Orientation Handbook
For Volunteers

This handbook will provide you with a helpful overview of important information at Florida Hospital Tampa, Florida Hospital Carrollwood, Florida Hospital at Connerton at Long Term Acute Care and key safety policies.

Description of Facilities:

**Florida Hospital Tampa** – 3100 East Fletcher Avenue, Tampa, Florida 33613 (813) 971-6000

**Florida Hospital Pepin Heart Institute** – 3100 East Fletcher Avenue, Tampa, Florida 33613 (813) 615-7822

**Florida Hospital Carrollwood** – 7171 North Dale Mabry Highway, Tampa, Florida 33614 (813) 932-2222

**Florida Hospital at Connerton at Long Term Acute Care** – 9441 Health Center Drive, Land O’ Lakes, Florida (813) 903-3700

Contacts for Volunteer Services at Florida Hospital Tampa, Florida Hospital Carrollwood and Florida Hospital at Connerton at Long Term Acute Care are:

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Welcome

We are pleased to welcome you as a volunteer to Florida Hospital Tampa, Florida Hospital Carrollwood and Florida Hospital at Connerton at Long Term Acute Care. Your desire and dedication to helping others has enabled you to join a highly valued group of people. All will appreciate your special gift of service.

You have our thanks for your very important and valuable contributions of time and talents. We believe that this experience will be a rewarding one for you.
Health Requirements

All Florida Hospital Tampa Employees and Volunteers have the following requirements for health documentation:

Tuberculosis (TB) Test (PPD): Complete the required TB tests.

Note: If you have ever had a positive TB test, and you have documentation, DO NOT get a TB test. Contact Employee Health for further instructions, otherwise, please follow these steps:

- **Step 1:** Get your first TB test.
- **Step 2:** Have the TB test read by the organization that administered the test. A TB test must be read 48 - 72 hours after it is given. If it is not read within this period, you will have to have it done again.
- **Step 3:** Seven to 14 days after receiving your first TB test, receive a second TB test.
- **Step 4:** Have the second TB test read by the organization that administered the test. REMEMBER, the test must be read 48 - 72 hours after it is given. If it is not read within this period, you will have to have it done again.
- **All volunteers:** If you have had a TB test within the last 6 months, and you can bring us a copy of the test results, we will consider this as step one.

Where Can I get a TB test?

Florida Hospital Tampa - Employee Health, 1st Floor. Hrs M-F 7 AM-Noon & 1-3:15PM.

Florida Hospital Carrollwood – Employee Health 4th Floor, Suite 403, call for appointment 813-558-8095, ext 81035.

LTACH – Employee Health on Tuesdays only, 6:30 AM – 2:30 PM- walk in.

Volunteers under the age of 18 must have written parental/guardian permission for the TB test.

If you prefer to get your TB test on your own, you may do so at a doctor’s office, any walk-in clinic, the Health Department, or your college’s student health center. Please be sure to give us copies of the results for our files.

Employee Health Fax:(813) 615-8101:

- Volunteers must provide proof of vaccination for MMR (measles, mumps and rubella), seasonal flu each year, and whooping cough (TDP or TDAP). We will need a copy of your vaccination records for this. Please fax these to us prior to your interview or bring it to your interview.
• If you or a parent or guardian do not have a copy of your records, you might want to check with your high school (high schools keep these anywhere from 2 – 10 years after you have graduated) or check with your family physician.

• If you are unable to obtain a copy of your vaccination record, we will ask you to get a titer (a blood test) for Rubella and Rubeolla, which we will do in our lab at no charge to you.

Hepatitis B Vaccination

• A Hepatitis B vaccination is recommended but not required. We are not able to offer this vaccination to you.

Service by Adults (Including College Volunteers)

• Acceptance of an adult for volunteer service at all three locations will depend upon the adult’s ability to meet the requirements of the volunteer services program.

• After an interview, volunteer assignments are made according to interest, availability, and ability to fulfill requirements and designated hours.

• All adult volunteers will submit an application, documentation of the health requirements and sign a background check consent form.

• All adult volunteers will complete orientation and safety training prior to starting service. This can be done online, in-person, or hard copies of the orientation are available without internet access.

• Annual updates are required for all adult volunteers for Safety Training, Hippa Training, Confidentiality and PPD (TB test).

Service by Teens

• Teens must be 16 years of age in order to volunteer.

• Registration for the teen program is held in March.

• Acceptance of a teen for volunteer service will be contingent upon the teen’s ability to comply with the requirements of the volunteer service program. Volunteer assignments are made according to interest, availability, and ability to fulfill requirements and designated hours.
• Qualified teens may start volunteering at the beginning of the summer school vacation for three weeks in order to build interest and create an awareness of health care careers.

• All teen volunteers will turn in an application, documentation of the health requirements & a signed parental consent form.

• All teen volunteers will complete an orientation and training session that includes safety, age-specific guidelines, and universal precautions.

• Teen volunteers must take breaks and lunch in the hospital cafeteria and notify their supervisor before doing so. Teen volunteers are not permitted to leave the hospital campus at any time while on duty without written permission from a parent.

Volunteer Bill of Rights

The right to be treated as a team member.

The right to a suitable assignment with consideration for personal preference, temperament, life experience, education and background.

The right to know as much about the organization as possible – the policies, the people, and the programs.

The right to be trusted with necessary confidential information.

The right to continuing education on the assignment as well as follow-up to initial training.

The right to guidance and direction by someone who is experienced, patient, and well-informed.

The right to be heard, to have a part in planning, to feel free to make suggestions, to have respect shown for an honest opinion.

Volunteer Code of Conduct

• **Be Positive:** Display a positive image of Florida Hospital Tampa by demonstrating courteous and professional behavior toward patients, physicians, employees and visitors and by following the values of Florida Hospital Tampa.

• **Be Sure:** Look into your heart and know that you really want to help others. Know your own limits.

• **Be Convinced:** Believe in the value of what you are doing.
• **Accept the Rule:** Don’t criticize what you don’t understand. There may be a good reason.
• **Speak Up:** Ask about things you don’t understand.
• **Be Willing to Learn:** Training is essential to any job well done. Prepare for each assignment.
• **Keep on Learning:** Know all you can about your hospital and your assignment. Use your time wisely; don’t interfere with others’ performance.
• **Welcome Supervision:** Consult with supervisor when unclear on policy or action. You will do a better job and enjoy it more if you are doing what is expected of you.
• **Be Dependable:** Your word is your bond. Do what you have agreed to do. Don’t make promises you can’t or won’t keep.
• **Be a Team Player:** Find a place for yourself ON THE TEAM. Constructive feedback will improve effectiveness.

**Diversity**

One of the goals of Florida Hospital Tampa is to recognize each person’s unique composition of body and soul, which embraces physical, emotional, and spiritual, needs. We consider each person as an individual, and strive at all times to be consistent with our core values of Reverence, Integrity, Compassion and Excellence for all individuals.

