

VA SALT LAKE CITY HEALTH CARE SYSTEM

WOC MANDATORY TRAINING

"Providing a Safe and Secure Environment for Health Care For Non-Clinical Contractors"

Individuals appointed to the VASLCHCS as "Without Compensation (WOC)" or non-paid employees, must be compliant with mandatory training required by The Joint Commission, the Occupational Safety Health Administration, and the Veterans Administration. **This mandatory training is required for all Non-Clinical Contractors (i.e., grounds workers, electricians, painters, etc.) and certain other WOC Staff who do not come in contact with patients.**

This module addresses general safe practice requirements, measures, policies and procedures which every VA Salt Lake City Health Care System non-clinical WOC employee needs to know and use in performing their duties.

Upon the completion of this module, participants should be able to:

1. Cite examples of a safe and secure environment of care the VA Salt Lake City Health Care System provides its employees and WOC staff.
2. Identify the standardized emergency codes and describe how to activate these codes at the VA Salt Lake City Health Care System.
3. Locate departmental Policy Memorandums for a safe and secure environment of care.
4. Demonstrate actions of a safe and secure environment of care in performing daily duties.
5. Review Principles of Ethical Conduct and VA Ethics Rules.
6. Identify the key personnel to contact concerning the topics of a safe and secure environment of care.

The following is a list of topics addressed in this module:

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|--------------------------------------|---|
| I. Safety Program | XII. Life Safety and Fire Prevention |
| II. Accident Reporting and Treatment | XIII. Emergency Management/ Disaster Planning |
| III. General Safety Practice | XIV. Office Safety |
| IV. Material Handling | XV. VA Police and Security Services |
| V. How to Lift and Save Your Back | XVI. Bomb Threats |
| VI. Good Housekeeping | XVII. Cell Phone Use and Restrictions |
| VII. Infection Control | XVIII. Sexual Harassment |
| VIII. Hazardous Materials Management | XIX. Workplace Violence |
| IX. Electrical Safety | XX. Standards of Ethical Conduct |
| X. Utility Systems | XXI. JCAHO Patient Safety Goals |
| XI. Medical Equipment Management | XXII. Green Environment Management System |

After reviewing the contents of this module carefully, return to the Instruction Page for the link to the Exam and the Exam Answer Sheet. You may print a copy of this education program if you have difficulty reviewing the content on your computer. Please note that it is several pages in length.

You may want to refer to this information while you are taking the Exam and from time to time in the future. You will be expected to apply these measures daily in the performance of your duties. Additional information regarding these topics can be found in local Policy and Procedure Memorandums. These memorandums can be found on the VA Salt Lake City Health Care System website under "Publications."

I. Safety Program

Statement

The goal of the Salt Lake City Health Care System is to continually develop, promote and enforce safe work practices and provide a hazard-free working environment consistent with generally recognized standards and/or established federal, state, and local regulations. In order to meet this goal, the Medical Center provides an efficient and effective Safety Program along with a safe working environment and assurance that employees, non-paid employees, students, residents, and management are aware of their responsibilities regarding safety.

Responsibilities

Management:

All levels of management will consistently and constantly enforce all rules and regulations, be alert for unsafe practices and conditions and take immediate and appropriate action to correct any irregularities they find. The responsibility of making the work place as safe as possible rests with management. This is accomplished through training and ensuring that employees, W.O.C. employees, students, and residents follow proper safety procedures. Supervisors must consider accident prevention as a normal part of their role.

Employee:

The responsibility for safety must rest on the employee, non-paid employee, student, and resident. Each shall follow safe practices in their assignments, abide by all rules and regulations, be constantly alert for health and accident hazards, and report them to their supervisor, Safety Officer, or Safety Committee Members.

Medical Center Safety Committee:

The Safety Committee serves as an advisory body to the hospital Administration, Medical Staff and the Governing Board in the recommendation, formulation and adherence to the safety policies in the hospital. It develops, implements, and maintains a comprehensive hospital-wide safety program. The committee chair and the Safety Manager have the authority to take any and all necessary actions to eliminate any hazardous conditions, which could result in personal injury or damage to equipment, buildings, or the environment.

II. Accident Reporting and Medical Treatment

The following steps should be taken following a work related injury or illness (this includes blood exposures/needle sticks and exposure to TB or any other communicable disease):

If there is a life threatening injury, you should follow the VA Salt Lake City HCS Policy 138.60 which directs employees to either activate the **Medical Center Arrest Response Team by dialing #6666** or activate the **community medical emergency system by dialing 9-911**. The Arrest Response Team will respond to emergencies in Building 1, 3, and 14 and the grounds immediately encompassed by these buildings.

Emergencies in ALL other buildings and grounds (2, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 15, 24, 25, 38, 45, 47, T-1, T-2) and off-site treatment facilities must dial 9-911. All calls to 911 will be subsequently reported to the VA Police at ext. 4444.

