FLORIDA HOSPITAL
MEMORIAL MEDICAL CENTER/OCEANSIDE
STUDENT ORIENTATION

This module contains 100 slides and will take approx 1 hour to complete.
**STUDENT CONTACTS**

- **Education Department at FHMMC**
  - **Nancy Grande RN, BSN**
    - CME and Student Coordinator
    - Office: (386) 231-3193
    - Fax: (386) 231-3180
    - Nancy.Grande@fhmmc.org
  - **Wendy Misita**
    - Education Specialist
    - Office: (386) 231-3176
    - Fax: (386) 231-3180
    - wendy.misita@fhmmc.org

- Clinical instructors must contact the Education Department at least 2-3 weeks prior to clinical rotations to coordinate pre/post conference schedules, orientation needs, and fill out necessary paperwork.
ORIENTATION INSTRUCTIONS

- In addition to reading the student orientation presentation, the following must also be reviewed from the internet site (or by clicking on the links below):
  - Scope of Practice of Student Nurses and Nursing Assistants Policy
  - Dress Code Policy
  - High Alert / High-Risk / Hazardous / Look Alike / Sound Alike Medications

- Other materials on the internet site that is recommended for review:
  - Education Department Brochure
  - Skin/Wound Brochure
  - Prevent a Fall Brochure
  - Scavenger Hunt
ORIENTATION INSTRUCTIONS

In addition to the orientation presentation please include in the required documents the following:

- Security Request form
- Confidentiality
- Proof of a Negative PPD
ORIENTATION INSTRUCTIONS

- After reading the orientation materials, the clinical instructor will obtain student signatures on the provided Roster.

- The Roster must be turned into the Education Department no later than the start of the first clinical day.
AREAS OF DISCUSSION

- Mission
- ICARE
- HIPPA
- Risk Management
- Body Mechanics
- Infection Control
- Emergency Preparedness
- Hazardous Materials
- Fire Safety
- Security
- Pain Management
- Patient/Family Education
MISSION, VISION, AND VALUES
ADVENTIST HEALTH SYSTEM: EXTENDING THE HEALING MINISTRY OF CHRIST

- Christian Mission
- Quality and Service Excellence
- Compassion
- Focus on Community Wellness
- High Ethical Standards
- Cultural Diversity
CHRISTIAN MISSION

- We exist to serve the needs of our communities in harmony with Christ’s healing ministry.

- We incorporate Christian values at every level of service.
PHILOSOPHY

- With Christ as our example we exist to assist in restoring and promoting the spiritual health and wellness of those we serve. This ministry seeks to include staff, patients, patients families, volunteers, community members, physicians, and all seeking spiritual help.

- We are here to extend the Healing Ministry of Christ through a Christian mission of Hope, Health, and Healing, reflecting Christ in all we do. Therefore, with Bible as our guide, our communication and all FHMMC transactions: internal (within our facilities) and external (community) is either “mission positive” or “mission neutral”.

- As part of the Seventh-Day Adventist world wide ministry, it is our purpose to uphold the mission of the Seventh-Day Adventist Church while respecting and providing for the beliefs and integrity of all who seek our services regardless of faith affiliation or belief.
QUALITY AND SERVICE EXCELLENCE

- We strive to meet or exceed the service standards of the healthcare industry, and the expectations of the patients we serve.

- We measure our success through continuous surveying of patient satisfaction.
COMPASSION

- We are sensitive to the needs of the individuals and families we serve.
- We meet their needs with kindness and empathy.
FOCUS ON COMMUNITY WELLNESS

- We commit time, talent and financial support to educate our neighbors about: illness prevention, and healthful living.
**High Ethical Standards**

- We conduct our business with integrity, honesty and fairness.

- As responsible stewards, we use our financial resources wisely by choosing business practices which are: cost-effective, productive and result in a fair return on investment.
Cultural Diversity

- We value the diversity of our patients, employees, business partners and visitors.

