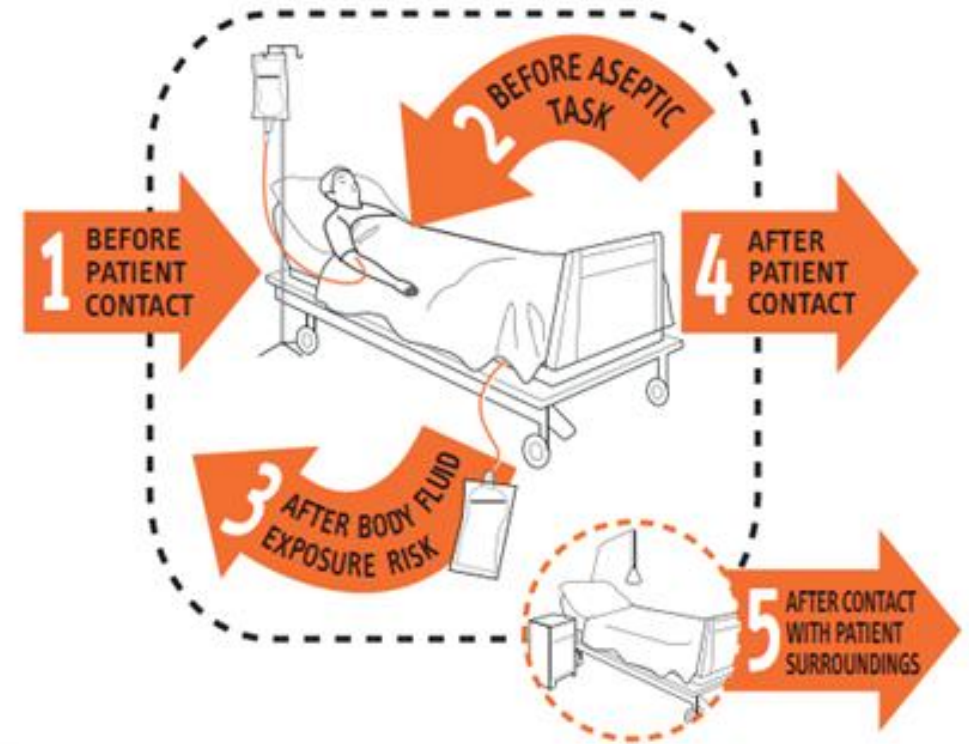
- Bend at the hips and knees
 - Create a wide base of support by spreading your feet apart (at least shoulder width)
 - Keep your back straight and body positioned over the base of support
 - Keep items close to your body, creating less stress on your lower back
 - Keep head and shoulders up as lifting motion begins
 - Tighten stomach muscles as lifting begins
 - Lift with legs and stand up in a smooth, even motion
- Keep your path clear
- Ask for help, don't try to be superman/woman
 - Communicate before and during the lift if more than one person is involved



Hand Hygiene

- When entering or leaving a patient's room (before and after contact with patient and/or patient's equipment or environment)
- Before putting on and after removing gloves
- Before handling an invasive device (such as IV tubing or Urine catheter)
- After contact with body fluids, excretions, mucus membranes, non-intact skin or wound dressings
- After sneezing or coughing
- Before handling food or medications
- Whenever visibly soiled

Your 5 moments for HAND HYGIENE



Hand Hygiene

- Wet hands with warm water.
- Apply soap to all hand surfaces.
- Rub hands vigorously for 15-20 seconds, making a lather.
 - Be sure to wash between fingers and under nails!
 - Rinse hands under running water with fingers pointing down.
- Dry hands thoroughly with paper towel.
- Turn faucet off with dry paper towel (to avoid contaminating your clean hands).
- Apply hand lotion as needed.



Hand Hygiene

- Alcohol-based hand hygiene
 - May be used instead of soap and when not visibly soiled.
 - Apply 1.5 - 3 ml (1 to 2 squirts) of the product to the palm of hand.
 - Covering all surfaces, rub hands together until they are completely dry and the product is absorbed.
- Do not use alcohol-based hand rubs when caring for patients with *Clostridium difficile* (C-diff) diarrhea/infection. Use soap & water instead.
- Fingernails
 - All students that have DIRECT patient contact/ care should:
 - NOT have fingernails longer than $\frac{1}{4}$ of an inch in length
 - NOT wear artificial or gel nails



Personal Protective Equipment (PPE)

- Students must use PPE when needed.
- PPE includes:

Gloves

Resuscitation devices

Aprons

Protective eye wear

Masks

Shoe covers

Gowns

Lab coats

Caps

Face shields

PPE

- Application order:
 - Gown, Mask & Gloves
- Removal order:
 - Dirty to Clean
 - Gloves, Face shield or Goggles, Gown, Mask
- Always wash hands before & after PPE
- Discard PPE in room
- **DO NOT** wear PPE in hallways (including gloves)