Report the incident to your supervisor

Your supervisor will create an electronic "Report of Incident" on the ASISTS system (CRT/VISTA). The Safety Officer or Employee Health can also begin this process for you.

Get appropriate medical treatment

1. You have the right to your choice of physicians, both for first aid treatment and other follow-up care.
2. During normal business hours (Monday through Friday from 07:30 AM to 4:00 PM) you should **call Employee Health at extension 1202**. Arrangements will be made for you to be seen by the Employee Health physician or in the Emergency Department if the Employee Health Physician is not available. If you elect to be treated by your personal physician or another outside provider, a Form CA-16 (Authorization for Examination and/or Treatment) will be issued to the medical provider of your choice. Employee Health will assist you in completing the necessary workers' compensation paperwork and understanding your benefits under the Federal Employee's Compensation Act.
3. After normal business hours and on weekends, you should report directly to the Emergency Department (after notifying your immediate or shift supervisor that you have been injured.) You should contact Employee Health by 9:00 AM the next normal business day.

Needlesticks and other blood exposures must be reported as soon as possible to Employee Health at ext. 1202 during normal business hours. After normal business hours, you should report directly to the Emergency Department. Source patients who are outpatients should be asked to remain on station until appropriate risk assessment and blood testing can be obtained by either the Employee Health or Emergency Dept. staff.

Complete electronic paperwork

If your injury requires medical treatment beyond first-aid care, you must complete an OWCP Form CA-1, "Federal Employee's Notice of Traumatic Injury and Claim for Continuation of Pay/Compensation". This form is completed electronically on the Medical Center's internal computer system. Employee Health will assist you in completing this form.

III. General Safety Practice

Report any unsafe conditions or acts that you observe to your supervisor.

Report any foreign material on the floor to the Environmental Management Service, or remove it at once to prevent injury to others.

Report defective or damaged equipment immediately to your supervisor and tag it as unsafe.

Walk; do not run, especially in halls and on stairs. Keep to the right using special caution at intersecting corridors.

Know the fire safety plan. Know the location of fire alarms and extinguishers and how to use them.

Become familiar with relevant work procedures and safe work practices.

Open doors slowly using the handle or push plate; make sure the other side is clear before opening doors.

The work place is no place for horseplay and practical jokes that may endanger others.

No one is expected to take chances or endanger themselves or others in the performance of job duties. Do not take chances or guess! When in doubt, ask your supervisor to explain any job.

IV. Material Handling

Avoid containers with protruding nails, jagged edges, burrs or rough surfaces. Have them repaired, or get rid of them

Keep fingers away from pinch points in setting down materials, passing through doorways, or closing drawers and doors. Also, when handling long objects, keep hands away from ends.

Wipe off greasy, wet, slippery, or dirty objects before trying to handle them. Keep hands free of oil and grease. Wear protective gloves. Use caution around operating machinery.

Get help for lifting heavy equipment, or use hand trucks and dollies to handle heavy, bulky, or loose materials. Use utility carts for moving patient equipment and office supplies.

Put away sharp objects when they are not in use. Do not cover sharp objects such as kitchen knives or tools that are on a desk, table or workbench.

Needles and other sharp objects are a source of infectious disease. Immediately dispose of such objects in the nearest needle disposal (sharps) container. Contaminated needles should not be recapped prior to disposal. Needle stick injuries require immediate follow up (See II. Accident Reporting). Use proper safety devices when breaking glass ampoules.

Do not reach into wastebaskets with unprotected hands.

V. How to Lift and Save Your Back

Provide a good base of support by broadening stance, one foot slightly ahead of the other; wear non-slippery, low heeled, supportive shoes.

Keep the load close to your body and waistline. Use handles when available.

Lift slowly and smoothly (not fast and jerky like a weight lifter).

Do not twist your back as you lift.

Bend your knees and hips to avoid putting all the stress on your back when you are lifting or getting down to perform a procedure.

Lift using the muscles of your legs and buttocks.

With large or bulky loads, use good common sense and either get help with the lift from another person or by using lifting equipment. Use carts to transport items. Break lifting tasks into several small loads versus one large load when possible.

VI. Good Housekeeping

Slips and falls are often caused by poor housekeeping habits. To help eliminate slips and falls, all employees, non-paid employees, students, and residents should observe the following:

Do not block doorways, elevators, or entrances with equipment.

Mopping and waxing is done on only one side of a corridor at a time, leaving one side for safe passage. "Wet Floor" signs are posted to indicate "Caution."

Take personal responsibility to alleviate slipping or tripping conditions anywhere on the floor or stairways, or report to Facilities Management Service Center. Principal hazards may include: liquids, flower petals, rubber bands, paper clips, cigarette butts, and other small objects.

Do not use chairs, boxes, etc., for climbing. Always use a ladder or step stool.

