Special Category Volunteer Orientation Booklet

Revised March 2016
Children’s Mission and Vision

As the nation’s children’s hospital, the mission of Children’s National Medical Center is to excel in Care, Advocacy, Research and Education. We accomplish this through:

- Providing a Quality Healthcare Experience for our patients and families.
- Improving Health Outcomes for children regionally, nationally, and internationally.
- Leading the creation of Innovative Solutions to pediatric health challenges.

While working for our organization you are expected to uphold our mission.

As the nation’s children’s hospital, the vision of Children’s National Medical Center will set the standards of excellence for the care of children.

- We will serve as the voice for the most vulnerable among us, or children.
- We will lead the quest to cure some of childhood’s most devastating illnesses.
- We will prepare the nation’s future leaders in child health.
- We will be the children’s hospital against which all others are measured.

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**Child-Centered Vision**

By incorporating feedback from our families, we have developed our first child-centered vision, which looks at the hospital experience through a child's eyes. Healing a child's body, mind and spirit takes more than medicine - it takes a team to fulfill a family's dream.

- My hospital is a bright and happy place that feels like home.
- My providers, my family and I are a team, and everyone’s job is important.
- The way my hospital works was built around me.
- My providers don’t all look alike.
- My hospital is my family’s connection to everything I need for my health, whether they provide it or blaze a trail to it.
Dress Code for Volunteers

In accordance with hospital rules, volunteers are always required to wear their hospital identification badge.

Children’s National has adopted a business casual dress code that allows employees and volunteers to dress more casually. Children’s National requires that all volunteers adhere to the following dress code:

- Pants that extend below the knee: khakis, corduroys, or slacks (may be capri length)
- Skirts: Denim or casual (must be at least knee length)
- Sweaters: Cardigans or pull-over
- Shirts: Blouses, collared shirts, and t-shirts (must be neat and clean with logos appropriate for a children's setting)
- Dresses: Must be at least knee length
- Casual Shoes: Sneakers, loafers, flats, clogs, boating, Crocs, or deck shoes (must be closed-toed)

Children’s National deems the following attire to be inappropriate and therefore must not be worn:

- Leggings or spandex pants without an appropriate length over-layer; skirts or dresses must be at least knee length
- Shorts of any kind
- Shirts: Halters, tank tops, sleeveless or back-less shirts, midriffs (shirts that expose the stomach), or tube tops
- Shoes: Flip Flops, sandals or any type of open-toed shoes, or high-heeled platform shoes
- Hats of any kind
- No smelly lotions, perfumes, or cologne

Special Note: Volunteers are asked to refrain from chewing gum or eating or drinking in front of our patients. Many of our children are on "NPO" status, meaning they are not able to eat or drink. In sympathy with our patients, and to comply with the hospital's emphasis on professional standards, we request that all volunteers comply with this request.

Special Note: Volunteer Services Staff reserves the right to prohibit volunteers to engage in scheduled activities for failure to adhere to dress code. Volunteers may also be sent home for failing to abide by dress code.
General Policies and Information

Workplace Diversity
Children’s National is committed to addressing the health needs of diverse populations by recognizing the value of cultural and ethnic differences. Employees and volunteers of Children’s show respect, sensitivity and an appreciation for cultural and ethnic diversity by seeking to understand and respond to individual differences based on nationality, gender, race, religion, sexual orientation, age etc. in order to enhance the care and work environment.

Appearance and Dress Guidelines
Children’s has adopted a Business Casual Dress Code that allows employees and volunteers to dress more casually. It is up to the Department Manager to decide what is appropriate for his/her area. If a uniform is required for a particular department, the entire uniform should be worn at all times.

In general, the hospital requires the following while on duty:

A. Identification badges must be worn at all times.
B. Men are required to wear socks at all times. No hosiery or stockings are required if women wear slacks or ankle-length skirts or dresses.
C. Attire must be clean and appropriate to the job function and setting. No jeans.
D. Footwear must be clean, polished, securely fitted, and in good condition. No open-toed shoes. Clogs and flip-flops are not permitted.

Professional Conduct
Children’s National has developed a number of professional conduct rules to protect the safety of our patients, volunteers and employees.