- We treat people with kindness and respect regardless of their background, race, religion or culture.
A Christian Mission of Hope, Health, and Healing

Guiding Principles

- **Our God**: Serving people who are sick and hurting is our response to a loving God.

- **Our Neighbors**: We are responsible stewards in our communities.

- **Those We Serve**: We create an environment of friendly, compassionate, extraordinary care.

- **Our Associates**: We conduct our business relationships with fairness and integrity.
FHMMC VALUES

- Integrity and Ethics
- Compassion
- Accountability to the Team
- Respect and Trust
- Excellence
INTEGRITY AND ETHICS

- Rules of Engagement
  - We own our behavior
  - We practice professionalism
  - We are good stewards
    - Appropriate/efficient use of supplies
    - Productive use of time

- Respect privacy and Confidentiality
  - Local Celebrities
  - Even your neighbor or friend
COMPASSION

- Hope, health and healing but the needy will not always be forgotten, nor the hope of the afflicted ever perish.
  - Psalms 9:18

- ICARE guides our interactions:
  - with our customers
  - with each other

- Cornerstone: you can get involved

- Friends of the Foundation
ACCOUNTABILITY TO TEAM

- Operational Expectations
  - Job description and expectations
  - Productivity

- Rules of Engagement
  - Take responsibility for your work environment
  - Be a good person to work with
  - Department-specific rules will be covered in your Departmental orientation
RESPECT AND TRUST

- No gossip!
- Tell the truth, with compassion
- Listen attentively
- Be nice
- Respect property
- Protect privacy
- Help each other when things get rough
EXCELLENCE

- Innovation
  - Be a lifelong learner
  - Every day is an opportunity to do a better job

- Bright Ideas! Program
  - Cost effective ideas from staff

- Goal is no errors!
  - HCAHPS are posted [www.hospitalcompare.hhs.gov](http://www.hospitalcompare.hhs.gov)
  - Root Cause Analysis - analysis of problems and developing solutions
Patient Privacy

- Long-standing tradition of maintaining confidentiality
- Our moral and ethical responsibility is now a legal responsibility as well
- Health Insurance Portability and Accountability Act (HIPAA) is the Federal Regulation
What’s Covered

- HIPAA uses the phrase Protected Health Information or PHI
- Goes beyond the traditional medical record
- Includes all medical and demographic information
  - Patient Name, address, phone number
  - SSN, birth date,
  - Anything which could individually identify the patient
What’s Covered

Where and how information is communicated is an important part of HIPAA

- Electronic communication and computer systems
- Written communication including the medical record
- Verbal communication between healthcare workers or between healthcare workers and the patient
Enforcement

- **Civil Penalties**
  - Up to $100 per violation per individual

- **Criminal Penalties**
  - "Egregious Violations" such as sale of patient information, gaining access under false pretenses, or releasing information with harmful intent
  - Possible jail time plus fines up to $250,000
Minimum Necessary

- We must make a reasonable effort to disclose or use only the *minimum amount* of information necessary to do our jobs.

- Before looking at information ask, "Do I need to know this to do my job?"

- Before sharing information ask, "Do they need to know this information to do their job?"
Minimum Necessary

Clinicians may look at the entire record of patients **they** are caring for and share information freely with other clinicians caring for the patient.

**Having** access to patient information does not give a **right** to access or disclose.

Regardless of intent.
Ways to Protect Our Patients

- Close doors whenever possible
- Draw curtains and speak as softly as possible
- Pay close attention to conversations with colleagues and patients
  - Elevator
  - Gift shop
  - Cafeteria
Ways to Protect Our Patients

- Sign-in sheets should not contain medical information.
- Page patients in a way that does not reveal the reason for their visit or medical treatment.
- Don't leave medical or treatment information on answering machines.
Ways to Protect Our Patients

- Don't leave unattended records in an area where they could be readily seen by visitors
- Dispose of patient information properly
Computer Security

- HIPAA has separate standards for protecting health information stored or transmitted electronically.
- Specific requirements for:
  - Password protection
  - Data transfer
  - Electronic "keys" or encryption of data
Passwords