What we must do to actively support Diversity:

• Be mindful of your language; avoid stereotypical remarks and challenge those made by others.
• Speak out against jokes and slurs that target others.
• Your silence sends a message that you agree. It is not enough to refuse to laugh.
• Speak up when people take positions that work against understanding and communication.
• Welcome new people into your life and seek opportunities to meet others.
Patient Rights

In accordance with its mission and values, Florida Hospital Tampa treats each patient as a whole, irreplaceable, unique, and worthy person. Patients in this facility enjoy the following rights:

1. The right to considerate care that respects the patient’s personal value and belief systems.
2. The right to receive from his/her physician current information concerning his/her diagnosis, treatment and prognosis in easily understood terms. When it is not medically advisable to give such information to the patient, it should be shared with an appropriate person on his/her behalf. The patient has the right to know the name of the physician responsible for coordinating his/her care.
3. The right to receive from his/her physician information necessary to give informed consents prior to the start of any procedure or treatment. Except in emergencies, the information should include, at minimum, the specific procedure and/or treatment, the significant risks involved and the expected length of recuperation. When alternatives for care or treatment exist, or when the patient inquires about alternatives, the patient has the right to such information. The patient also has the right to know the name of the person responsible for the procedures and/or treatment.
4. The right to refuse treatment to the extent permitted by law and to be informed of the medical consequences of this action.
5. The right to formulate advance directives and appoint a surrogate to make health care decisions on his/her behalf to the extent permitted by law.
6. The right to receive every consideration of privacy and confidentiality concerning his/her own medical care and treatment.
7. The right to expect that all communications and records will be treated as confidential.
8. The right to expect that Florida Hospital Tampa will make a reasonable response to the patient’s request for services.
9. The hospital will provide evaluation, service and/or referral as indicated. The patient may be transferred to another facility only after he/she receives complete information and explanation concerning the needs for and the alternatives to a transfer.
10. The right to obtain information about any relationship of the hospital to other health care and educational institutions which could impact care of the patient. Also, the patient has the right to obtain information concerning any professional relationships among individuals who are providing treatment.
11. The right to know if there are plans for the hospital to engage in or perform human experimentation affecting his/her care or treatment. The patient has the right to refuse to participate in research projects.
12. The right to expect continuity of care and to know in advance what follow up plans and services will be needed after discharge.
13. The right to examine and receive an explanation of his/her bill regardless of the source of payment.
14. The right to know what hospital rules and regulations apply to patient behavior.
Customer Service

Florida Hospital Tampa employees and volunteers are a community of competent and caring individuals. It is the desire of all of us to continue to deserve that reputation. As hospital employees and volunteers, we are the heart of the hospital. We should all conduct ourselves in a professional manner, always taking into consideration the image that is being presented to our guests and fellow team members. We believe that we are here to serve our customers and exceed their expectations by providing the highest quality of service with the utmost care and courtesy. These are some of the ways volunteers can show that they care about our patients, their families, and one another.

Simple Courtesies
- Do not allow anyone to feel ignored.
- Initiate a friendly greeting with immediate eye contact, smile and say “hello.”
- Introduce yourself by your first name. Tell the customer who you are and what you will be doing.
- Name badges should be worn at chest level at all times.
- Address patients as they wish to be called. Do not refer to patients as honey, sweetie, etc. Teen Volunteers: You are expected to address all patients older than yourself as Miss, Mrs., Mr., Dr., etc. unless they request to be called something else!
- Face the patient or family member when speaking, using clear, distinct words.
- Listen attentively and do not interrupt.
- Knock on the patient’s door before entering.
- Observe visitors. If someone appears to need directions, offer to help and take the customer to his or her destination. If you are unable to personally escort a customer, take him or her to someone who can.
- Use the age appropriate communication techniques located on page 11.

Attitude in Action
- Recognize that the people we serve have a sense of urgency, and show we value their time. They are not an interruption of our work; they are our reason for being here.
- Treat every person as if he or she is the most important person at Florida Hospital Tampa.
- Listen carefully and with an open mind to what people have to say. Show a sincere interest. Avoid unnecessary interruptions.
- Be receptive to comments, suggestions, questions and complaints.
- Use good manners.
- Rudeness is never tolerated.
- Meet an individual’s immediate needs, or gladly take him/her to someone who can. Proudly exceed expectations.
- Always be eager to help patients under any circumstances. Never say: “It’s not my job.” Or “I don’t have time.”
• Assists in making sure patients are taken directly to areas you have been assigned to take them to. The patient is your number one priority. Don’t stop to chitchat with a coworker or friend. Your mission is the patient!
• Before leaving, ask, “Is there anything else I can do for you?”

Responsiveness
• Inform staff if a patient needs assistance in any way.
• If the patient has a comment or concern, contact the Volunteer Office.
• Respond quickly; speed of service is the key to satisfaction.

Elevator Etiquette
• Our customers always have the right of way while using elevators and navigating hallways. Use this as an opportunity to make a favorable impression.
• Always transport patients in wheelchairs facing the elevator door
• Do NOT allow patients in beds or stretchers to be surrounded by other visitors or employees – politely ask others to wait for another elevator.

Telephone Etiquette
• Your volunteer assignment is important and valuable to the hospital. Be proud of it! To the caller YOU are the hospital.
• Answer all calls within 3 rings
• Give your department or location
• State your name and that you are a volunteer
• “May I help you?”
• SMILE!
• Explain, “I will locate someone who may be able to help you. Can you please hold? … Thank you”.
• Communicate name of the party you are transferring to and his/her extension destination
• Repeat messages back for accuracy
• Deliver messages promptly
• Always end the conversation pleasantly with “goodbye” or “have a nice day”
• Let the caller hang up first.

Conversations with Patients
Conversations with patients should be limited to cheerful, non-controversial subjects. When visiting patients, do not discuss their illness. Patients may divulge information that is highly personal. Volunteers should listen with compassion and understanding, but should not invite confidences. Volunteers should never offer opinions on personal affairs, medical treatment, administration of medication, choice of physicians or referral of services.
**Concerns**
If a patient or visitor complains about something, don’t argue or offer excuses. Simply say, “I’m sorry you have had difficulty.” Then report it to the appropriate person. Comments or complaints regarding direct patient care should be directed to the charge nurse or unit manager. If the comment/complaint needs to be heard immediately by someone in authority, contact the following offices in this order:

- Unit Manager for the unit that’s affected.
- Volunteer Services Office.
- House Supervisor, call the operator for assistance.

Be a team player. If you, the volunteer, have a complaint or problem, report it immediately to the Director of Volunteer Services.

**Guidelines for Effective Communications for All Age Groups**

- Be patient.
- Take time to listen.
- Show respect with active listening and without passing judgment.
- Convey warmth, understanding and interest.
- Use eye contact.
- Speak clearly and use short sentences.
- Be aware of body language.
- Use a friendly tone.
- Treat everyone with respect and dignity.
- Ask questions when you do not understand.
- Repeat what you think you heard.
- Ask for clarification.
- Report concerns of behavior or language that you do not understand for further interpretation.

Florida Hospital Tampa defines children as follows:

**Infants and Small Children**
- Rely on the parent.
- Approach slowly and calmly.
- Initially allow space between yourself and the child.
- Use quiet soothing voice.
- Position yourself at the child’s eye level.
- Be honest.
• Allow child to hold familiar object.
• Acknowledge positive behaviors no matter how small.

**Older Children and Adolescents**
• Respect privacy.
• Speak clearly and ask if he/she understood.

**Visually Impaired**
• Get person’s attention before talking.
• Identify self before entering the room.
• Explain what you are doing.
• Ask for feedback to check for understanding.
• Assist with eyeglasses.

**Hearing Impaired**
• Get person’s attention before talking.
• Get close to person and speak clearly. Do not shout.
• Face person when talking.
• Speak to side where hearing is best.
• Maintain eye contact.
• Ask for feedback to check for understanding.
• Eliminate unnecessary noises.
• Check if patient wears a hearing aid.
• Use gestures if necessary.
• Avoid looking away while talking.
• If necessary, may need to write.