The following are examples of unacceptable behavior:

- Eating or drinking in work areas
- Conducting personal grooming in work areas
- Bringing or using alcohol or unauthorized drugs
- Keeping items such as razors, scissors, aerosols and tools within the reach of patients
- Bringing electrical equipment, such as radios
- Bringing or keep valuables at the hospital
- Smoking in unauthorized areas
- Entering patient care areas (unless it is part of your job)
- Using cell phones in patient care areas of the hospital. Cell phones must be turned off when in these areas: parents/guardians can use cell phones in patient rooms provided they keep a 3 foot distance from all patient equipment. Cellular devices closer than 3 feet may negatively affect patient equipment.

Drug-Free Workplace
Children’s National is a drug-free workplace – this means that those working at the facility cannot use illegal drugs under any circumstances on or off-site. Violators will be dismissed.
**Barrier Isolation Precautions**

Barrier precautions mean placing a barrier between the infected individual and other people in order to stop transmission of communicable diseases in the hospital. Employees are required to use isolation precautions when necessary. Contact Infection Control at x5053 for more information.

Barrier Precautions include:
- Private rooms
- Gowns
- Gloves
- Masks or PAPRs

**Harassment/Violence in the Workplace**

We are a harassment-free workplace committed to providing an environment in which the diversity of our workforce is valued and respected. Harassment (including sexual harassment) and violence, whether verbal or physical, are illegal, unacceptable and will not be tolerated. In the event that an individual’s actions become violent and pose a safety risk to the individual or others, security and/or other trained staff may restrain the individual until rational behavior is restored, or help arrives.

**Smoking**

Children’s National is a non-smoking facility. You may not smoke anywhere in the facility. Smoking is a serious fire and life safety factor. Violators will be asked to leave the premises.

Adolescents and children are not permitted to smoke at any time at Children’s or any of its facilities. Staff must document having asked patients if they are smokers and document smoking cessation education was given on the chart.

**Parking**

Paid and unpaid parking is available for staff. Your supervisor will instruct you on parking prior to coming to Children’s National. Park only in authorized areas.

**Security**

The purpose of the security program is to provide a secure environment for all patients, volunteers, employees, medical staff, and visitors through an integrated program of policies and practices which promote and comply with the hospital’s mission, as well as external accreditation and regulatory requirements.

Security is on the premises 24 hours a day, 7 days a week.

**Employee Identification**

Everyone must wear an ID badge. Non-hospital personnel must be cleared by Occupational Health in order to receive a badge. The ID badge forms are found in HR. Security Services create and distribute plastic identification badges.

**Handwashing**

Handwashing is the #1 way to stop the spread of infections. Always follow our handwashing requirements: Wash or sanitize hands before and after any patient or family contact and after touching objects in any patient room. If you have questions about the requirements, please let your supervisor know and they will direct you to the experts.
**Complaint/Grievance Management**

Children’s National recognizes a patient’s right to voice their issues of concern, to express their complaint, and to be provided with a timely and appropriate response. Children’s National expects its staff to resolve routine patient/parent complaints at the point of service. All patient complaints will receive prompt and appropriate responses. When a complaint is not resolved to the customer’s satisfaction or remains unresolved, staff will refer it to the appropriate person in their chain of command (i.e. manager) who will assist. Oral or written grievances submitted by patients, parents, or visitors will be resolved in accordance with federal regulations.

**Cafeteria**

The Cafeteria is located on the 2nd floor and the hours are 6:30am to 7:30pm:

- Breakfast: 6:30am - 10am
- Lunch: 11am - 2:30pm
- Dinner: 3:30pm - 7:30pm

**Corporate Compliance**

Children’s compliance ensures practices that consistently comply with all applicable laws relating to our business activities, and provisions of high quality medical care.

You can help by:

1. Looking out for Fraud and Abuse
2. Reporting Suspected Violations.

<table>
<thead>
<tr>
<th>FRAUD</th>
<th>ABUSE</th>
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<tbody>
<tr>
<td>An act of intentional misinformation or concealment in an effort to device or mislead others.</td>
<td>Incidents or practices that are inconsistent when compared to other sound medical businesses or fiscal practices.</td>
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</tbody>
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These incidents or practices may directly or indirectly result in unprofessional and medically unnecessary program costs or improper reimbursement of services.

All Employees, Contractors and Volunteers must report suspected violations. No staff member or volunteer will be disciplined because he/she made a report in good faith. Every effort will be made to maintain confidentiality of the staff member making the report.

**What to Report?**

If it doesn’t feel or sound right, chances are it’s NOT right!

Remember to provide details (Who, What, When, Where, Why, & How).