- Best practice is to use 7 characters and a combination of alpha and numeric
- Do not share passwords
- Do not write them down and leave where someone can access
- Immediately report if you suspect it was stolen
Protecting Electronic Data

- Use screen savers
- Log off when leaving a workstation
- Make sure computer monitors are facing away from visitors
- Be careful when using email with patient information
Patient Rights

- Right to access their medical information
- Right to copies of their medical information
- Right to amend their medical information
- Right to notice of how their information will be used (the Notice of Patient Privacy Practices)
Patient Rights

- Right to request restrictions on the use of their medical information
- Right to an accounting of disclosures
  - Except when the disclosure was for treatment, payment, or health care operations
  - Or when made as a result of a patient authorization
Patient Rights

- Right to request confidential communications, i.e., only at work or by mail
Corporate Compliance Department
Employee issues concerning non-compliance with Local, State or Federal Regulations
(407) 975-1402 or (888) 92-Guide
Risk Management

- Incident Reporting System
  - Florida law requires all health care facilities to have a risk management program in place.
  - Employees must report injuries/incidents, of any kind, to risk management.
  - If you are injured on the job, report incident to your instructor.
  - These incidents are reported on Risk Master.
RISK MANAGEMENT

- **Liabilities in Health Care**
  - Competence of employees and unsafe environment is a major liability issue.
  - Steps to **avoid liability issues** include:
    1) Know and stay within your job description
    2) Do not omit duties
    3) Review and abide by policies and procedures
    4) Beware of equipment and surroundings

- Review **Scope of Practice for Student Nurses & Nursing Assistants**, Policy #500.105.
- Review **High-Alert/High-Risk Medication Verification**, Policy #1000.519.
**Risk Management**

- **Sexual Misconduct**
  - Notify your instructor/charge nurse immediately if:
    - If a patient makes allegations of sexual misconduct.
    - If feel you are being harassed.
  - Risk Management and Administration will handle the issue once notified by the manager/supervisor.
**Abuse and Neglect**

- Harm or threatened harm to a person’s physical or mental health or welfare.
- Florida statutes require **any person who knows or has reasonable cause to suspect** that a child, aged or disabled adult is abused, neglected or exploited shall **immediately report** such knowledge or suspicion to the Central Abuse Registry and Tracking System at:
  - **1-800-96-ABUSE (1-800-962-2873).**
RISK MANAGEMENT

- **Abuse and Neglect**
  - Records are **confidential**, unless advice is needed from Risk Management or hospital’s lawyer.
  
  - Persons reporting abuse and neglect will not be released to any person other than employees of the Department of Children and Family Services, the Abuse Registry or Child Protection Team.
  
  - The reporting person may choose to remain **anonymous**.
**Risk Management**

- **Grievances** (complaints)
  - Patient complaints
    - Use chain of command
      (i.e. supervisor, nurse manager, director).
  - Offer Grievance Hotline:
    - 386-231-3186
  - AHCA Consumer Services Unit:
    - 1-800-419-3456
  - Employee grievances
    - Refer to Employee Handbook
Drug/Alcohol Free Workplace

- Policy #300.45
- Use or abuse of drugs or alcohol can:
  - Impair performance and jeopardize the safety of others.
  - Expose the hospital to risks of property damage and loss.
- Testing is conducted:
  - Prior to employment.
  - During employment (for various reasons).
- FHMMC encourages employees to seek assistance to correct alcohol and/or drug abuse/dependency.
  - Aid is covered by insurance.
Patient Safety

Your responsibilities in keeping our patients safe include:

- **PREVENTION** of errors and accidents
- **REPORTING** errors, accidents and near-misses

How are errors and accidents prevented?

- By knowing and following policies and procedures.
- By knowing your role in prevention.
- By teaching patients and families.
- By reporting safety concerns.
What are some error prevention programs at FHMMC?