Approach corridor intersections and elevators slowly.

Report unsafe conditions immediately! For example - spills to Housekeeping and damaged or broken equipment to Engineering Services and Emergency Boiler Plant.

VII. Infection Control

Basic Hygiene

Everyone is responsible for preventing and controlling the spread of hospital acquired infections. Protect yourself and others with the practice of the following basic hygienic measures:

1. Always cover your coughs and sneezes. An easy way to do this is to cough or sneeze into your sleeve.
2. Don't touch your own eyes, nose, and mouth except with freshly washed or sanitized hands.
3. Always wash hands before eating.
4. Wash hands after using the bathroom or performing any personal grooming for yourself, such as blowing your nose.
5. Stay home from work if you have a fever above 100.4, especially if it is accompanied by a cough, diarrhea, or rash. If there is ever any question, check with Infection Control at extension 1708 or Employee Health at extension 1202.

Use alcohol-based hand rub or soap and water:

1. Before and after direct contact with each patient.
2. After handling objects or touching surfaces near the patient.
3. Before moving from a contaminated body site to a clean body site on the same patient.
4. After contact with body fluids, excretions, and non-intact skin if hands are not visibly soiled.
5. Before donning gloves to perform invasive procedure.
6. After removing gloves.

Use antimicrobial soap if hands are visibly soiled with blood or other proteinaceous material. Use:

1. Warm water.
2. Soap. Enough to work up a good lather.
3. Friction. Fifteen seconds of friction is needed to remove organisms that cause infection.
4. Free flowing water. Let it flow freely enough to adequately rinse off soap and soil.
5. Use paper towel to turn off water.

Remember: The best defense against the spread of infection is meticulous hand hygiene.

Airborne Precautions

When a patient is suspected, or known to have a disease transmitted by the airborne route, such as tuberculosis, chickenpox, or disseminated shingles, the patient will be placed in a private room and a "AIRBORNE PRECAUTIONS" sign will be placed on the outside of the door. All persons entering the room must wear an N-95 respirator mask for which they have been fit tested or a powered air purifying respirator (PAPR).

Health Care Worker Infectious Disease Exposure Follow-up

Definition of Exposure:

Puncture, laceration, abrasion of the skin with a needle, or other sharp object, which is contaminated with blood or other body fluid.

Splash of blood or body fluid onto the mucous membranes of the mouth, nose, or eyes.

Blood or body fluid contact with non-intact skin.

Inhalation of air contaminated with airborne disease.

Employees, W.O.C. employees, students, and residents who are accidentally exposed to blood or body fluids by any of the routes defined above, or exposed to TB or any other communicable disease should follow the procedures described under Accident Reporting (Section II).

The Isolation Precaution Policy, the Exposure Control Plan for Prevention of Blood Borne Infections, and the Tuberculosis Prevention and Control Plan can be found on the VA Salt Lake City Health Care System web page under "Publications."

The director and/or supervisor are responsible to assure that the employee, contract non-paid employee, student, and resident adheres to Standard Precautions and to provide training about the location of personal protective equipment.

VIII. Hazardous Materials Management

Purpose: To provide a safe environment for patients, visitors, employees, non-paid employees, students, residents and the surrounding community by initiating the proactive management of hazardous and potentially hazardous materials, wastes, or conditions through written policies and procedures regarding their safe handling, storage, use, disposal, and related educational and training programs.

You have the right to know about the hazardous materials with which you work. Initial information on hazardous material management is given during New Employee Orientation. This includes an overview of the federal and state requirements along with the Hazard Communication Program Description.

Be familiar with the information contained in the Material Safety Data Sheets (MSDSs) in your work area. Know where they are located. Examples of common hazardous materials are copier fluids, cleaning fluids, sanitizing agents, etc.

MSDS: Your director/supervisor is to ensure you have received site-specific chemical hazard training. Training includes notification of the hazardous properties of the chemical used in the work area. This training will also include potential health hazards, handling, storage, and emergency procedures.

IX. Electrical Safety

Many equipment hazards that eventually result in an electrical shock are visible for a period of time prior to the accident.

Frayed or damaged electrical cords should not be used until repaired or replaced.

If a "tingle" or shock is felt, unplug the equipment and report it Biomedical Engineering (extension 1005) and enter an electronic work order. Label the equipment as "unsafe" until it has been serviced.

When disconnecting equipment from the wall outlet, grasp the cord cap and tug gently. Don't grab the power cord and yank it.

Report any electrical problem with the wall outlet to the supervisor of the Electrical Shop in the Facility Management Service Center (extension 4550).

Keep cables and cords protected from oil, chemicals, liquids, or sharp objects to prevent damage.

Arrange equipment cords and cables away from traffic-keep them off of the stairs and out of aisles.

Unless specifically part of your job assignment, never open panel boxes, reset circuit breakers or change fuses.