Universal/Standard Precautions

- Health care workers must treat all human blood and body fluids as if it were infected with a blood-borne disease.
- We must act like ***all patients are infected*** with a blood-borne germ and take steps to protect ourselves from Infection using appropriate PPE's

Blood Borne Pathogens in the Clinical Setting

- Diseases

- Hepatitis B/C/D, Syphilis, Malaria, Human Immunodeficiency Virus (HIV), and other hemorrhagic fevers such as Ebola Virus
- Blood and other bodily fluids containing blood of person infected with these diseases carry the germs which can be spread to others.

- Causes of spread (exposure)

- Accidental injury with a sharp object that has germs (needles, scalpels, broken glass, etc.)
- Indirect spread happens when you touch a surface that has germs and then touch your mouth, eyes, nose or open skin
 - Dirty surfaces - Hepatitis B Virus (HBV) lives on surfaces, dried at room temperature, for a long time (weeks)
 - Surfaces may be dirty even if you can't see blood or fluids on them

Clostridium difficile (C. diff)

- Causes 15-25% of the antibiotic associated diarrhea
 - Shed in feces, which can be transported from one patient to the next on the hands of healthcare workers and students
- All healthcare workers, students and visitors must wear gown and gloves while caring for the patient
 - Soap and water must be used after caring for a patient with C. diff as alcohol based hand gels are not effective
- Patient should be placed on contact precautions as soon as C. diff is suspected

Multi-Drug Resistant Organisms (MDROs)

- MDRO are Resistance to Multiple Drugs/antibiotics aka “Super Bugs”
 - Examples:
 - MRSA (Methicillin Resistant Staph Aureus)
 - VRE (Vanco-Resistant enterococcus)
 - C-diff (Clostridium difficile)
 - CRE (Carbapenem Resistance)
 - Spread from:
 - Patients (MDROs on their skin, body fluids or sputum)
 - Healthcare workers and students NOT WASHING their hands.
 - Hospital equipment that is contaminated with MDROs and NOT CLEANED (e.g. chairs, IV-poles, bedrails)
- Patients with known or suspected MDROs must be placed on isolation.

Isolation Signs

- Ensure you follow the infection control signs at each campus to ensure understanding for the isolation precautions for that patient.



Hazardous Materials and Waste



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Hazardous Materials and Waste

- Hazardous Waste
 - OSHA defines *regulated waste as items contaminated with blood or bodily fluid*
 - Regulated medical waste such as absorbent material that have blood, body fluids, or excretions on them.
 - Must be transported separately.
- Non-hazardous waste
 - Most other soiled waste including paper and food



Hazardous Materials and Waste

- Sharps
 - Place all SHARPS (needles) in puncture-proof container and never overfill.
 - The SHARPS container on the right should not be used and is considered FULL.



Hazardous Materials and Waste

- Handling Biohazardous Waste
 - Wear appropriate PPE (gloves, gown, goggles)
 - Never hold waste bag close to your body
 - Use spill kit for small spills
 - Contact department director, Environmental Services, or Facilities for large spills
- Safety Data Sheets (SDS) formally known as Material Safety Data Sheet (MSDS)
 - Contains the name of a chemical, manufacturer, hazardous ingredients, health hazards, first aid procedures, spill/leak information and PPE required
 - SDS information is available on AdventHealth Connect



Emergency Preparedness (Reporting Emergencies)

- AdventHealth Daytona Beach 2222
- AdventHealth DeLand 5555
- AdventHealth Fish 700
- AdventHealth NSB 5911
- AdventHealth Palm Coast 2222
- AdventHealth Waterman 5555
- Off-site Offices 911



Please refer to campus specific flip charts for emergency codes

Code Red

- Code Red
 - Indicates a fire within the building
 - First person to witness must shout “Code Red” and give location
 - This will inform your co-workers that you are entering room and to start implementing RACE procedures
 - Know the location of the following:
 - Nearest fire extinguisher
 - Nearest fire alarm pull station
 - Evacuation route
 - Fire doors (create safe fire zones)
 - Defines smoke compartments in your area
 - Prevents smoke from spreading for 2 hours



Fire Safety

- Please familiarize yourself with the acronyms RACE and PASS for fire safety.
- Maintenance of a Safe Facility
 - Keep the following clear at all times:
 - Emergency exits
 - Fire-fighting equipment
- Fire alarm pull stations
 - Never use door wedges to keep doors open
 - Keep doors closed, unless controlled electromagnetically