**Where Do You Report It?**

Reports can be made two ways:

1. Your supervisor
2. Compliance Officer @ ext. 6464
The Joint Commission National Patient Safety Goals
The Joint Commission identifies several National Patient Safety Goals. The goals that apply to medical facilities such as Children’s are:

- Improve the accuracy of patient identification
- Improve the effectiveness of communication among caregivers
- Improve the safety of using medications
- Reduce the risk of health care-associated infections
- Accurately and completely reconcile medications across
- Reduce the risk of patient harm resulting from falls
- Encourage patient’s active involvement in their own care
- Identify the safety risks inherent in patients
- Universal Protocol to eliminate wrong-site, wrong-patient, wrong-procedure

Patient Identification at Children’s
To ensure accuracy in patient identification; we verify at least two patient identifiers prior to treatment and testing

- Patient Name
- Medical Record Number

Patient ID bands should be applied at registration if possible

- When ID band must be changed or moved, the old band should be removed after the new band has been validated and applied

Intellectual Property
Works of authorship, technical discoveries, inventions, marks or other items of commercial interest created by or resulting from research or investigations conducted by Children's National staff (including employees, faculty members, fellows, residents, consultants, trainees, students, and volunteers) on Children's National time or by anyone utilizing Children's National resources shall become the property of Children's National (or other appropriate Children's National subsidiary and affiliate) or its assignee. Children's National reserves the right to protect, by patent, copyright, servicemarks, trademarks or other appropriate intellectual property protection such discoveries or inventions and works of authorship.

Back Safety and Musculoskeletal Disorders
Back injury is one of the most common, most expensive and most preventable injuries in the workplace. There are five simple steps that can be taken to prevent back and musculoskeletal injuries:

1. Maintain proper posture
2. Take mini-breaks
3. Lift properly
4. Stretch
5. Exercise
**Chemical Hazards**

Many products have some hazardous components that require special precaution. These chemicals may give off toxic fumes that can affect you, our patients and staff.

Take these precautions when handling hazardous chemicals:

1. Read all labels carefully before using products in the hospital
2. Always wear appropriate Personal Protective Equipment (PPE) such as gloves, mask or PAPR, gown, and eye protection
3. Make sure every chemical container has a label
   a. ALWAYS label any chemical you transfer into another container with the same information that is on the original product label
4. Never use a product in an unmarked container
5. Control fumes and hazards
6. Dispose of waste properly (waste chemicals should be taken to EVS for proper disposal call x2044 for additional information)

OSHA has adopted the Global Harmonization System for labeling hazardous chemicals. GHS uses pictograms along with information on labels to communicate types of hazards, as follows:

![Physical Hazards](image1)

![Health & Environmental Hazards](image2)
A sample GHS label looks like this:

Standard symbols for doors to rooms containing large amounts of hazardous chemicals are:

<table>
<thead>
<tr>
<th>Color</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>RED</td>
<td>Flammability</td>
</tr>
<tr>
<td>BLUE</td>
<td>Health</td>
</tr>
<tr>
<td>YELLOW</td>
<td>Reactivity</td>
</tr>
<tr>
<td>WHITE</td>
<td>Specific Hazard</td>
</tr>
<tr>
<td></td>
<td>such as OX for oxidizer, or W for</td>
</tr>
<tr>
<td></td>
<td>chemicals not mixed with water.</td>
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</tbody>
</table>

Numeric rating: 0= no hazard, 4= high hazard rating

If you have a question, ask the Volunteer Director or Director of Safety & Emergency Management.

**Chemical Spills**
If a product with a hazardous component spills, two special precautions should be taken:
1. Immediately report the spill to Environmental Services by paging 0412. If no response, call ext. 2044 from 7AM to 4:30 PM. After 4:30 PM please call the 8301 ASCOM phone for the EVS Supervisor.
2. Do not attempt to clean up the spill yourself unless you have been specifically trained to do so

**Safety Data Sheets**
In accordance with Occupational Safety & Health Administration’s “Right to Know” rule, you have the right to know about the chemical hazards you may face on the job. Safety Data Sheets (SDS) are available on the Intranet and Safety office.

SDS sheets detail:
- chemical ingredients
- dangers, health hazards
- emergency response actions
- safe handling procedures and PPE
- proper disposal

Read carefully before using any chemical(s). Let your supervisor know if you have any questions.
Hazards

Types of Hazards

There are many types of hazards found in medical facilities. However, this orientation booklet will concentrate on the hazards that mainly affect our organization. When working in hospitals, clinics, or any other medical facility, there may be hazards such as bloodborne pathogens that require special attention. By reading the following information on hazards you can help create a safer environment for our patients, visitors, and employees.