- **Fall Prevention** – educates patient and family of ways to prevent falls.
- **Speak Up Program** – empowers patient to ask questions about their care.
- **National Patient Safety Goals** (apply to all hospitals)
- The 6 Rights of Medication Administration
  - The Right Patient
  - The Right Time
  - The Right Documentation
  - The Right Medication
  - The Right Dose
  - The Right Route
PATIENT SAFETY

BUILDING A SAFE ENVIRONMENT FOR OUR PATIENTS

What to do if you have a safety or quality concern:
- Talk to your charge person, supervisor, manager or director.
- Write a special concerns form.
- Call the Risk Management Department.
- Call the Performance Improvement Department.

Reporting safety and quality concerns is important to help FHMMC correct problems.
- If concerns are not resolved, staff may contact The Joint Commission at 1-800-994-6610.
- There will be no retaliatory discipline for reporting concerns to the organization or The Joint Commission.
FOCUS ON SAFETY
NATIONAL PATIENT SAFETY GOALS
The Joint Commission Board of Commissioners has approved National Patient Safety Goals and requirements applicable to hospitals.
NPSG
Goal 1

Improve the accuracy of patient identification
IMPROVE THE ACCURACY OF PATIENT IDENTIFICATION

1.01
Use at least 2 patient identifiers when providing care, treatment or services:

- Name and DOB
- Use patient arm band ONLY when scanning the FIN
IMPROVE THE ACCURACY OF PATIENT IDENTIFICATION

1.03
Ensure that the correct patient gets the correct blood when receiving a blood transfusion.

Before initiating a blood or blood component transfusion:

- Match the blood or blood component to the order.
- Match the patient to the blood or blood component.
- Use a 2 person verification process or a 1 person verification process accompanied by an automated identification technology.
NPSG
Goal 2

IMPROVE THE EFFECTIVENESS OF COMMUNICATION AMONG CAREGIVERS
IMPROVE THE EFFECTIVENESS OF COMMUNICATION AMONG CAREGIVERS

2.03

Report critical results of tests and diagnostic procedures on a timely basis.
NPSG
Goal 3

Improve the safety of using medications
IMPROVE THE SAFETY OF USING MEDICATIONS

3.04

Label all medications, medication containers (e.g. syringes, medicine cups, basins), or other solutions on and off the sterile field in peri-operative and other procedural settings.
IMPROVE THE SAFETY OF USING MEDICATIONS

3.05

Reduce the likelihood of patient harm associated with the use of anticoagulation therapy.
3.06
Maintain and communicate accurate patient medication information.
Obtain accurate patient medication information.
Define the types of medication.
Compare the patient medication information.
Provide the Patient written medication information.
Explain the importance of managing medication.
NPSG
Goal 7

Reduce the risk of health care-associated infections
REDUCE THE RISK OF HEALTH CARE-ASSOCIATED INFECTIONS

7.01

Comply with current World Health Organization (WHO) Hand Hygiene Guidelines or Centers for Disease Control and Prevention (CDC) hand hygiene guidelines.
REDUCE THE RISK OF HEALTH CARE-ASSOCIATED INFECTIONS

7.03
Implement evidence based practices to prevent health care associated infections.
REDUCE THE RISK OF HEALTH CARE-ASSOCIATED INFECTIONS

7.04 Implement evidence-based practice to prevent central line-associated infections.
REDUCE THE RISK OF HEALTH CARE-ASSOCIATED INFECTIONS

7.05
Implement evidence-based practice to prevent infection to a surgical site.
REDUCE THE RISK OF HEALTH CARE-ASSOCIATED INFECTIONS

7.06
Implement evidence-based practice to prevent indwelling catheter-associated urinary tract infections.
NPSG Goal 15
IDENTIFY PATIENT SAFETY RISKS
15.01 The organization identifies patients at risk for suicide.