The infographic is divided into two main sections. The top section, titled 'RACE', consists of four vertical panels. Each panel has a large letter in a red circle at the top, an illustration in the middle, and text at the bottom. The 'R' panel shows a person in a wheelchair being assisted. The 'A' panel shows a hand pulling a fire alarm pull station. The 'C' panel shows a hand closing a door. The 'E' panel shows a hand using a fire extinguisher. Below these panels is a 'You should know' section with three orange arrows pointing to the right, each followed by text. The bottom section, titled 'How to properly operate a Fire Extinguisher', also consists of four vertical panels. Each panel has a large letter in a blue circle at the top, an illustration in the middle, and text at the bottom. The 'P' panel shows a hand pulling a pin. The 'A' panel shows a hand aiming a fire extinguisher. The 'S' panel shows a hand squeezing the handle. The 'S' panel shows a hand sweeping the fire extinguisher. A large orange arrow points from the 'E' panel of the RACE section down to the 'How to properly operate a Fire Extinguisher' section.

R
Rescue
anyone in immediate danger of the fire.

A
Alarm
Activate the nearest fire alarm **and** call your fire response telephone number.

C
Contain
fire by closing all doors in the fire area

E
Extinguish
small fires. If the fire cannot be extinguished, leave the area and close the door.

You should know:

- Locations of nearest fire extinguishers and alarm pull boxes
- The fire location - room number and building
- All fire exits in your work area

How to properly operate a Fire Extinguisher

P
Pull
the pin, release a lock latch or press a puncture lever.

A
Aim
the extinguisher at the base of the fire.

S
Squeeze
the handle of the fire extinguisher.

S
Sweep
from side-to-side at the base of the flame.

Security

- Always wear an ID badge while on hospital property
 - Being aware of unknown people without badges
- Reporting all incidents large or small
- Safeguarding all assigned keys, passwords, and access codes
 - Do not share your password with ANYONE.
- Knowing emergency codes and specific responsibilities
 - Leaving all valuables at home
- Students will **NOT** take any photos in the clinical setting.
 - No cellphones in clinical areas.
- Students will **NOT** make any posting about the clinical setting to social media.

Response for Utility & System Failure

- Emergency power
 - Red Outlets are backed up by the hospital generator
 - Plug all critical equipment into these outlets
- Stuck in elevator
 - Stay calm
 - Use the phone or emergency alarm for assistance



**Next Steps:
Completing Your
Orientation for your
Student Rotation**



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Orientation Paperwork

- In addition to the Student Orientation presentation, please do the following:
 - Read Patient Experience Presentation, Information Security Sanctions Policy, and Privileges of Student Nurses and Student Nursing Assistants (if applicable).
 - Complete and submit the following forms to Education
 - Orientation Acknowledgement and Security Access Form
 - Student Confidentiality Form
 - Flu Provider Disclosure Form or Declination Form (during flu season October-March)
 - Include proof of flu documentation or reason of declination
 - Patient Experience Test

Student Badging Process

- Please see the Education Department for student campus badge, if required.
 - You must wear your school issued badge along with the hospital issued badge.
- Employees of AdventHealth will only wear a student badge while in the clinical setting.
 - You may NOT wear your employee ID in the clinical setting.

Parking

- Please park in the employee/student designated parking locations for each campus.
 - Please see parking map for instructions.
 - Student will **NOT** park in visitor parking areas.
 - Students and instructors may be required to obtain a temporary parking pass from the Education Department. *Check with the Education Department at the campus where you will be doing your rotations*

Contact Information for Students

Daytona Beach

- Nancy Grande BSN, RN, CME and Student Coordinator
 - Office: (386) 231-3193; Fax: (386) 231-3180
 - Nancy.Grande@adventhealth.com

Palm Coast

- Education Department
 - Office: (386) 586-4346; Fax: (386) 586-4357
 - Flg.Education.Department@adventhealth.com

Waterman

- Barbara Richards MSN, RN-BC, CCRN, Education Manager
 - Office: (352) 253-3265; Fax: (352) 253-3502
 - Barbara.Richards@adventhealth.com

DeLand

- Maribel Caraballo Gauvin BSN, RN, Clinical Educator
 - Office: (386) 943-3084 ; Fax: (386) 943-3657
 - DELEducators@adventhealth.com

Fish

- Alexis Marano MSN, RN, NPD-BC, PCCN-K, Education Manager
 - Office: (386) 917-7734; Fax: (386) 917-5099
 - Alexis.Marano@adventhealth.com

New Smyrna Beach

- Kristin Brim, BSN, RN, Clinical Educator
 - Office: 386-917-7546
 - Kristin.Brim@adventhealth.com

Thank you!

- Thank you for completing this on-line orientation.
- We are excited to have you complete your clinical rotation at AdventHealth.
- Please make sure to complete the required paperwork and submit it to the Education Department.