Patient Equipment

Patient Equipment must be handled only by authorized personnel. Red electrical outlets are only used for patient care equipment and are connected to the emergency generators. If equipment breaks, immediately discontinue use, label as defective and notify the supervisor. If you have not been specifically trained and authorized to operate patient equipment, do not touch them. If you have a concern about a piece of patient equipment, contact a nurse immediately.

Biohazards

A biohazard symbol is used at Children’s National to designate objects which are contaminated with blood or other bodily fluids. A bloodborne pathogen could be present - Avoid contact with these containers. Medical waste should be placed in a bio-hazardous bag. Likewise, any waste that you produce which you know is biohazardous must be placed into specially labeled containers for proper disposal.

Bloodborne Pathogens

Blood and body fluids can contain a wide variety of hazardous agents.

If directly exposed to blood or other bodily fluids:

- Clean the area with soap and water
- Notify the staff supervisor and contact Occupational Health at x2035
- Complete a Visitor Accident/Variance Report

If exposure to any blood or body fluids occurs after regular business hours, have the operator contact the on-site Nursing Administrator in charge.

Latex

A Latex allergy is a physical reaction by the immune system to certain proteins in latex rubber. There are different levels of allergic reactions to latex, ranging from mild to severe. Symptoms may include itchy skin or eyes, hives, headache, nausea and vomiting, shortness of breath, swollen hands, feet, lips and/or throat, and other symptoms. Seek medical attention if you notice any signs of an allergic response. Use non-latex gloves to reduce your exposure.

NOTE: Latex balloons are NOT allowed anywhere in the hospital.
**Slips, Trips, and Falls**
- Be careful when walking
- Wear footwear that provides good tread and foot support
- Please watch for trip, slip and fall hazards - Report them as soon as possible

**Radiation Safety**
In the hospital and clinics you will see these symbols in areas at risk of alpha, beta or gamma radiation. Always ask before working in these areas.

Samples of Radiation signs:

![Radiation Signs](image)

**Electrical Safety**
Control of hazardous energy is important, including proper handling of electrical cords and outlets. Remove damaged cords from service and report them. Do not overload outlets. Do not bring extension cords into the facility. Red electrical outlets are connected to the emergency generators and are only used for patient care equipment. Patient care equipment should always be plugged into red outlets. Ask your supervisor if you have any questions about red outlets.

**Flammable Products**
All flammable products must be labeled flammable. Extreme caution should be used when transporting, using and storing flammable items. Storage of these items require placement in a designated room or cabinet. When bringing a flammable product onto our premises Children’s requires you to take the product with you when you leave each day (i.e. propane or acetylene for hotwork). Contractors must secure acetylene and other compressed tanks at ALL times.

**Preventing and Reporting Accidents**
You are the most important element in preventing workplace injuries, illnesses, accidents or incidents. You should be aware of all hazards within your work environment. If you recognize a hazardous situation or condition, please report it as soon as possible so we can take immediate action. If you are injured, report it promptly to your staff supervisor and contact Occupational Health at x2035. Complete a Visitor Accident/Variance Report form.
Emergency and Disaster Management

To communicate clearly to staff in case of emergencies, a Disaster Code system has been developed by Children’s National. Please pay special attention to the information provided with emergency codes.

**Overhead Announcements**
- Always pay attention to overhead announcements!
- When a disaster or emergency occurs, the hospital often communicates to all personnel using the overhead paging system
- For your safety and the safety of our patients please pay attention to the emergency code alerts

**Emergency Code Alerts**
- **Code Blue** = Cardiac Arrest (hospital call 2222, extended campus call 911)
- **Code Pink** = Infant/Child Abduction (hospital call 2222, extended campus call 911)
- **Code Red** = Fire (hospital call 3473, extended campus call 911)
- **Code Yellow** = Caution Status
- **Code ALL CLEAR** = All Clear
- **Code Orange** = Mass Casualty
- **Code White** = Bomb, Threat, Suspicious Package (call 2222, extended campus call 911)
- **Code Gray** = Tornado Warning
- **Code Purple** = Shelter in place due to hazardous threat
- **Code Green** = Decon Team Activation
- **Code Black** = Evacuation
- **Code Navy** = Biological / Pandemic Plan
- **Code Silver** = Hostage / Weapon Situation
- **Code Copper** = Security Needs Assistance
- **Code Brown** = Campus Lockdown

**Code Blue = Cardiopulmonary Arrest**
A person has gone into cardiac (heart) or respiratory (lungs) arrest. Within the hospital call x2222 and activate the room’s code blue button. Once notified, the Code Blue team responds to the location with a crash cart. All non-essential individuals should keep clear the area. Non-hospital campus locations call 911.