**General Information and Regulations**

**Attendance**
A volunteer is an important member of our team. Therefore, dependability is the key to a successful volunteer experience. Reporting on time to your assignment is important. If you are unable to volunteer, please contact the volunteer office and the department to which you are assigned. Whenever possible, find a substitute for yourself. Please let us know of your absence as far in advance as possible. The worst thing a volunteer can do is just not show up.

**Awards**
Every year, service awards are presented to Adult and College Volunteers at a special ceremony to recognize various levels of hours achieved and various levels of years served.
Benefits
Active volunteers will receive the following benefits:

- A $4.00 meal ticket on all items in the cafeteria for shift worked while wearing proper identification badge and uniform.
- Free parking in designated areas.
- Participation in Florida Hospital Tampa continuing education, fitness and recreational program activities at discounted prices.

Change of Name or Address
Notify the Volunteer Office immediately whenever your name, address, telephone or emergency information changes. The department endeavors to keep records as current as possible.

Confidentiality
Confidentiality is required at all Florida Hospital Tampa hospitals. All information regarding patients, staff, volunteers, physicians and visitors is confidential. Volunteers are required to sign an annual Confidentiality Agreement acknowledging this. A violation of confidential information is a violation of hospital ethics, and a volunteer may be dismissed immediately by Volunteer Services for such a violation.

Dos and Don’ts
Volunteers should perform only those duties to which they have been assigned and properly trained. When in doubt, ask questions about what to do.

Drug and Alcohol Use
Florida Hospital Tampa prohibits the use and/or abuse of drugs and alcohol in the workplace. All volunteers are expected to abide by the terms of this policy as a condition of being able to work within the hospital. Any volunteer who is found to have violated its prohibitions is subject to disciplinary action, including suspension and/or discharge.

Employment Opportunities
Volunteering does not assume employment. All employment matters are handled through the Human Resources Department. Acceptance of an employee for volunteer services at this facility will be contingent upon the employee’s ability to meet the requirements of the volunteer service program. Qualified employees may volunteer after working hours provided the volunteer positions they seek are in areas other than the ones in which they are employed. Employees who are retired from this facility may volunteer at any campus of Florida Hospital Tampa. However, the areas to which they are assigned must be at the discretion of Florida Hospital Tampa, the Department Director, and Volunteer Services.

Equal Opportunity
The Volunteer Services Department shall select and place volunteers based on ability and volunteer assignment performance. Florida Hospital Tampa shall provide Equal Employment and Volunteer Opportunity to all people in all aspects of volunteer relations without discrimination due to race, color, religious creed, sex,
national origin, ancestry, marital status, age or qualified disability. This policy affects
decisions including, but not limited to, a volunteer’s benefits, training and
development, and other privileges of volunteering. It is the hospital’s policy to
maintain a working environment free of sexual harassment and intimidation.

Evaluation
At the end of 90 days, a volunteer’s placement is evaluated in terms of the
volunteer’s satisfaction with the assignment. Also, the department where
the volunteer is assigned will be asked for feedback concerning the volunteer’s
performance.
Departments with volunteers classified as “Teen” will be asked to complete an
evaluation of the volunteer at the end of the volunteers’ assignment. Departments
with volunteers classified as “Adult” or “College” will be asked to complete an
evaluation of the volunteer on an “as needed” basis. All evaluations are confidential
and are kept in the volunteer’s file in the Volunteer Services Office.

Exit
Should you no longer be able to volunteer, notify the Volunteer Service Office of
your plans either verbally or in writing. It is important that we, the Volunteer Office
have a clear understanding of your reason(s) for leaving. Please turn your ID
badge in to the Volunteer Office at your time of exit.

Food and Beverages
Food or beverages are never to be consumed in reception, registration, information
or public areas of a unit or department. Breaks and meals should be taken in the
cafeteria.

Identification Badge
All volunteers are required to have an identification badge. This badge should be
worn at all times while giving service, either on the left side of your clothing at collar
level, or on a lanyard. No person may borrow or loan an identification badge. The
badge is also to be used to clock-in and out at the beginning and end of a shift. This
will allow the Volunteer Services office to correctly report volunteer time. The ID
badge should be returned to Volunteer Office when you are no longer a volunteer for
the hospital.

Personal Appearance
Volunteers must observe a dress code. They are to present themselves to others in
a manner and dress that is both professional and conservative. We reserve the right
to dismiss you if this is not followed.

General Guidelines
- Uniforms should be clean and pressed.
- Soft-soled shoes (no sandals or open-toe shoes).
- Hair neat in appearance (no hats or large hair ornaments).
- Jewelry and makeup kept to a minimum
- No perfumes, aftershave, or cologne (some patients may be allergic)
- Limit ear piercings to two earrings. Any other visible piercings ie. Tongue, lip, eyebrow, etc are not permitted.
- No visible tattoo
- No gum chewing
- Name tag to be worn at chest level and visible at all times
- No denim, shorts, sandals or slipper-type shoes, sweat pants or exercise clothes, biking apparel, leggings worn with tops shorter than skirt length, printed T-shirts and tank tops, skirts more than 2 1/2 inches above the knee, or Capri style pants.

**Women:** Solid colored shirt and a volunteer smock, or a volunteer polo shirt, solid colored slacks or skirts. Stockings, hose, or socks must be worn.

**Men:** A collared shirt, conservative slacks and a volunteer jacket or a volunteer polo shirt. Socks must be worn at all times.

**Teens:** Solid colored slacks (no denim) and a volunteer polo shirt. Socks must be worn at all times.

All volunteers must purchase their own uniforms. Volunteer jackets or polo shirts cost $18 each.

Some modifications may apply based on specific requirements of the department based on their safety or infection control procedures. This includes scrubs for volunteers assigned to surgery and other departments. Volunteers in this category must adhere to standard dress code when not in their designated area.

**Scheduling and Reporting Your Volunteer Hours**

*The Volunteer Services Department is required to keep track of the number of hours volunteers give to the hospital. Please follow the process appropriate for your campus and your situation.*

**Florida Hospital Tampa**
Visit one of the volunteer badge-in locations located in the Main Lobby, the Pepin Heart Hospital Lobby or the Volunteer Services Department when you arrive and when you finish your shift.

**Florida Hospital Carrollwood**
Please complete a paper timecard and turn it in to Volunteer Services at the end of each month.

**Florida Hospital at Connerton at Long Term Acute Care**
Please complete a paper timecard and turn it in to Volunteer Services at the end of each month.

**Smoking**
Florida Hospital Tampa is a Tobacco Free Organization.
• No one, including Employees and Volunteers are allowed to use tobacco products on campus, including parking lots and inside cars. The appearance of healthcare professionals and volunteers using tobacco products sends a message that is contrary to the promotion of health and wellness.
• Never allow smoking in an area where oxygen is used or stored.
• Prohibit smoking wherever flammable or non-flammable gases or flammable liquids are used.

Telephones and Personal Pagers
Hospital telephone lines are designed for patient care or hospital business use and should be used for personal calls only in an emergency. Use of personal cellular telephones is prohibited within the hospital building or work unit. Limited use of personal pagers may be approved at the discretion of the department director.

Volunteer Placement and Relatives
The placement of volunteers with immediate relatives within the same department is discouraged and will normally not be permitted. Immediate relatives within the same department will only be allowed when such individuals are scheduled on different shifts from one another and are not involved in the supervision of one another. In no case will an individual supervise an immediate relative. This placement must have final approval of the Volunteer Services, and the Director of the specific department.