Make sure electrical cords do not pose a trip hazard. To prevent electrical shocks and fires, check for damaged plugs and/or pinched wires.

Do not allow equipment or beds to roll over power cords.

If an instrument or piece of equipment is malfunctioning, has been dropped, or has had liquid spilled on it, disconnect the power cord from the wall outlet and report it to Biomedical Engineering (extension 1005). Also enter an electronic work order, and label the equipment as "unsafe" until it has been serviced.

Equipment Used in the Patient Care Vicinity -- Prior to using equipment that may come in contact with a patient, check inspection sticker to verify that the inspection due date has not expired. If the date has expired, or there is no inspection sticker, notify Biomedical Engineering (extension 1005 or 1210) as soon as possible, and enter an electronic work order (EWO) to have the equipment inspected.

X. Utility Systems

Utility systems in the medical center include heating, cooling, medical gas, plumbing, and electricity.

For problems with any of these systems, call extension 1043.

The medical gas systems include oxygen, vacuum, medical air, nitrous oxide, and nitrogen. The oxygen system is the only valve that can be shut off by the nursing supervisor. Vacuum and Medical Air are systems controlled by pumps and compressors in the buildings penthouse (if a problem occurs, these are controlled from the Boiler Plant). The Nitrous Oxide and Nitrogen are specialized systems located in isolated areas of the medical center (if problems occur, the Boiler Plant can get the appropriate support to respond).

Emergency power outlets are the red outlets located in every building. These are to be accessed only for operating equipment that must not sustain interruption in the event of a power outage. Emergency power is supplied to these outlets by emergency electrical generators within ten seconds when the need occurs. The generators are tested monthly to ensure proper operation.

XI. Medical Equipment Management Program

Supervisors are responsible to work with their employees to develop a list of equipment and machines that requires operational training. Supervisors are responsible for providing the training and documenting its completion. Employees, non-paid employees, students, and residents must inform their supervisors if they are not properly trained to operate a piece of equipment or machine.

Medical Equipment

All operators of medical equipment are required to meet the following requirements:

Training -- Be properly trained and knowledgeable about the proper and safe use of the equipment they operate. Inform your supervisor if you are not familiar with a piece of equipment.

Operators Manual -- Have a user's manual readily available for reference. All employees who operate the equipment must know the location of the manual and have access to it.

User Maintenance -- Perform all user-specified maintenance, and document the maintenance if required by regulatory bodies (e.g., JCAHO, CAP, etc.).

Electrical Safety Tags -- Electrical equipment that is used in the patient care vicinity should have a green tag indicating that it has been tested and is safe for use. If this tag is out of date then a work order should be entered to have it inspected.

Work Orders -- Equipment users should be familiar with Electronic Work Order system, and enter an electronic work order whenever they have equipment that needs maintenance or repairs.

Backup procedures -- If critical equipment fails, all operators must be knowledgeable about the backup procedures in their department, and what clinical interventions should be initiated in the event of equipment failure.

Machines

Each of us comes in contact with electrical and mechanical machines, including power and hand tools. The following are general practices to reduce accidents.

Never operate a machine or a piece of equipment until instructed in safe operation.

Make absolutely certain that all personnel are clear of the machine or equipment before it is started. Walk around it, if necessary, and/or give the proper warning signal before starting.

Do not operate machines without appropriate guards. Machine guards have been installed for safety. Keep them in place when the machine is operating and replace any missing guards that have been removed for repair or adjustment. Missing, or inadequate guards should be reported to the supervisor immediately.

Turn off the equipment before machine repairs or adjustments are made. There are not exceptions to this practice.

Personal protective equipment, such as gloves, safety glasses, ear protection, hard hats, safety clothing, etc. may be required in certain operations. The supervisor will provide the personal protection equipment necessary for each job.

XII. Life Safety and Fire Prevention

Fire extinguishers are available in designated areas. Learn the location and proper use of fire extinguishers and fire alarm pull stations in your work area.

Passageways and work areas around fire extinguishers and pull stations must be kept clear at all times. The fire alarm pull stations are frequently located near exit doors and exit stairwells.

Extinguishers that appear to have been used or tampered with should be reported to the Fire Safety Officer (extension 4533).

No open flames or smoking are permitted except in designated areas.

Exit doors will not be obstructed. Know the nearest exit in your work area.

Report fires by activating the nearest pull station. Once the pull station has been activated, contact the Boiler Plant to report the fire by dialing extension 4400. The following information should be reported to the Boiler Plant Operator that answers extension 4400: Your name, exact location of fire (including room number), type of fire, and size of fire. Do not attempt to extinguish a fire until personnel in immediate fire area have been evacuated, pull station has been activated, the fire has been reported, and open doors in fire area have been closed. Do not attempt to extinguish a fire unless you know how to operate the extinguisher, the fire is small and you can fight the fire with your back to the exit.