**Code Pink = Possible Infant/Child Abduction**
If you need to report a missing child/possible abduction at the hospital call x2222 and provide the operator with as much descriptive information on the child and abductor as you can. If you hear a Code Pink announced overhead, listen for the description of the child and abductor (if available) and search your immediate area for persons matching the descriptions. Remain where you are. If there are exit doors, stairs or elevators in the area ask anyone in your area attempting to leave your area to please remain.

Anyone who insists on leaving an area must be reported to Security immediately, when reporting include exit route and description of individual(s). Do not attempt to stop them yourself. Wait for further instruction. Non-hospital campus locations call 911 to report a suspected abduction, provide descriptive information and follow police instructions.
**Code Orange = Mass Casualty Incident**
A Mass Casualty Incident (MCI) has occurred and the hospital expects a large number of victims to arrive in the Emergency Department, the hospital will be busy assisting the victims. The facility will be immediately put in partial lockdown and you will need your ID badge to enter. Report to your duty station or the department that contracted your service and wait for further instruction. Do not speak to the media, refer media inquiries to the Public Information Officer.

**Code Gray = Tornado Warning**
A tornado warning has been issued in the vicinity of the facility, all persons should prepare for a tornado immediately. Evacuate from rooms with windows into the corridors, stand close to corridor walls and close the doors to the evacuated rooms for protection from flying glass. If patients cannot be safely moved from rooms, protect them with pillows and/or blankets as instructed by the service that contracted you. Wait for further instruction.

**Code Yellow = Caution**
Following a Code Red, Code Yellow indicates the Fire Response Team has ruled out an active fire and is continuing to investigate/resolve the alarm. Listen for further announcements. When Code Yellow is announced WITHOUT a Code Red, it indicates that you should remain fire safety cautious as one or more components of the fire system are out of service. The ALL CLEAR will be given when the fire system is back in service.

**Code Red = Fire**
A fire situation has been detected in the facility. If a fire occurs in another unit on your floor, you are required to prepare your department to receive evacuees. Corridors must be immediately cleared of objects.

Follow RACE if you find a fire:
- **R**escue people in immediate danger
- **A**larm by calling x3473 (911 for extended campus) and activate pull station
- **C**ontain by closing all doors
- **E**xtinguish (if possible) or **E**vacuate

The Fire Response Team responds to all Code Reds in the hospital.

**Using a Fire Extinguisher**
If you need to use a fire extinguisher, follow PASS:
- **P**ull the extinguisher pin. Stand back 10 feet. Keep your back to an exit for escape.
- **A**im at the base of the fire at the leading edge of the fire.
- **S**queeze the handles together.
- **S**weep slowly back and forth.

**Code All Clear = All Clear**
Informs staff that the emergency is over, return to normal operation
**Code Purple = Incident involving Nuclear, Biological or Chemical Agents**

In case of an incident involving nuclear, biological or chemical agents possibly requiring victim decontamination, the facility will immediately be put into lockdown. Do not attempt to leave or allow anyone to enter the hospital – this is necessary to avoid contaminants entering the building. Building air intakes will be closed; hoods vented to the outside must be shutdown and closed. Report to the department that contracted your service and wait for further instructions.

**Code Green = Decontamination Team Activation**

In an event involving Nuclear Biological or chemical agents, fully trained (hospital) Decon Team members will respond. Decon Team members must immediately notify their supervisor, then report immediately to the Decon area. Under NO circumstances are contaminated victims allowed into the hospital prior to decon, as this places the entire facility at risk.

**Code Black = Evacuation**

Evacuation may be necessary due to fire or other causes. Hospitals try to limit the amount of patient displacement by first attempting horizontal evacuation (move to a different smoke compartment on the same floor) whenever possible. Vertical evacuation (move patients to a completely different floor) is the second option, depending on the circumstances. The last resort would be moving patients entirely out of the building. Many of our patients require special handling; nursing will take charge of patient evacuation needs. Notify your supervisor and if possible, report to the nearest unit charge nurse for instructions. Always use the stairs (in a fire situation smoke can travel up the elevator shaft, just like a chimney)!!