HIPAA Privacy & Security: Our Values and Ethics at Work
HIPAA (Health Insurance Portability and Accountability Act) is a Federal regulation imposed on health care organizations including hospitals, home health agencies, physician offices, nursing homes, other providers, health plans and clearinghouses.

HIPAA Privacy Rule:
• Gives patients a right to access their medical records and restrict (in some ways) who may access their health information.
• Requires organizations to train its workforce and to take measures to safeguard patient information in every form.
• Provides penalties for individuals and organizations who fail to keep patient information confidential. Criminal penalties under HIPAA: maximum of 10 years in jail and a $250,000 fine for serious offenses. Civil penalties under HIPAA: maximum fine of $25,000 per violation.

HIPAA Security Rule: Pertains to electronic patient information and requires physical, technical and administrative safeguards.

Protected Health Information (PHI): PHI is any patient information which indentifies a patient directly or indirectly. PHI in any form (written, faxes, electronic, photographs/images, conversations, labels, monitor strips) must be protected.

Privacy and Security Tips:
Do not look at PHI unless you need to know the information to do your job.
Use the minimum amount of PHI necessary to perform your job duties.
Do not use your work access privileges to access, view or print your own PHI or the PHI of your spouse, children, other family, friends or coworkers.
Be conscious of who else may be listening when speaking with patients or family members. Lower your voice when appropriate or move to a more private location.
Dispose of PHI by shredding it or placing it in a locked confidential storage container. Do not place PHI in the regular trash.
Before giving out paperwork, make sure each page is for the correct patient.
Patients (including you) should go to the Health Information Management (HIM) department to complete the required paperwork to obtain copies of their PHI. HIM employees will verify identity and legal rights to the information and release it as appropriate.
Do not discuss what you overhear about a patient or share information gained in the course of work with your family, coworkers, or friends.
Do not discuss PHI with others who do not need the information to perform job duties such as those you encounter at Walmart, church, or grocery stores.
Do not discuss patients in public areas such as elevators, hallways, or cafeterias, where individuals outside the healthcare team may hear you.
Do not leave an individual without identification in a confidential or secure area. Offer assistance and ask for identification if necessary.
Do not leave patient records lying around where visitors or other unauthorized persons may view them. Keep them secure.
Keep PHI in folders, turn it face down or use a cover page.
Lock your office door if you leave it unattended.
Remove PHI from printers, fax and copy machines in a timely manner.
Do not post or write down your passwords. Never share your password.
Make your password something you can remember but difficult for others to guess. Do not include personal information others may know about you in your password (name, date of birth, spouse or children’s names, pet names).
Log out of patient information systems when you leave your work area.
Turn patient information monitor screens away from public view.
If you need to email PHI to perform job duties, you must encrypt 100% of your messages containing PHI sent outside of Florida Hospital Tampa’s network. You can encrypt any email message from your Florida Hospital email account by entering #secure# anywhere on the subject line of your message.
Double check the “To” line before sending an email to verify correct recipient.
Verify you have entered the correct fax number before faxing PHI.
Use a fax cover sheet with appropriate confidentiality language.
Be mindful of your location when discussing PHI on a cell phone.
Avoid using speakerphones when discussing PHI.
Be careful about how much PHI you leave on home answering machines.
Keep laptops and other mobile devices secure at all times.
• Always wear your identification/name badge where it is visible to others.
• PHI on labels must be removed and placed in a locked confidential storage bin, or marked through with a black permanent marker or placed in hazardous waste container if appropriate.
• If you are not involved in the care of the patient or the welfare of the family, remove yourself from the area of confidential patient discussions.
• After asking their permission, put phone calls on hold to prevent overhearing background conversations about other patients.
• Knock and pause before entering the patient’s room.
• Ask visitors to leave the room if the patient would like them to do so before discussing PHI.
• Direct media inquiries to Public Relations or Administration.
• Report potential violations to your Volunteer Services office, Privacy Officer or Security Officer.
• If a government agent needs computer access to view PHI, you may cooperate only after seeing his ID. Let him know that Florida Hospital Tampa and you will cooperate, but that you first must contact the Risk Manager, and Department Director over the area.
• Posting advertisements on bulletin boards for personal businesses, like selling candles or cosmetics, etc. is not permitted because the Florida Hospital Tampa facilities are charitable, tax-exempt organizations.

**Notice of Privacy Practices (NPP):** Provided during the patient’s first visit, posted in the facility, and on the website. Outlines: how we may use and disclose PHI, rights regarding their PHI and how to access it, how to file a complaint or opt out of the facility directory, and how to request a list of those who have received their PHI (Accounting of Disclosures), amendments, alternative means of communication (Confidential Communications), and restrictions.

**TPO (Treatment, Payment and Operations):** HIPAA permits us to share PHI for treatment, payment or operations (coding, billing, quality review, risk, etc.) without authorization from the patient.

**Authorization:** Florida Hospital Tampa must obtain a signed and dated authorization form from the patient before using or sharing PHI for reasons other than TPO unless the use or disclosure is mandated by law.

**Marketing:** In most cases, we may not use or disclose PHI to market or film or photograph a patient for marketing purposes without obtaining a valid signed and dated authorization form from the patient. If an outside entity is involved in filming, photographing or interviewing a patient, please work with the Public Relations department. Certain forms must be signed by the patient and by those filming, photographing, or interviewing the patient.
**Legal Personal Representatives:** Persons having the authority (under federal and state laws) such as Durable Power of Attorney with a healthcare designation or Health Care Surrogate or Court Order to act on behalf of a patient in making healthcare decisions have the same rights to access the patient’s information unless the involvement of the personal representative would put the patient at risk.

**Legal Personal Representatives for Minors:** Parents, guardians, and others who have authority (under federal and state laws) to act on behalf of a minor in making healthcare decisions also may have access to the minor’s health information as his/her personal representative unless the minor is emancipated.

**Discussing PHI with a Patient’s Friends and Family:** HIPAA permits hospitals to share information that is directly relevant to the level of involvement of a family member, friend, or other person identified by a patient, in the patient’s care or payment for health care.

- If the patient is present, or is otherwise available prior to the disclosure, and has the capacity to make health care decisions, you may discuss this information with the family or other persons if the patient agrees or, when given the opportunity, does not object.
- You may also share relevant information with the family and other persons if you can reasonable infer, based on professional judgment that the patient does not object.
- Even when the patient is not present or it is impracticable because of emergency circumstances or the patient’s incapacity for us to ask the patient about discussing his/her care or payment with a family member or other person, you may share this information with the person when, in exercising professional judgment, you determine that doing so would be in the best interest of the patient.
- You may also disclose PHI as necessary to obtain payment for services provided. You may contact persons who are involved with the patient’s care and payment for services other than the individual as necessary to obtain payment for health care services. You are required to reasonably limit the amount of information disclosed to the minimum necessary to process payment.

**Facility Directory:** A patient has the right to opt out of the facility directory.

- Check the directory before responding to any inquiries about a patient.
- If the patient has agreed to be in the directory, release only location and general condition (fair, critical, etc.).
- If the patient has opted out of the directory, advise the caller or individual present that you have no information on the individual requested.
- The internal processes we use to identify patients who have opted out of the directory vary among our facilities. Check with your supervisor and review the HIPAA Privacy Policy for the Facility Directory.
**Access is monitored:** Electronic access to PHI is monitored. Inappropriate access or sharing of PHI results in disciplinary action up to and including termination.