- [Applicable to psychiatric hospitals and patients being treated for emotional or behavioral disorders in general hospitals—NOT APPLICABLE TO CRITICAL ACCESS HOSPITALS)]
NPSG
Goal UP 1
Prevent Mistakes in Surgery
**Prevent Mistakes in Surgery**

**UP 1.01**
Conduct a procedure verification process.

**UP 1.02**
Mark the correct procedure site.

**UP 1.03**
Pause and perform a time-out before the surgical procedure.
**Body Mechanics**

**Four basic steps to correct lifting**

1) Bend knees, hips, and maintain low center of gravity.
2) Spread feet apart to create wide base.
3) Maintain proper body alignment and keep center of gravity directly over the base of support.
4) Keep load close. Lift with legs and stand up in a smooth, even motion.
Universal/Standard Precautions

Health care workers are required to treat all human blood and bodily fluids as if it were infected with a blood borne disease.
Infection Control

- According to the CDC, a “significant exposure” is:
  1) Exposure to blood or bodily fluids by skin puncture.
  2) Exposure of mucous membranes to visible blood or any bodily fluids, with the exception of perspiration.
  3) Exposure of compromised skin to visible blood or bodily fluids.

- Post-Exposure Steps:
  1) Immediately wash/flush skin or mucous membranes.
  2) Report exposure to your instructor.
INFECTION CONTROL

- Personal Protective Equipment (PPE) Includes:
  - Gloves (most widely used)
  - Masks
  - Gowns
  - Lab coats
  - Resuscitation devices
  - Aprons
  - Protective eye wear
  - Shoe covers

- FHMMC provides PPE and instructions.
- Employees must use the provided PPE!
**Infection Control**

- **Avoid Needle Stick (SHARPS) Injuries**
  - **Don’ts:**
    - DO NOT recap by hand.
    - DO NOT bend, shear, or break contaminated needles or other sharps.
    - DO NOT overfill the “SHARPS” container.
  - **Do’s:**
    - Use a mechanical device or one-handed “scooping” to recap.
    - Utilize brush and dustpan or forceps to pick up SHARPS
    - Use biohazard puncture-resistant, leak-proof “SHARPS” container to dispose of contaminated needles.
    - Replace “SHARPS” containers when 2/3 full.
Hand hygiene is the most important step in preventing infections.

- **Hand washing steps:**
  - Use soap and warm water.
    - Hands visibly soiled.
    - Caring for patients with C. diff.
  - Wash at least 15 seconds.
  - Include palms, backs of hands, wrists, between fingers, and under fingernails.
  - Turn faucet off with paper towels.
- **Alcohol based products** (alcohol foam)
  - Use recommended amount when appropriate for hand disinfection.
  - Rub hands together until cleared.
INFECTION CONTROL

- Tuberculosis (TB)- Airborne communicable disease

- Tuberculosis Prevention:
  - Obtain/follow-up routine PPD test.
  - If infected, medication decreases risk of developing the disease.
  - Follow isolation procedure and Universal/Standard Precautions.
Infection Control

- Caring for Patients with Tuberculosis
  - Wear N95 filtration mask fitted by Florida Hospital or special hood.
    - Students do not enter airborne precaution rooms.
  - Keep negative pressure room closed.
  - Instruct patient to cover mouth/nose when coughing or sneezing and to discard soiled tissues in waste container.
  - Patients that have TB, other than pulmonary TB, do not need to be on airborne precautions.
**Infection Control**

- **Transporting Isolation Patients**
  - Patient must wear isolation garb outside of the isolation room.
  - Patient can transmit microorganisms.
  - Transporting is performed only as necessary.
    - See Policy #1000.16 in Infection Control Manual.
Isolation Guidelines are available in the yellow Infection Control Manual

MRSA
VRE
TB
C Diff

The OSHA guideline is available for your review upon request.
Infection Control

- **Biohazard Waste Handling**
  - Hazardous
    - Regulated medical waste such as absorbent materials saturated with blood, body fluids, or excretions.
  - Non-hazardous
    - Most other soiled waste including paper and food.
  - OSHA
    - Defines regulated waste as items contaminated with blood or bodily fluid.
Infection Control

- **Biohazard Waste Handling**
  - International biological hazard symbol
  - Keep regulated and non-hazardous waste separate
  - Contact instructor if spill occurs
  - Hold biohazard waste bags away from body
EMERGENCY PREPAREDNESS

- **Master Plan**
  - Saves lives during disaster
  - Enables a quick and effective response to an emergency situation
  - Practice drills held twice a year

- **To Report an Emergency Dial**
  - On site
    - FHMMC - 2222
    - Oceanside - 4444
  - Off-site - 911
EMERGENCY PREPAREDNESS

- Flipcharts located in the hospital contain basic information for response to each code.