Non-hospital locations (except Ambulatory Surgical Center) must totally evacuate the building when a fire alarm sounds, as there are no smoke compartments (i.e., no horizontal fire evacuation area).

**Code White = Bomb Threat/Suspicious Package**

(Hospital call x2222, extended campus call 911) A written or verbal bomb threat has been received, or a suspicious object found. Do not use electrical equipment, including 2 way radios and pagers. Immediately search your work area – Do not touch suspicious objects.

If you receive a verbal bomb threat check the phone for caller ID and ask who, what, when, where, and why and call your emergency number immediately. Record the caller’s words and background noises. If the location is known, it may be a silent code. For written threats, handle the note as little as possible, report it immediately.

Preparedness includes daily awareness of any suspicious activity or objects. Please report any suspicious activity or objects to x2222 (hospital) or to your supervisor (locations off hospital campus) and call 911.

**Code Silver = Hostage / Weapon Situation**

If you become aware of a hostage incident, retreat to a safe place. Contact Security at x2065 (hospital) or the police via 911 (extended campus locations). Provide the officer with as much information as you can, including your location, weapons if known, number of hostages and/or hostage takers, description of perpetrator(s). All other personnel should avoid the area.
**Code Navy = Biological / Pandemic Plan**
Ongoing monitoring for early outbreak detection, possible outbreaks are assessed, threat determined. Action plans are developed and implemented. Use the Incident Command structure. This alert may include pre-screening of persons entering facility, may include donning masks/PPE. Decon shower rooms have negative pressure, which may be used as screening entry portal to the facility. All personnel are encouraged to get a flu shot.

**Code Copper = Security Needs Assistance**
ONLY Security personnel may call a Code Copper. Engineering & EVS may be used for crowd control during disasters. Only those pre-trained should respond.

**Code Brown = Campus Lockdown**
Lockdown of all exits and entrances is initiated in response to an event (internal or external) that may threaten occupants of the building; do not attempt to leave the building. This is a collaborative response involving all four hospitals on our campus. Report to the department that contracted your service and wait for further instructions.

**Emergency Telephone Numbers**
Children’s National has telephone numbers that you can call to report hazardous conditions, emergencies, and accidents/incidents.

These numbers can be found on yellow stickers on all hospital phones.

- STAT / Disasters x2222
- Fire x3473
- Security x2065 (or 2066)
- Engineering Control x6040

Additional resource numbers are:

- Hazardous Material Spills page 0412 (hospital EVS Supervisor)
- Needle Stick Hotline x6699
- CAT Team (hospital) x2222
- Disaster information line / weather update line x4444
- Operator/Communication x5000

Extended campus locations should notify their supervisor of any situations and call 911 for emergency help.
Restraint/Seclusion

Restraint is defined as any method of physically restricting a person’s freedom of movement, physical activity or normal access to his or her body.

Seclusion is defined as involuntary confinement of a person alone in a room where the person is physically prevented from leaving.

Administrative Restraint/Seclusion

Administrative restraints are measures used by forensic staff for legal or disciplinary purposes. Administrative restraints are used for restriction according to forensic criteria. Non-clinical restraint or seclusion must be discussed with patient care provider.

Should care require the release of administrative restraint or release from administrative seclusion, forensic staff will collaborate with the patient care provider and security on the safest means for carrying out the required procedures. Hospital security will assist the agency officer during this process and maintain presence until restraints are back in place.

Clinical Justification of Restraint/Seclusion

The clinical staff utilizes clinical restraints in order to protect the patient from immediate danger to self or others. The nurse, with the assistance of hospital security or others whose competence has been demonstrated in the application of restraints may initiate restraint, or place the patient into the designated seclusion room. If the institutionalized patient requires restraints for clinical purposes, Children’s policy on the use of restraints will be followed.

Privacy and HIPAA

What is HIPAA?
The Health Insurance Portability and Accountability Act (HIPAA) is a Law that passed in 1996. HIPAA regulates healthcare providers, payers electronic clearinghouses.

The Federal Department of Health and Human Services enforces HIPAA. Office of Civil Rights and the Centers for Medicare and Medicaid Services share the enforcement responsibilities.

The Federal law has several significant aspects:

A. Portability – Allows employees to move from employer to employer and not loose insurance coverage due to pre-existing conditions.

B. Administrative Simplification – Allows for the development of efficient and effective administrative standards.

C. Transaction Standards – Adopts new national standards for 8 electronic transactions including claims and payments, codes and identifiers.