Be alert in recognizing fire hazards and fire prevention. If you hear a fire alarm in your work area, you should immediately check your area for smoke, flames, sprinkler system activation, or any sign of fire. If a fire or any fire symptoms are observed, you should alert the other employees in your area by saying "Code Red" and the location of the fire. After notifying your coworkers there is a fire in the area, the **R.A.C.E.** procedure described below should be followed.

Know fire and evacuation plans for the work site. Your supervisor will provide you with site-specific fire safety procedures.

Fire Procedure (R.A.C.E.)

Rescue: Rescue anyone who is in immediate danger from the fire.

Remove these people to the closest safe area. Simultaneously, notify other staff of the fire by stating "Code Red" and the location of the fire.

Alarm: Sound the fire alarm by activating the nearest pull station, dialing 4400, and following the fire reporting procedures listed in paragraph I. E. above.

Confine: Confine the fire by closing all the doors in and around the fire area. Do not turn off the lights.

Extinguish: Extinguish the fire by using a portable fire extinguisher if safe to do so. If it is not safe to extinguish the fire, you should follow site-specific evacuation procedure when directed to do so. The evacuation of any area would be at the direction of the most senior person in charge.

Operating Portable Fire Extinguisher (P.A.S.S.)

Pull: Pull the pin.

Aim: Aim the nozzle or cone at the base of the fire.

Squeeze: Squeeze the handle.

Sweep: Sweep the nozzle from side to side at the base of the fire.

* PASS will work for most fire extinguishers. However, one must become familiar with all fire extinguishers in the work area.

Standardized Emergency Codes

Cardiac arrest and Respiratory arrest:

Dial the # symbol and 6666 for buildings 1, 14, and Ward 3A.

Dial 9-911 for all other buildings, trailers, tunnels, and VA grounds

Fire

Activate pull station and dial 4400. Follow fire reporting procedures described above.

Disruptive behavior requiring Professional assistance

Dial 1414 (VA Security Police).

XIII. Emergency Management and Disaster Planning

It is the responsibility of each employee, non-paid employee, contractor employee, student, and resident to become familiar with the Facility Emergency Preparedness Plan. In particular, each should know what role their specific department plays, what the internal traffic flow is to be, where the main areas of Disaster Control are, and how they can get into the hospital if they are called from home.

The Emergency Preparedness Plan includes action plans specific for each department in the hospital. The action plan describes each department's responsibility whenever the Emergency Preparedness Plan is implemented. It must be noted that the action plans provide a framework for response and are not necessarily written to limit the activity of the department. In fact, all individuals responsible for the implementation of the Emergency Preparedness Plan must remain flexible in managing their areas of responsibility during the disaster.

Over the years, the Wasatch Front has experienced a variety of disaster events such as floods and tornados, but the most likely natural event that would affect our medical center would be an earthquake. Due to all of these types of natural disasters in our area, our Emergency Preparedness Plan and your knowledge of this plan is very important.

XIV. Office Safety

Do not use a chair, box, desk, table, or unstable material in place of a ladder, or step stool.

The drawers of desks and file cabinets should be closed when left unattended.

No more than one file drawer should be opened at any time.

File cabinets should be appropriately loaded from the bottom drawer up, to prevent tipping.

Office equipment and appliances shall be maintained free of splinters, burrs, and other conditions, which might cause an accident or personal injury.

Do not operate office equipment without proper instructions.

Report all unsafe conditions to the supervisor immediately. Include chairs with broken wheels, arms, or back connections.

Remember that chairs with wheels can be hazardous. Always use care when sitting to ensure the chair is under you. Hold onto arm rests on the chair seat to prevent the chair from rolling out from under you.

XV. VA Police and Security Services

Statement

The success of this Medical Center's Police posture largely depends upon the watchful eyes of everyone. Whatever immediate action you do in the early phase of an incident or situation may well determine whether the final outcome has a positive or negative nature.

Responsibilities

As members of this Medical Center's staff, you are tasked with certain "security-oriented" responsibilities. They include, but are not limited to, the following circumstances:

Should any crisis or emergency situation arise, contact the VA Police immediately at telephone extension 4444.

When reporting any incidents or situations to the VA Police be prepared to give the data in a who, what, when, where, why, and how format. This will assist responding Officers in their response to your request for assistance.

Ensure that office doors, and desks are locked when you are not there. Log off of all computer equipment when the application that you are running is no longer needed. Secure all personal items of clothing, day planners, purses, backpacks, and other items that are subject to pilferage. Do not allow yourself to become complacent with your own physical security needs, stay alert and be observant of your working environment.

All employees, non-paid employees, students, and residents must process through the VA Police Service at their time of hire, and register their privately owned vehicle. Should you require special reserve parking (physically disabled), or you wish to participate in a carpool ride share program, please contact the VA Chief of Police at telephone extension 4628. If you have any non-emergency questions regarding station security or police matters, please contact the VA Police at (801) 582-1565, extension 1414, or (801) 584-1287.