**Breach Notifications:** Hospitals must notify patients within 60 days if their unsecured patient information was acquired, accessed, used or disclosed inappropriately. The notice must describe what happened and what the organizations is doing to investigate the breach, how similar breaches will be prevented in the future, steps individuals can take to protect themselves and contact information. Patients will be able to sue and may be able to receive compensation for breaches. Breach investigations and notifications will be handled by the Privacy Officer and the Privacy Coordinators.

**What is Your Responsibility?**
If you suspect a patient’s privacy has been violated, or if a patient alleges his/her patient information has been accessed, used or disclosed inappropriately, immediately call Risk Management.

**Resources Available on Florida Hospital Intranet under “Corporate Responsibility”:**
- HIPAA Privacy Q&A Booklet
- Information Security Guide
- HIPAA Privacy Administrative Policies and Procedures
- HIPAA Security Administrative Policies and Procedures

**Corporate Responsibility: Compass Point: Navigating Adventist Health System’s Code of Ethics**

The Corporate Responsibility program:
- Mandated to reduce health care fraud
- Designed to help organizations monitor themselves
- A way to raise concerns anonymously
- The right thing to do

Examples of Corporate Responsibility Issues:
- Providing poor care
- Falsifying records
- Billing for services not rendered
- Accepting kickbacks
- Billing for medically unnecessary services
- Double billing
- Patient dumping/refusing to treat patients based on ability to pay
- Violating patient confidentiality
- Giving gifts to physicians in exchange for referrals
Federal False Claims Act
- Prohibits anyone from knowingly submitting or causing to submit a false or fraudulent claim
- Violations include billing for services not provided, double billing, or being referred by someone in exchange for a kickback
- Protects whistleblowers who sue organization on behalf of government
- If the lawsuit recover funds for the government, the whistleblower can receive up to 30 percent of the recovery

Compass Point: Navigating Adventist Health System’s Code of Ethics Reference Guide
- Compass Point: Navigating Adventist Health System’s Code of Ethics Reference Guide is a policy document.
- It is designed to help you do what is right and to ensure that your behavior demonstrates our values.
- The reference guide includes examples of how the standards of Catholic Health Initiatives apply to your daily work.
- Compass Point: Navigating Adventist Health System’s Code of Ethics Reference Guide is one of many tools that can help you work in a responsible, professional and ethical way.
- By understanding and using this reference guide, we demonstrate our commitment to our core values.
- Failure to comply with Compass Point: Navigating Adventist Health System’s Code of Ethics Reference Guide may result in disciplinary action up to and including suspension or termination of services.
- Please review completely your copy of Compass Point: Navigating Adventist Health System’s Code of Ethics Reference Guide, discuss any questions or concerns regarding this reference guide with your Volunteer Services Coordinator, sign and return the Acknowledgement and Certification form as your individual commitment.

Adventist Health System, Florida Hospital Tampa and its organizations promote an environment that encourages all of us to seek clarification of issues and report questions and concerns. It is our duty and responsibility to promptly report possible violations of our standards, guidelines, or policies. You will be protected from retaliation if you make a good-faith report, complaint or inquiry. A person who retaliates against you for making a good-faith report is subject to discipline, up to and including dismissal from employment or termination of a business relationship with Adventist Health System or its organizations. Non-retaliation policies do not protect you if your actions violate the policies of Adventist Health System, Florida Hospital Tampa or applicable laws.

Reporting Process: To ask questions or report potential violations or concerns please:
- Speak with your supervisor or another manager.
- If the supervisor/manager is not available, or you are not comfortable speaking with him/her, or you believe the matter has not been adequately resolved, contact your human resources representative or your Corporate Responsibility Officer.
- If you want to report a concern anonymously, you have two options:
  1. Call the Ethics at Work Line phone number, 1-888-92-GUIDE (48433).
- This confidential reporting option is available 24 hours a day, seven days week. Reports are received by trained staff who document and forward information to your local and/or national corporate responsibility officer for appropriate action. These reports are not traced or recorded. You may remain anonymous if you wish. If you choose to identify yourself, there is no guarantee that your identity will remain anonymous. However, when you identify yourself it is easier for the corporate responsibility officer to provide you with a direct response.

This contact information is also provided in your Compass Point: Navigating Adventist Health System’s Code of Ethics posters in your department, and on the Florida Hospital Tampa Intranet.

**Role and AHS Chief Compliance & Privacy Officer (CCPO):** The CCPO is responsible for the administration of Florida Hospital Tampa’s Corporate Responsibility Program, monitoring laws and regulations and distributing communications regarding these to appropriate persons, and overseeing the prompt investigation and corrective action of suspected compliance violations.

**EMTALA Compliance for Volunteers**

EMTALA stands for Emergency Medical Treatment and Active Labor Act. It is the Federal law which requires hospitals that accept Medicare patients to evaluate and treat individuals presenting for a potential emergency medical condition regardless of their ability to pay.

- The hospital is required to medically screen, stabilize, and treat or transfer individuals who:
  1. Arrive on hospital property in an ambulance; or
  2. Request evaluation or treatment for a medical condition; or
  3. Have a request evaluation or treatment made on their behalf (e.g., police officer, friend or family member); or
  4. Would appear to a reasonable person to be in need of evaluation or treatment for an emergency medical condition (e.g. obvious injuries, unconscious).
- All individuals to whom EMTALA applies will be triaged and receive a medical screening exam.
• If individuals request directions to a specific location of the hospital (e.g. Outpatient Lab, Labor & Delivery, Radiology) direct them accordingly.
• If an individual indicates they are seeking evaluation and treatment of a potential emergency medical condition, direct them to the Emergency Department.
• If an individual appears to need evaluation or treatment for an emergency medical condition, but cannot or does not make such a request (e.g., unconscious or too emotionally distraught) then assess the individual’s responsiveness. If the individual is unresponsive, follow the Code Blue procedure located on your “Emergency Codes” badge. If the individual is responsive request assistance from the most accessible hospital staff member (e.g. business office personnel, security) to transport the individual to the Emergency Department.
• Never tell an individual who may be seeking evaluation or treatment for a potential emergency medical condition to leave and go to another facility.
• If patients inquire about wait times encourage the patient to seek evaluation and treatment and direct the individual to the appropriate personnel (e.g. nurse, registration clerk).
• If patients inquire about the cost of care, reassure them that the hospital will provide emergency department care regardless of ability to pay; encourage the patient to seek evaluation and treatment; and direct the individual to the appropriate personnel to answer any questions (e.g. nurse, registration clerks, financial counselors, etc.).
• If you observe any individuals awaiting emergency department treatment whose condition appears significantly worse, who appear to be in acute distress, or who complain of or exhibit signs of an emergent condition (e.g. chest pain, obvious difficulty breathing, onset of slurred speech or other stroke symptoms), immediately notify ED nursing personnel.

General Safety Information

Protecting YOU from Work Injuries
Good body mechanics is good back protection for YOU.
• Adjust the height of your chair to achieve proper posture.
• Your ear, shoulder, and hip should be in a straight line.
• Sit with your head and neck in an upright position, even when on the telephone.
• Do ask for help. Most back injuries occur because s and volunteers do not request additional lifting help.
• Do lift with your legs, not your back. Keep your body straight with the item that you are lifting.
• Do not twist or turn your body while lifting.
• Think about using carts, patient rollers, and lifts. Do not put unnecessary strain on yourself. Plan ahead for the assigned job.
Slips, Trips, Falls and Other Accidents
There is no such thing as an unimportant accident. Any accident is a danger signal that an unsafe condition or working habit exists. Report any accident to the department employee manager, team member, or Security, as appropriate, immediately. Also notify the Volunteer Office. Your prompt action may help save someone from painful or serious injury.