- Disaster Plan in Safety Manual.
  - Located in each department.
  - Refers to individual’s role during disaster.
  - Backup communication systems.
    - Power failure telephones (PFT’s)
    - Cell phones
    - 2-way radios
    - Ham radio
# Emergency Codes

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Code Red</strong></td>
<td>Fire or Explosion</td>
</tr>
<tr>
<td><strong>Code Black</strong></td>
<td>Tornado</td>
</tr>
<tr>
<td><strong>Code Gray</strong></td>
<td>Hurricane</td>
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<tr>
<td><strong>Code Orange</strong></td>
<td>Hazardous Material Spill</td>
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<tr>
<td><strong>Code White</strong></td>
<td>Disaster Plan</td>
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<tr>
<td><strong>Code Yellow</strong></td>
<td>Bomb Threat</td>
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<tr>
<td><strong>Code Pink</strong></td>
<td>Infant/Child Abduction</td>
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<tr>
<td><strong>Code Green</strong></td>
<td>Security Assistance Needed</td>
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<tr>
<td><strong>Code Green Strong</strong></td>
<td>Additional Staff to Respond</td>
</tr>
<tr>
<td><strong>Code Green Lockdown</strong></td>
<td>Dangerous Situation – Stop Movement Within the Building</td>
</tr>
</tbody>
</table>
# Emergency Codes

<table>
<thead>
<tr>
<th>Code Rapid Response</th>
<th>Significant Change in Patient Condition</th>
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<tr>
<td><strong>Code Blue</strong></td>
<td><strong>Cardiopulmonary Arrest</strong></td>
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<tr>
<td><strong>Code Blue Broselow</strong></td>
<td><strong>Pediatric Cardiopulmonary Arrest</strong></td>
</tr>
<tr>
<td><strong>Code Blue Neonatal</strong></td>
<td><strong>Neonate Cardiopulmonary Arrest</strong></td>
</tr>
<tr>
<td><strong>Code STEMI</strong></td>
<td><strong>Acute ST elevations (heart related)</strong></td>
</tr>
<tr>
<td><strong>Code Neuro</strong></td>
<td><strong>New onset stroke symptoms</strong></td>
</tr>
<tr>
<td><strong>Code Adam</strong></td>
<td><strong>Missing Child</strong></td>
</tr>
<tr>
<td><strong>Code Silver</strong></td>
<td><strong>Missing Senior</strong></td>
</tr>
</tbody>
</table>
Fire Safety

- **Code Red**
  - Indicates a fire within the building.
  - First person to witness the fire must dial the following:
    - On site
      - FHMMC - 2222
      - Oceanside - 4444
    - Off site - 911
FIRE SAFETY

- **Code Red**
  - Know the location of the following:
    - Nearest fire extinguisher
    - Nearest fire alarm pull station
      - Entry into the stairwell
    - Evacuation route
    - Fire doors
    - Next safe fire zone (smoke compartment)
      - Prevents smoke from spreading for 2 hours
  - Ask a staff if you have any questions.
FIRE SAFETY

**Maintenance of a Safe Facility**

- Keep the following clear at all times:
  - Emergency exits
  - Fire-fighting equipment
  - Fire alarm pull stations
- Never use door wedges to keep doors open.
- Keep doors closed, unless controlled electromagnetically.
- Respiratory Therapy and/or Charge Nurse determine if and when oxygen supplied to the fire area needs to be shut off.
Fire Safety

Individual’s Role During a Code Red is RACE

**R** = Rescue
- Remove everyone in immediate danger.

**A** = Alarm
- Pull the nearest Fire Alarm Box and dial the appropriate emergency number.

**C** = Contain
- Close the door and isolate the fire.

**E** = Extinguish
- With proper fire extinguisher, fight the fire without endangering yourself.
FIRE SAFETY

Operation of a Fire Extinguisher **PASS**

P = Pull out the safety pin from the extinguisher.