The VA Police are here to protect and serve you!

Identification Badges

Picture identification badges can be obtained from the Library with appropriate documentation and authorization.

XVI. Bomb Threats

Terror Calling: How to handle bomb threats

- * Bomb threats are more likely following the discovery of a suspicious package.
- * Stay calm; be courteous to the caller; listen and do not interrupt
- * Use a pre-arranged hand signal to warn others that the call is a bomb threat
- * Have someone notify VA Police ext 4444
- * Record the time and date of the call
- * Try to make note of the exact words the caller uses; these can help identify the nature of the threat

Terror Calling: Some questions to attempt to ask bomb threat callers

- * When is the bomb going to explode?
- * Where is the bomb right now?
- * What kind of bomb is it?
- * What does the bomb look like?
- * Why did you place the bomb?

Terror Calling: Verbal clues to a bomb threat caller's identity

- * Is the caller male or female?
- * Is the caller an adult or juvenile? How old does the caller appear to be, from the sound of his voice?
- * Does the caller sound local? Does he have an accent?
- * Is the caller's language good or poor? Does he use slang, obscenities or foul language?
- * Is the caller's voice notably loud or soft? Deep or high? Raspy or pleasant sounding?
- * Does the caller's voice have a nasal sound, a stutter, a slur or a lisp?
- * Does the caller speak fast or slow? Is his speech distorted or distinct?
- * Is the caller angry or calm? Irrational or deliberate? Emotional or self-righteous? Is he laughing?

Terror Calling: Verbal clues to a bomb threat caller's disposition and location

- * Does the caller appear to be under the influence of alcohol or drugs?
- * Is the caller incoherent?
- * Is the background of the call loud or quiet?
- * Are there other voices in the background?
- * Are there sounds in the background, such as aircraft, machinery, street noises, office equipment, animals or music?

Terror Calling: What to do after the call

- * **DO NOT HANG THE PHONE UP, LEAVE IT OFF THE HOOK UNTIL THE POLICE ARRIVE**
- * Remain Calm
- * Immediately notify the VA Police at ext. 4444
- * Immediately complete the Bomb Threat Check Sheet
- * Make yourself available to be interviewed by the VA Police or other Law Enforcement Officials

Remember:

Never search suspicious packages - ***LEAVE THEM FOR THE EXPERTS!***

Reference: Memorandum 07.03 "Bomb Threat Response Procedures"

XVII. Cell Phone Use and Restrictions

It's all about patient safety!

Radio Frequency (RF) producing devices can interfere with medical equipment. The intent of our cell phone policy is to restrict the use of cell phones and two-way radios only in those areas where usage presents an unacceptable risk to our patients.

We recognize there are circumstances where cell phones and two-way radios may be necessary to provide patient care. We also do not want to unnecessarily restrict cell phone use for our patients and visitors. Still cell phone use must be restricted in some areas to ensure patient safety.

Restricted Areas:

Cell phones are to be turned off in restricted areas unless you formally request and receive a waiver. You can reference policy memorandum 138.36 for additional details. The following areas are currently defined as restricted areas:

- * Operating Rooms
- * Recovery
- * SICU
- * MICU
- * CCU/Telemetry
- * ECU (monitored rooms)
- * Cardiac Catheterization Labs
- * Special Procedure Rooms in Imaging
- * Gamma camera rooms in Imaging
- * Waiting rooms in Imaging
- * Dialysis

Definition:

These restrictions apply to cellular phones, two-way communication devices such as FRS radios (walkie-talkies), two-way pagers, wireless personal data assistants, wireless LAN (Local Area Network) laptops, RF barcode scanners, and any other device that is designed to operate as a communications device via emission of radio frequency energy.

Applicability:

This policy applies to all hospital staff: Paid employees, contract staff, contract non-paid staff, students, trainees, and incentive therapy patients.

Exceptions:

Use of radios or cellular telephones during emergencies or to conduct essential VASLCHCS business, when no feasible alternative is available, is permitted. Operation in close proximity to medical equipment should be minimized as much as possible.

Contact:

If you are unsure if a device emits RF energy, contact the Biomedical Engineer at extension 4451 for clarification. Do not make assumptions that could endanger our patients.

XVIII. Sexual Harassment

Statement

It is the policy of the VASLCHCS that sexual harassment is unacceptable conduct in the workplace and will not be condoned. Personnel management within the VASLCHCS shall be implemented free from prohibited personnel practices and consistent with merit system principles as outlined in the provisions of the Civil Service Reform Act of 1978. All VASLCHCS employees should avoid conduct, which undermines these merit principles. This policy applies to all employees and covers employees outside of the workplace while conducting government business, and non-employees while conducting business in the VA workplace.