Housekeeping practices:
Wet floors may enter the work place unexpectedly because of plugged drains, spills and leaks. Wet floors are also a natural result of certain housekeeping, food service, and maintenance activities. STOP and…
• Notify housekeeping for assistance.
• Mark the area with a wet floor sign.

Watch your step:
• Problem areas to be especially careful around are entranceway carpets and tile, liquid soap on restroom floors, painted/waxed floors, metal doorsills and steps, plastic carpet protectors, and darkroom floors.
• The parking garage where motor oil or ice is present can cause the floor of the garage to be very slick.

Work surfaces and walkways and stairs:
• Keep floor area free from clutter.
• Wear appropriate shoes for your job.
• Pick up pencils, paperclips and other objects that might cause a slip.
• Beware of telephone and electrical cords lying across floors.
• Use handrails on stairways and take one step at a time.
• Avoid obstructing your vision with large loads.
• Don’t hurry, especially around corners.
• Report out-of-order lights promptly.

Reporting of Slips, Falls, or Any Other Accidents
If you have any type of slip, fall or accident, or if you WITNESS a slip, fall or accident, call security immediately! You should do this EVEN if you believe no real injury has occurred! The phone numbers for Security are located on your Hospital Emergency Codes badge.

Wheelchairs - W/C - Transporting Patients
Always use good body mechanics when using a wheelchair. Good body mechanics include: keeping your back straight; keeping your body close to the wheelchair when moving it; bending at the knees to lock/unlock the brakes; and bending at the knees to adjust footrests.
• Paid staff must help patient into or out of the wheelchair, unless the staff has indicated the patient is able to do so unassisted. Volunteers are not allowed to transfer patients into and out of wheelchairs!
• Be sure to check with the nurses’ station prior to transporting a patient.
• Introduce yourself to the patient and explain who you are and what is happening.
• Verify that you are transporting the right patient by asking for his/her name.
• On a flat surface, push wheelchair forward at a smooth walking speed.
• If you have to push the wheelchair on an incline, **BACK** the wheelchair down inclines to prevent runaway wheelchairs!
• Gently and slowly **BACK** wheelchairs over bumps or curbs.
• Always walk at a normal to slow speed.
• Watch where you are going!
• **BACK** onto the elevators after checking that the building floor and elevator floor are level surfaces.
• Lock the brakes on wheels of the wheelchair before the patient transfers in or out!

**Medical Gas Safety**
A volunteer may be asked to transport a patient who is using an oxygen tank. Volunteers SHOULD NOT handle oxygen tank cylinders! If the patient needs assistance with the oxygen tank cylinder, please ask a supervisor for assistance.

REMEMBER: An oxygen tank cylinder can become a deadly missile if compressed gas is not controlled.

**Safe Medical Devices Act**
If you realize a piece of equipment is not working properly, contact a supervisor who will remove the equipment, tag it “Do Not Use” and take care of the patient immediately. Any item used for patient care is considered equipment including, but not limited to, wheelchairs, outlets, call buttons, medical devices and machinery.

**Utilities Management**

**Electrical Power**
If there is an electrical power failure, the emergency generator or its backup should kick in. Only the RED OUTLETS will be operational. **Plug all life support equipment into the RED outlets.**

**Elevators Out of Service**
In the event that elevators are out of service, employees will:
- Use carry teams to move critical patients.
- Use stairwells.
- Use runners for supplies.
- If available, use generator supported elevators.

**Telephone Communications:** In the event of a telephone outage, phones will not be working correctly, if at all. A Telephone Failure Communications Plan is located in the Safety Manual. The telephone system is set up to have a back-up plan to continue emergency telephone communications.
Identification, Assessment and Reporting of Suspected or Alleged Abuse and Neglect

Know the signs and symptoms of abuse. If you suspect abuse, you are responsible for reporting it to a staff member, as outlined in the Florida Hospital Tampa policy.

Some Types of Abuse / Neglect
- Physical Abuse
- Elder Abuse
- Child Abuse
- Partner Abuse
- Psychological Abuse
- Self or Caretaker Neglect

Signs of Abuse, Neglect, or Exploitation
- Physical evidence does not match medical history
- Unexplained bruising and/or bruising at different stages of healing (dark and light colors of blue, green, brown, yellow)
- Appearance of previous fractures
- Forced or coerced sexual relations
- Fear of partner or caretaker
- Hunger, malnourishment, or dehydration
- Inappropriate and/or inadequate clothing, poor hygiene
- Mismanagement of money or property by caretaker
- Inadequate explanation of cause of injury

Radiation Safety
Radiation, including X-rays and radiation therapy, can provide many benefits for our patients, but must be managed with caution. Do not enter any area where the radiation symbol is displayed.

Sentinel Events
A Sentinel Event is an unplanned event that has resulted in serious physical or psychological injury or risk thereof, such as an unexpected death or major permanent loss of function unrelated to the patient’s illness.

Some examples of sentinel events:
- Child abduction or discharge to wrong family
- Rape of a patient
- Suicide of a patient in a 24-hour care facility
- Wrong blood or blood product transfusion
- Surgery on a wrong body part or wrong patient

If you feel that a Sentinel Event has occurred or a “near miss” has occurred, please notify Administration, the Risk Manager, a supervisor, or a House
Healthcare-Associated Infection (HAI) & Risk Management

Healthcare-Associated Infection: Impact
Healthcare-associated infection (HAI) is an infection that develops after contact with the healthcare system.

HAI can be very costly, in terms of:
- Patient life and health
- Healthcare dollars

HAI: Cause
HAI may be caused by bacteria, viruses, fungi, or parasites. These “germs” may come from:
- Environmental sources (dust, etc.)
- Patients
- Staff members
- Hospital visitors

HAI: Best Practices
Best practices for preventing HAI are related to:
1. Hand hygiene
2. Environmental hygiene
3. Antibiotic use
4. Airborne pathogens
5. Bloodborne pathogens
6. Personal responsibility

Hand Hygiene: When and What
The single most important factor for preventing the spread of infection is proper hand hygiene.

Hands should be washed or decontaminated before and after each direct patient contact. Hand hygiene should also occur after gloves are removed.

Current CDC guidelines recommend the use of:

- Wash hands with soap and water for at least 15 seconds when visibly soiled.
- Use alcohol-based hand rubs for routine decontamination of hands between patient contacts, when hands are not visibly soiled.

Remember: To protect yourself and patients perform proper hand hygiene:
1. Before and after patient contact
2. Before eating or drinking, or before feeding patients
3. **Before** invasive procedures
4. **After** using the restroom
5. **After** contact with non-intact skin, body fluids, secretions or excretions
6. **After** removing gloves

Let patients and families see you perform hand hygiene!

**Environmental Hygiene**
For good environmental hygiene:

- Maintain a clean environment. There should be no visible dust or soiling.
- Clean, Disinfect, or sterilize medical equipment after each use.
- Dispose safely of clinical sharps and waste.
- Launder used and infected linens safely and effectively.
- Follow appropriate guidelines for kitchen and food hygiene.
- Maintain an adequate pest-control program.