D. Security – Requires secure systems for information exchange.

E. Privacy – Defines new standard practices to protect patient information.

F. Fraud and Abuse – Expands CMS’ ability to investigate fraud abuse and system security under HIPAA.
PROTECT SYSTEM SECURITY AND DO NOT SHARE YOUR PASSWORD

If you have not been assigned a system password, do not request access to a fellow staff member’s password. Talk with your manager about your need for information.

Protected Health Information (PHI)

All medical and personal information should be considered confidential. This includes all demographic information (names, phone numbers, or addresses for example) and all clinical information (including appointments, diagnosis, care plans, medications and treatments).

“…The term Health Information means any information whether oral, or recorded in any form or medium, that is created or received by a health care provider, health plan, public health authority, employer, life insurer, school or university or healthcare clearinghouse; and relates to the past, present or future physical or mental health or condition of an individual or the past, present or future payment for the provision of care to an individual…”

Authentication

HIPAA requires reasonable efforts to authenticate the source of requests for information. The following questions should be asked:

A. Who is the requestor?
B. Why are the particular records needed?
C. How will the records be protected once they are disclosed?
D. Does the patient or his/her representative approve of the disclosure?

Written requests for information should be forwarded to the Medical Records Department for processing. Outbound documents should be sent from the Children’s Medical Records Department. Parents will sign an Authorization for Release of Information form that answers the questions and allows the parent to manage the information. Whenever possible, the information should be given to the parent.

Patient Rights under HIPAA

In protecting privacy, Children’s National will:

1. Get written authorization prior to the disclosure of Private Health Information (PHI) to non-covered entities unless Children’s is required by law to do otherwise
2. Provide patients access to inspect and get copies of their records
3. Allow for the request of restrictions on disclosures of PHI
4. Provide for an accounting of all disclosures should patients request one
5. Allow for the revocation of authorization
6. Accommodate reasonable requests for alternate means of communications

Patients or their representatives can contact our Medical Records department to obtain information regarding record access. The Notice of Privacy Practices is given to every new patient upon registration. The Notice of Privacy Practices is posted on our Web site www.dcchildrens.org. Contact our Children’s Privacy Officer for privacy related issues. The Children’s complaint policy and process is available to all patients. Patients can call our Ombudsman Department 202-476-2885 for help.
Communication Tips to Protect Patient Privacy
The Children’s HIPAA Tips archive is posted on the Children’s Intranet. Here are some answers to frequently asked questions you may have about daily communications under HIPAA:

A. What kind of information is covered under HIPAA?
HIPAA protects private health information that is written, oral or electronic and it includes past, present and future medical and demographic information.

B. Can I FAX under HIPAA? Can I receive a FAX?
Faxing is not prohibited under HIPAA. Take reasonable precautions and use a FAX cover sheet. Make a follow-up phone call to be sure your fax has been received.

C. Can I give out information by phone under HIPAA?
Information required by another covered entity for treatment purposes is appropriate to exchange via phone call. Be sure to authenticate the caller by asking a few questions to be sure of their role in treatment.

D. Can I provide written reports to doctor offices or hospitals under HIPAA?
Information requested by another covered entity for treatment purposes is appropriate to exchange.

Infection Control
Infection Control is designed to reduce the risk of infection to patients, staff and visitors. Infection control is a safety program.

A. HAND WASHING
Hand washing is the #1 way to stop the spread of infections. Proper hand hygiene, is the single most important action employees can do to stop the spread of infections.

Wash your hands with soap and water for a minimum of 15-20 seconds or use the waterless alcohol sanitizers and rub hands until dry. Alcohol based sanitizers are convenient, easy-to-use and better for skin than soap and water. Hand gels are available in many areas throughout the hospital.

Alcohol-based handrubs—put enough foam or gel on your hands to wet all surfaces of hands and wrists. Rub your hands until dry. Don’t forget to get between fingers and under nails.
Soap and water—wet all surfaces of your hands with water, apply enough soap to allow coverage of all hand and wrist surfaces, rub hands together and scrub for a minimum of 15 seconds. Rinse hands thoroughly and dry with a paper towel.

Wash or sanitize your hands before and after patient contact and after contact with objects in the patient’s environment. In some instances, sanitizers should not be used in place of soap and water. It is best to wash with soap and water before eating and drinking, and after using the restroom. If you have questions about these requirements, please let your supervisor know and they will direct you to the experts.