Definitions

Sexual harassment is a form of employee misconduct that undermines the integrity of the employment relationship. All employees must be allowed to work in an environment free from sexual overtures. Sexual harassment debilitates morale and interferes in the work productivity of its victims and co-workers.

Sexual harassment is deliberate or repeated unsolicited verbal comments, gestures, or physical contact of a sexual nature, which are unwelcome.

Any employee who participates in deliberate verbal comments, gestures, or physical contact of a sexual nature, which interferes in work productivity is also engaging in sexual harassment.

Within the VASLCHCS, a supervisor who uses implicit or explicit coercive sexual behavior to control, influence, or affect the career, salary, or job of an employee is engaging in sexual harassment. Similarly, an employee of the VASLCHCS who behaves in this manner in the process of conducting agency business is engaging in sexual harassment. The VA Salt Lake City Health Care System supports a zero tolerance for anyone who engages in sexual harassment.

Response:

An employee experiencing or witnessing such acts shall report these acts to his/her immediate supervisor, the EEO Program Manager at extension 4455, Human Resources at extension 2265, or the AFGE Representative at extension 1086.

Resources:

The Employee Assistance Program (EAP) represents a major resource for employees as well as the EEO Program Manager. These programs are provided to assist employees to report incidents and support a zero tolerance. Let's all work together to decrease the possibility of sexual harassment and provide an environment that supports and quality work environment free of sexual harassment.

XVIII. Workplace Violence

Statement

As private citizens, we have all become aware of the apparent increase in violence in our society. Sadly, violence also appears to be increasing in our workplace. These violent acts can occur for a number of reasons and can involve outsiders as well as co-workers.

The VASLCHCS is dedicated to providing a quality work life for our employees. A major component of a quality work life is safety on the job. No one can ensure absolute safety from violence at the workplace. There are simply too many factors involved in these events. However, we can each do our part in decreasing the possibility of workplace violence.

Definitions

Physical attack is defined as an unwanted or hostile physical contact such as hitting, fighting, pushing, shoving or the throwing of objects.

Threat is defined as the expression of a present or future intent to cause physical or mental harm. An expression constitutes a threat without regard to whether the party communicating it has the present ability to do harm and without regard to whether the expression is contingent, conditional or future.

Harassment as it relates to workplace violence is defined as menacing or threatening behavior or communication designed or intended to intimidate, menace or frighten another employee.

Property damage is defined as and includes behavior or acts, which contribute to the destruction or damage of private or government property.

Response:

Workplace violence and threats of violence by any employee will not be acceptable. Acts of violence and threats of violence will be treated as conduct violations and will be met with a response that is compatible with the seriousness of the act in question. In less serious cases, a simple apology or clarification will be needed. In very serious cases, appropriate disciplinary action (even removal) will be called for. In each case due process will be followed and employee rights will be honored.

Reporting:

An employee experiencing or witnessing such acts shall report these acts to his/her immediate supervisor, Human Resources or the police. They may also report the incident to the Manager, EAP, and a member of the SRT or EEO Program Manager. If immediate danger exists, direct intervention by the police will be sought.

Resources:

The Employee Assistance Program (EAP) represents a major resource for employees who might be troubled. Courses are offered at the VASLCHCS on stress management, anger management, and conflict resolution. These courses are available to all employees.

Let's all work together to decrease the possibility of workplace violence and to assure that the VASLCHCS is a safe place to work.

XX. Standards of Ethical Conduct

PRINCIPLES OF ETHICAL CONDUCT FOR GOVERNMENT OFFICERS AND EMPLOYEES (Includes WOC EMPLOYEES)

Executive Order 12674 of April 12, 1989:

"By virtue of the authority vested in me as President by the Constitution and the laws of the United States of America, and in order to establish fair and exacting standards of ethical conduct for all executive branch employees, it is hereby ordered as follows:

"Part I Principles of Ethical Conduct - "Section 101 - Principles of Ethical Conduct:

To ensure that every citizen can have complete confidence in the integrity of the Federal Government, each Federal employee shall respect and adhere to the fundamental principles of ethical service as implemented in regulations promulgated under sections 201 and 301 of this order:

- * Public service is a public trust, requiring employees to place loyalty to the Constitution, the laws, and ethical principles above private gain.
- * Employees shall not hold financial interests that conflict with the conscientious performance of duty.
- * Employees shall not engage in financial transactions using nonpublic Government information or allow the improper use of such information to further any private interest.
- * An employee shall not, except pursuant to such reasonable exceptions as are provided by regulation, solicit or accept any gift or other item of monetary value from any person or entity seeking official action from, doing business with, or conducting activities regulated by the employee's agency, or whose interests may be substantially affected by the performance or nonperformance of the employee's duties.
- * Employees shall put forth honest effort in the performance of their duties.