**Antibiotic Use: Impact of Resistance**
Antibiotic resistance is a significant health problem. It affects:

- Drug choice – When an infection is resistant to the antibiotic of choice, other antibiotics must be used instead. These second-choice drugs are typically:
  - Less effective against the bacteria
  - More toxic to the patient
  - More expensive
- Patient health – Patients with resistant infections tend to have:
  - Lengthier illness
  - Higher medical bills
  - Greater risk of death
- The healthcare system
  - Antibiotic-resistant strains contribute significantly to HAI.
  - More than 70% of all bacteria that cause HAI are found to be resistant to one or more commonly used antibiotics.

**Airborne Pathogens: Background**
Airborne diseases are transmitted from person to person via tiny particles when a healthy person inhales an infectious particle. These particles:

- Are produced when an infected person sneezes, cough, or talks.
- Can remain suspended in the air for long periods of time.
- Can travel long distances on air currents.
Airborne Pathogens: Diseases
Important airborne (or potentially airborne) diseases include:

- Chickenpox and shingles
- Measles
- Tuberculosis (TB)
- SARS
- Smallpox

Bloodborne Pathogens
Bloodborne pathogens are microorganisms in the blood or other body fluids, excretions and secretions (except sweat) that can cause infection and disease in people. These microorganisms can be spread from person to person when there is exposure to:

- Infected blood
- Body fluids, secretions, and excretions (except sweat)
- Non-intact skin
- Mucous membranes

Bloodborne Pathogens: Diseases
Important bloodborne diseases include:

- HIV infection/AIDS
- Hepatitis B
- Hepatitis C

Bloodborne Pathogens: Standard Precautions
Standard Precautions are mandatory precautions for all employees and volunteers to avoid becoming soiled by blood, body fluids, secretion and excretions from ALL PATIENTS. All patients carry the risk of being infected with unknown germs.

Standard Precautions include:

- Wear Personal Protective Equipment (PPE) – PPEs give protection by providing a barrier to reduce the risk of infection in healthcare workers (HCW). These PPEs can be found in every area:
  - Gloves
  - Gowns
  - Face Masks
  - Eye Goggles
Use good personal hygiene
- Hand Hygiene
- Perform hand hygiene after removing gloves
- Cover all open cuts

Use good work practices
- Do not eat, drink, apply lipstick or lip balm or handle contact lenses in areas where blood, body fluids, secretions or excretions are present.
- Do not place food items in areas where blood, body fluids or other potentially infectious materials are present.

Use Standard Precautions with each and every patient to provide a safe environment for the patients, employees, visitors, healthcare workers, medical staff, volunteers and other customers.

Bloodborne Pathogens: Exposure
If you are exposed to bloodborne pathogens do the following:

- Wash exposed skin immediately with lots of water
- Perform hand hygiene after removing gloves
- Flush eyes, nose, or mouth quickly and thoroughly with water

*If you have any accidental exposure to blood, body fluids, secretions or excretions, including being stuck with a sharp, report it immediately and seek medical treatment.*

Isolation Categories
In addition to Standard Precautions, the following protective isolation categories may be ordered to protect the spread of infections. *Do not enter a patient's room if one of these isolation categories is indicated on the door. Check with a staff person!*

- **Airborne** – Airborne Precautions are used to prevent the spread of airborne diseases in the healthcare setting. Healthcare staff must wear personal respirators whenever they enter an airborne isolation room. This protects staff members from spread of the infection. *Staff who has not been trained in Airborne Precautions and respirator use should NOT enter airborne isolation rooms.*
  
  **Signs outside rooms with Airborne precautions will be BLUE.**

- **Droplet** – Droplet precautions are used when patients have or are suspected of having serious illnesses such as influenza and meningitis spread by large droplets containing microorganisms produced when the person coughs, sneezes, and talks or during procedures. Requires a specially fitted mask.
  
  **Signs outside rooms with Droplet precautions will be ORANGE.**
Contact—Contact precautions are used for specific patients known or suspected to be infected or colonized with microorganisms that can be transmitted by direct contact with the patient or indirect contact with hard surfaces, furniture or patient-care items. Gloves and gowns are used as a barrier to prevent the spread of microorganisms.

**Signs outside rooms with Contact precautions will be RED.**

**Personal Responsibility**

As a healthcare volunteer, you have personal responsibilities for infection control in your facility. Maintain immunity to vaccine-preventable diseases such as:

- Hepatitis B
- Measles
- Mumps
- Rubella
- Varicella (chickenpox)
- Pertussis (whooping cough)

**Please stay home when you are sick!**

**Emergency Plans**

**Code Brown — Hurricane/Tornado and Dangerous Weather!**

If a hurricane/tornado is in the area, the operator will announce “Code Brown” over the intercom system.

- **A Code Brown -- Hurricane/Tornado Watch** is paged when conditions are favorable for a tornado to develop in your hospital’s area.
- **A Code Brown -- Hurricane/Tornado Warning** is paged when an actual tornado has been seen in your hospital’s area.
  - Stay as far away from windows as possible and move to a central hallway.
  - You may be asked to assist with moving patients to a central hallway. If a patient cannot be moved, close their drapes or blinds, cover the patient with blankets, close all doors completely, and stay away from windows. **If you can see outside, you are not safe.**
  - When a "Hurricane/Tornado Warning" is announced, all employees and volunteers will remain on the floor or the unit they are on at the time the "Hurricane/Tornado Warning" is called.
  - No one should go outside of the building or make personal phone calls during a “Hurricane/Tornado Warning”.
  - Upon termination of the Hurricane/Tornado Warning the operator will announce, “Hurricane/Tornado Warning All Clear” several times.
**Code Grey**
Code Grey is used to alert hospital employees of emergency situations involving patients who are dangerous to themselves or others due to out-of-control behavior.

SPECIAL NOTE: A Code Grey is called for a patient out-of-control. If a visitor is out-of-control, you should report this to security by dialing the phone number located on your "Emergency Codes" listing on the back of your badge.
- To call a Code Grey, dial the emergency number, tell the operator that a Code Grey situation exists and give the location.
- The operator will give an overhead alert of the Code Grey and its location.
- The Code Grey Team will report to the announced location
- The team leader will take responsibility for the code and staff intervention.
- Once the crisis is resolved, staff will attempt to explain and process events with patients and involved family or others.

**Code Silver**
Code Silver is called when an imminent threat to employees, visitors or patients involving weapons occurs.

**Code Blue**
A Code Blue is is a cardiac/respiratory arrest. This can be an adult, pediatric patient, visitor or staff

Please remain with the person, help them to the floor if possible. Dial the phone number located on your “Emergency Codes” listing on the back of your badge to report the situation. If you are in the parking area, please stay with the injured party and yell for assistance.

**Code Purple**
A Code Purple is a medical emergency. This can be an adult or pediatric patient, visitor or staff.

Please remain with the person, help them to the floor if possible. Dial the phone number located on your “Emergency Codes” listing on the back of your badge to report the situation. If you are in the parking area, please stay with the injured party and yell for assistance.

**Code Pink**
Code Pink is the announcement you will hear over the hospital P.A. system when a child is missing.
- If someone approaches you and tells you a child is missing, Dial the phone number located on your “Emergency Codes” listing on the back of your badge.
- Security personnel and other assigned staff will cover the hospital exits. Once a “Code Pink” has been called, ALL Employees and volunteers are expected to stop any adult leaving the building with a child, and page Security (number is on your “Emergency Codes” listing on the back of your badge).
- A brief description of the child will be sent by radio to staff.
• A photograph of the child will be obtained, if possible.
• At the end of the code, the operator will announce “Code Pink All Clear” three times over the intercom.
• Requests for information from the news reporters are to be referred to Public Relations or the House Administrator.