A = Aim the nozzle at the base of the fire (stand about 10 feet away).

S = Squeeze the handle.

S = Sweep the nozzle from side to side.
HAZARDOUS MATERIALS AND WASTE

- **Material Safety Data Sheet (MSDS)**
  - Contains the name of a chemical, manufacturer, hazardous ingredients, health hazards, first aid procedures, spill/leak information and PPE required.
  - **MSDS** information is now available on the FHMMC ARC under “I need to ACCESS” MSDS.
  - Unknown, hazardous, or large spill requires the following:
    - A secured area
    - Notify instructor or staff member
    - Dial hospital specific emergency number to announce **Code Orange**
Security relies on the cooperation of **ALL** employees.

Employees can assist Security by:
- Reporting observations or suspicious people
- Knowing security policies/codes and relation to your job.
- Wearing an ID badge while on hospital property.
- Being aware of unknown people without badges.
- Reporting all incidents large or small.
- Safeguarding all assigned keys, passwords, and access codes.
LOGISTICS

- **Parking:**
  - FHMMC – South end of the MOB parking lot near the retention pond
  - Oceanside – South parking away from the ED

- **Smoking policy:**
  - All facilities are **Smoke Free.**
    - includes your personal car in our parking lots.

- **Main phone numbers:**
  - FHMMC  386-231-6000
  - FHO  386-672-4161
**PAIN MANAGEMENT**

- Pain is whatever, wherever and to what degree the patient says it is.
- Tolerance for pain is variable depending upon the person.

**Assessment** of pain is performed:
  - Upon admission
  - Pre/Post any procedure
  - As the 5\textsuperscript{th} vital sign
    - Ask the patient to report his/her pain level with every vital sign check and document.
  - Within 1 hour after administration of any analgesic.
  - Any employee who witnesses a patient in pain is obligated to report the information to the appropriate nurse.
**COMMUNICATION**

- **Call Lights**
  - It is *everyone’s* responsibility to work together and meet the needs of the patients and their families.
  - Relay information to the appropriate personnel.
  - Before leaving the room always ask “Is there anything else I can do for you? I have the time.”
The Eight Essential Behaviors of Hourly Rounding and Addressing Patients

- Use opening key words to help reduce the patient’s anxiety *(AIDET)*.
  - **A** – Acknowledge the patient (“Good afternoon Mrs. Smith”)
  - **I** – Introduce yourself (“I am Nancy. I will be your nurse today.”)
  - **D** – Duration – Convey how long you will be caring for the patient (“I will be caring for you until 7 pm tonight Mrs. Smith”)
  - **E** – Explain to the patient what he or she can expect (“Mrs. Smith, I want to take a moment to go over your schedule today as far as what tests you will be having so you will know better what to expect”)
  - **T** – Thank you – Convey to the patient your appreciation (“Mrs. Smith, thank you for the opportunity to care for you today”)
PATIENT/FAMILY EDUCATION

General

• Assessment of learning needs:
  - Initiated upon admission for inpatients.
  - Initiated prior to invasive procedures for outpatients.
  - Ongoing throughout hospital stay.
  - Considers cultural and religious practices, desire and motivation to learn, physical and/or cognitive limitations, and language barriers.

  • FHMMC offers the Language Line for those with limited English.
Patient/Family Education

General

- Assessment of learning needs:
  - All disciplines are involved with patient education.
  - Assessment and Response to education is documented on the Interdisciplinary Patient/Family Education Record.
  - Patient/family may demonstrate the skill or verbalize understanding.
  - Designated areas for education materials are found on each unit and Cerner.
FOR YOUR TIME!

Please have a wonderful experience at FHMMC.