Brief summary of the major ethics-rules for government employees:

The secretary for your Service has the full text and you are strongly encouraged to take the time to review its contents. The Library also maintains a copy of the full text on its "reserved" shelf for employees to review.

- * A Government employee must place loyalty to the public trust above anyone's private gain.
- * Prevent conflicts of interest ("Don't serve two masters")
- * Avoid the appearance of a conflict of interest ("Employees must be above approach")
- * Restriction on gifts: With some exceptions, an employee must not accept a gift from a prohibited source or given because of the employee's official position (Subpart B)
- * Gifts or favors from patients is restricted
- * Acceptance of gifts from a pharmaceutical or medical supply company or representative is restricted including drug samples, meals, tuition, travel, or per diem
- * Meeting with pharmaceutical representatives must have prior approval and scheduled by Pharmacy
- * Gifts to official superiors are prohibited (Subpart C)
- * An employee must not take any official action that affects his/her financial interest (Subpart D)
- * An employee should not take any official action in circumstances where a reasonable person would question the employee's impartiality in that action (Subpart E)
- * An employee must not take any official action that affects the financial interest of any person or entity with whom the employee is negotiating for employment (Subpart F)
- * An employee must not use his/her public office, including official time, information, property, or endorsements for personal gain or the private gain of anyone (Subpart G)
- * An employee must not engage in any outside employment or outside activity which conflicts with his/her official duties (Subpart H)
- * An employee must comply with all ethics laws and regulations (Subpart I)

When in doubt, seek advice from your supervisor or an ethics counselor or the Ethics Committee.

XXI. JCAHO Patient Safety Goals

"The purpose of the Joint Commission's National Patient Safety Goals is to promote specific improvements in patient safety. The Goals highlight problematic areas in health care and describe evidence and expert-based solutions to these problems."

JCAHO 2006
www.jcaho.org

The VA Salt Lake City Health Care System is committed to providing our patients with the highest Quality of Care in an environment that is SAFE. We do this by focusing on *Continuous Process Improvement* and by supporting a *Culture of Safety*.

- Your role in this commitment is to let us know when Quality and Safety standards and practices are not being followed. Please report this information immediately to:
 - **Salt Lake City: Quality Management Office @ (801) 582-1565 x1900**
- If you feel your concerns are not being addressed at the facility level, you have the right to contact the **Joint Commission at 1-800-994-6610** or you can send an e-mail to: complaint@jcaho.org to report this information.

XXII. Green Environment Management System (GEMC) Awareness Training

What is a Green Environmental Management System?

GEMS is a management tool to improve environmental performance. It is accomplished by the identification of roles, responsibilities and procedures for achieving prevention, compliance and continuous improvement.

The purpose of GEMS is:

- To **enhance** our compliance and management of our programs
- To **commit** to being good stewards of the environment
- To **comply** with all regulations
- To **utilize** practices that eliminate or minimize negative environmental impact.

So what does all this mean to me??

How does your job impact the environment at the Medical Center?

In your job – do you:

- Use, dispose, and/or store paint or solvents?
- Use and dispose of fluorescent light bulbs?
- Use paper, computers, batteries?
- Repair/operate motor vehicles?
- Store waste – hazardous, radiological, or solid?
- Operate a boiler?
- Manage construction projects?
- Work with asbestos?
- Work with ozone depleting substances?
- Use large amounts of electricity or water?
- Purchase chemicals, medical, or other supplies?

If you do any of these tasks:

Your job activities could impact the environment by:

- Causing a spill of hazardous chemicals that could pollute the air, soil, or water
- Causing incorrect storage or disposal of waste that could pollute the soil and water
- Not recycling when possible – which creates more waste in landfills that can pollute soil and water.

Why Do WE Need Environmental Programs?

We need Environmental Programs to prevent potential harmful effects of improper handling of chemical that could create:

- Chemical resistant pest populations
- Negative impacts of chemical management
- Toxic effects of chemicals to non-target organisms
- Excessive use of water resources
- Loss or degradation of wetland resources
- EPA fines for non-compliance
- Contamination of soil and water.

Our current environmental programs include Hazardous Waste, Lead, Asbestos, Mercury, Hazardous Material, Water, and many others.

Each of us is responsible to:

- Use recycled products
- Conserve energy and water
- Prevent pollution – use “green” products
- Prevent unplanned spills
- Make sure we follow organizational and VASLCHCS guidelines on environmental issues.

How can you help?

You can help by:

- Participating in campus-wide recycling efforts
- Use public transportation or participate in a car or van pool
- Conserve energy. Turn off light, computers, appliances, radios and fans before leaving work
- Submitting your suggestions for conservation to the GEMS coordinator.

You have now completed the review of the VA Salt Lake City Health Care System's mandatory training program, *"Providing a Safe and Secure Environment for Health Care" for Non-Clinical Contractors*.

Close this document and go back to the Instruction Page to access the Exam and Answer Sheet