B. STANDARD PRECAUTIONS
Standard precautions require that the health care worker treats all patients as though they may be carrying an infectious disease. Standard precautions are a way of protecting healthcare workers from
direct contact with possible infectious materials. They require the health care worker to wear personal protective equipment when they anticipate contact with blood or body fluids. Under standard precautions, blood and certain other body fluids of ALL patients are considered possibly infectious. The personal protective equipment to be used when coming into contact with blood or other bodily fluids is gowns, gloves, masks, and/or goggles.

When entering a Patient Care area, you must read the signs on the patient doors to find out what Personal Protective Equipment is necessary to use when visiting a patient.

C. STANDARD PRECAUTIONS IN OUTPATIENT AREAS AND IN THE ATRIUM
When engaging in recreational activities with patients in the atrium or in a waiting area, the following precautions should be taken:

- Try to maintain a three foot distance between you and the patient; this will reduce your risk of catching an illness
- Cough or sneeze into the inside of your elbow rather than into the air
- Offer tissues to patients who might need one (i.e. runny nose), and
- Wash your hands before and after working with patients

D. TUBERCULOSIS (TB)
Air droplets breathed into the lungs transmit tuberculosis (TB). Because TB is easy to catch, early detection is extremely important. Remember, if a child has TB, the parent may also have TB. Proper precautions must be taken to protect healthcare workers from possible infection.

Health Care Workers (HCWs) should protect themselves from exposure to TB by following these steps:

- The door to the patient’s room must be kept closed at all times
- All employees entering the room must be trained and fitted to wear a special respirator at all times
- When patients are transported, the patient must wear a mask, and the department to which they are being transported must be notified in advance.

*VOLUNTEERS WILL NEVER BE REQUIRED NOR ASKED TO GO INTO A ROOM WITH A PATIENT WHO HAS TUBERCULOSIS*

E. HUMAN IMMUNODEFICIENCY VIRUS (HIV)
You may come in contact with a child who is positive for the HIV antibody. If you follow standard precautions, you will be protected from HIV and other blood borne pathogens. Remember to wash your hands before and after every patient contact. You may call the Special Immunology Clinic Specialist with any questions. The number for the Special Immunology office is (202) 476-3495.

**Terminology:**

HIV-Human Immunodeficiency Virus
AIDS- Acquired Immunodeficiency Syndrome

**Definition:**

HIV Positive indicates there are antibodies to the HIV virus in the blood. This may mean the person is infected with HIV. Sometimes infants and young children have antibodies in their blood that were transferred from their infected mother. In these cases, the child may not be infected.
**How can HIV be Transmitted?**

1. Through sexual fluids
2. In pregnancy, delivery, or with breastfeeding
3. Through contaminated blood or body fluids

**Spectrum of Disease:**
HIV occurs in many stages from the time a patient becomes infected and does not have symptoms (asymptomatic) to an advanced stage of infections (diagnosis of AIDS) when a patient can be severely symptomatic.

**HOSPITAL INFECTION CONTROL QUESTIONS AND ANSWERS**

**What if I get splashed with blood or bodily fluids?**
1. Wash the site with soap and water
2. Report to your supervisor immediately
3. Follow the Volunteer Services Accident Plan:
   - Remove soiled clothes and put on scrubs. If possible, wipe up soiled spots with antibacterial soap and water BEFORE donning scrubs.
   - Place soiled clothing in plastic bag. Hang bag on Katie and Alicia’s doorknob with your name and telephone number (and name of patient who was involved).
   - Wash hands with soap and water after bagging but BEFORE hanging on doorknob.
   - Your clothes will be laundered/dry cleaned and returned within two weeks.
   - Please return scrubs to office in a bag labeled with your name when you next volunteer.

**What if I get stuck with a needle?**
1. Call the needle stick hotline at (202) 476-6699.
2. Report to the Occupational Health Office as soon as possible during weekdays. If the incident occurs when occupational health is closed, let your supervisor know and page the Administrative Manager on-call to inform them of the accident (202-259-0474). Fill out (1) an Incident Report and (2) an Injury Report (EPINET). The report should include the name of the patient involved, if known. If you are volunteering during the evening or night shift, call Occupational Health (202-476-2035) the following day or Monday morning if the incident occurs on the weekend.

**What do I do if I was in contact with someone who had a contagious disease?**

If you are aware you have been in contact with a patient, visitor or employee who has a contagious disease (before isolation is initiated), you must notify Infection Control at 202-476-5053 and report to the Occupational Health Office as soon as possible. If you are working on the evening or night shift, call the following day. The Occupational Health telephone number is 202-476-2035.