**Code Black**
The Code Black is activated upon notification of a bomb on site, usually by a call from outside the hospital. Recent FBI reports have indicated that U.S. hospitals are a specific terrorist target for explosives.

If you are the person answering the phone and receiving the bomb threat:
- Remain calm – keep your voice under control.
- Do not transfer the call to anyone.
- Ask questions and try to get the following information:
  - Who are you?
  - What does the bomb look like?
  - What time will it go off?
  - What type of explosive is it?
  - Where is it?
  - Why are you doing this?
- Write down as much information as you can regarding what the caller is saying and:
  - Exact time of call.
  - Sex of caller.
  - Possible race of caller.
  - Background noises (overhead paging systems, sirens, machines, etc.).
  - Exact words of the caller.
  - Probable age of the caller.
  - Whether caller seemed intoxicated.
  - Peculiar or identifiable accent.
- Stay on the line until the caller hangs up – then notify the switchboard operator. The phone number is located on your “Emergency Codes” listing on the back of your badge.
- The operator will notify:
  - The House Administrator.
  - The Administrator-on-Call.
  - Security.
  - The House Administrator will notify the Fire Department and the Police Department.

**Code Red**
If there is a fire in the building, the operator will announce “Code Red” over the intercom system three times.
In the event of a fire, remember R-A-C-E: (on Badge)

- Rescue people who are in immediate danger by moving them away from area.
- Alarm. Pull the alarm and call the operator at the phone number located on your “Emergency Codes” list behind your badge. Tell the operator “Code Red” and location.
- Contain the fire. Close all doors. Reassure patients who stay in their rooms.
- Extinguish/Evacuate. Fight the fire only if it is small and contained, like a wastebasket fire. Use the right fire extinguisher to put out the fire. All hospital fire extinguishers are marked “ABC”, which can be used on any type of fire. Be sure that you have a clear exit path for escape. Evacuate as instructed.

The automatic fire doors will close when the fire alarm is pulled. The metal FIRE ZONE doors contain both smoke and fire, and provide a longer length of time to save lives. In addition to the fire doors, all other doors to offices and patient rooms are to be closed for additional protection and fire/smoke containment. Never block the fire doors or prop open.

To use a fire extinguisher, think P-A-S-S (on Badge):

- Pull the pin. Twist the pin to break the plastic tie.
- Aim at the base of the fire.
- Squeeze the trigger.
- Sweep from side to side continuing to aim at the base of fire.

Preparing for Fire Safety

- Keep burnable items -- like paper, linens, and clothing--away from heat-producing devices.
- Extension cords should be used only in an emergency. Use only cords from Plant Operations, labeled “FOR EMERGENCY USE.” NEVER overload an outlet or continue to use damaged electrical cords.
- Know location of:
  1. Fire alarms and fire extinguishers in your work area
  2. Medical gases shut-off valves
  3. Proper exits for evacuation plan
  4. Fire zones (the area between two sets of fire doors)

Code Green – Disaster Plan

- A “mass casualty” (Internal or External) is called when the number of injured people is larger than the hospital’s ability to effectively provide care. Additional staff and resources will be needed.
- In case of a possible disaster, the Operator will page over the intercom “Code Green-Standby External,” (repeated), or “Code Green-Standby Internal” (repeated).
- When a disaster is certain, the Operator will page over the intercom “Code Green-Complete Internal” (repeated), or “Code Green-Complete External”.
- When the disaster is over, the Command Center will have the operator announce, “Code Green all clear-Disaster Terminated.”
- If a “Code Green - Complete” is called, volunteers may leave the hospital grounds if they wish. If a volunteer chooses to stay and help, he or she should report to the Volunteer Office and await further instruction.

**Code Orange**

Code Orange is the plan for the safe treatment of patients who are coming to the hospital after being exposed to a hazardous substance such as a biological agent or other disease-causing substance in the environment, which poses a threat to health or life. The hospital has a special team, which has been trained to deal with hazardous spills--the HazMat Hospital Team. The procedures for a Code Orange are as follows:

- The decontamination site is outdoors, outside of the Emergency Department.
- If a patient comes to the hospital in need of evaluation or decontamination, call the operator at the phone number located on your “Emergency Codes” listing on the back of your badge and say that you have a Code Orange. Ask the patient to go back out the door he came in and around to the Emergency Department.
- The operator will announce “Code Orange” over the intercom system three times and alert the appropriate hospital personnel.
- When the Code Orange is completed, the operator will announce: “Code Orange – All Clear” over the intercom system.
- If you come in contact with a hazardous material or waste, be sure to wash the affected area with soap and water or flush eyes. Notify your manager or House Supervisor if not available. Report it to Employee Health and file an incident report.

**Hazardous Communications**

Know the Risks of Hazardous Materials:

- Hazardous materials can cause fires or explosions.
- When a chemical is breathed in, eaten, or splashed on your skin or in your eyes, it can seriously harm your health. Headaches, nausea, decreased mental alertness, impaired motor coordination, and other problems are possible effects.
- Chemicals are used throughout the facility. For example, anti-cancer drugs can actually cause cancer and other serious health problems in nurses and pharmacists who mix them. Housekeepers who clean up spills and remove waste and become ill if they do not follow appropriate directions. Many cleaning chemicals can also pose a risk to users. Do not mix different chemicals!
- Chemicals aren’t just liquids in containers. Chemicals come in all forms--
solids, liquids, gases, vapors, fumes, and mists.

The HazCom Program is a plan for the safe management of hazardous materials and waste in a Florida Hospital Tampa facility. The program is consistent with the OSHA standard and includes information on:

- Inventory and identification of hazardous material
- Container Labeling
- Material Safety Data Sheets (MSDS)

Material Safety Data Sheet (MSDS)
- For detailed information about the hazards of a chemical and how to control them, check out the MSDS. MSDS notebooks are kept in each department. Be sure to ask where it is located.
- Chemical suppliers must provide an MSDS on every hazardous chemical they ship to the facility. This includes all cleaning supplies such as Windex, general purpose cleaner, etc.

Handling Hazardous Spills
- Mark and isolate the areas of the spill so that other employees and volunteers do not disturb it. Paper towels may be placed over the spill to stop it from spreading. Stop traffic. If you are splashed on your skin or in your eyes, the most important thing is to flush the chemical off of YOU. Eye Wash facilities are located in high-risk areas such as the Lab. Bags of IV fluids or any sink/shower could be used immediately to rinse dangerous chemicals off of your body and out of your eyes.
- Call Security or the House Administrator and a trained user can clean up the spill with the right equipment.

Key Safety Resources
If you have questions or concerns about compliance with regulations or to discuss or report possible violations, contact any of the following:

- Your supervisor or director
- AHS Chief Compliance & Privacy Officer
- GuideLine at 1-888-92- GUIDE (48433)

As you can see, Florida Hospital Tampa is committed to Safety! A number of committees such as the Housewide Safety Committee, Safety Sub-Committees for Utilities and BioMedical Equipment, and Clinical Safety Committee meet on an ongoing basis. Many employee and volunteer ideas have been implemented to improve safety and prevent potential safety problems. If YOU see a potential danger for a patient, employee, visitor, student, volunteer … Do not walk away! Report the finding immediately to the appropriate department or your supervisor.