

STEWARD HEALTH  
CARE SYSTEM

# Code of Conduct

You can make a difference.



Steward

AUGUST 2011

## A Message from our CEO



Dear Colleagues,

The mission of Steward Health Care System LLC (Steward) is to serve the needs of our communities by delivering the highest quality care with compassion and respect. We accomplish this mission in an environment governed by complex local, state and federal rules and regulations, by which we must abide.

Steward is committed to behaving and doing business honestly, responsibly and in accordance with laws and regulations.

Because compliance may not always be an intuitive process, this Code helps you understand how to fulfill that commitment with the integrity and professionalism that embodies world-class health care.

Compliance is in your every day choices. Regardless of rank or status, it is the responsibility of every board member, officer, employee, physician, volunteer, vendor and agent (“Steward workforce members”) to understand and act according to the standards set forth herein. Please read it carefully.

Consider your actions in light of these standards and speak up if you are unsure or concerned that something doesn’t seem right. You are personally responsible for doing so. You can contact your manager or a member of the Office of Corporate Compliance and Privacy (OCCP) at 617-419-4732 or by sending an e-mail to [compliance@steward.org](mailto:compliance@steward.org). You may also report concerns anonymously in good faith and without fear of retaliation by calling the Compliance Support Line at 1-800-699-1202.

Steward communities place enormous trust in us. There are simple things you can do to ensure that, as an organization, we maintain and build upon that trust. Learn the concepts of this Code of Conduct, ask questions when in doubt, and report concerns. We have a zero tolerance policy for violations of these standards or related policies and procedures.

Our mission, reputation and future success hinges on the excellent care we deliver and the integrity with which we deliver it. Thank you for your dedication and diligence.

A handwritten signature in black ink that reads "Ralph de la Torre". The signature is written in a cursive, flowing style.

**Ralph de la Torre, MD**  
**Chairman and Chief Executive Officer**

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Steward reserves the right, in its sole discretion, to modify any aspect of its Compliance Program, including, without limitation, this Code and Steward policies, at any time, for any reason, and with or without notice. If there is a conflict between this Code and a specific policy, the specific policy currently in effect will govern. The intranet version will contain any changes made after the date of the printed publication and will be the most current version of the Code of Conduct. This Code is available on the intranet website on the Compliance home page.

# Section I: Understanding Our Code of Conduct

## Introduction

All of us want to be proud of the work we do at Steward and know that we have done our part to serve the needs of our communities by delivering the highest quality care with compassion and respect. We also want to maintain our reputation for high ethical standards. But in today's complex world, no organization can assume that the right course of action is always clear. Even organizations with great reputations must invest in protecting that reputation. To help us all fulfill our obligations to our patients, our communities and each other, we have designed this Code of Conduct.

Please read this Code of Conduct and keep it handy for your reference. You will be asked to acknowledge your commitment to adhering to these standards.

## Scope

Every person conducting business for Steward must follow this Code of Conduct, together with all applicable laws and Steward policies. This includes every board member, officer, employee, physician, volunteer, vendor and agent ("Steward workforce members"). This Code of Conduct also applies to all of Steward's locations, affiliates and subsidiaries.

## Your Responsibilities

One of your responsibilities is to follow the laws and Steward policies as you conduct business on behalf of Steward. While this Code of Conduct has been written to familiarize you with many of the policies that apply to Steward, it does not supersede them or act as a substitute for reading each policy that applies to your specific job or service responsibilities.

*Note: For purposes of this document, the term "laws" also refers to regulations. The term "Steward policies" includes all policies, standards, procedures and other governance documents.*

Remember, no written policy or code on its own can guarantee compliance with the law or ethical decision-making. Everyone must do their part. Here are some key things to keep in mind:

- Act with honesty and integrity
- Follow the law and Steward policies
- Participate in required compliance trainings
- Ask if you are unsure about what to do or have questions about this Code
- Report any known or suspected violations
- Cooperate with investigations of potential violations





## Additional Responsibilities of Managers

If you are a manager at Steward, you have additional responsibilities. You must lead by example and take steps to promote compliance. You must also prevent and report potential violations.

*Note: For purposes of this document the term “manager” includes supervisors, administrators, department heads, physician leaders or similar management positions at all levels.*

Here are some of the ways managers can fulfill these responsibilities:

- Serve as a positive role model in fostering a culture of compliance and ethical behavior. Don't give others the impression that it is okay to ignore policies or skip steps. Don't create or tolerate an environment where workforce members feel pressured to bend the rules.
- Guide workforce members on completing all required training on time. Regularly review policies that apply to them and make sure they know how to act in a manner consistent with this Code and Steward policies.
- Prevent problems before they happen. Respond to workforce members who raise concerns in a way that makes them feel at ease and secure.
- Report potential violations responsibly and promptly. Report problems that you suspect or that others share with you.

## Disciplinary Action

Failure to comply with this Code, Steward policies or applicable law will subject workforce members to disciplinary action up to and including termination of employment, to the extent permitted by law. Disciplinary measures may also be taken when managers ignore misconduct, or fail to take action to correct it.

## Section II: Resources for Getting Answers

### Resources for Getting Answers

Part of adhering to this Code of Conduct is seeking help when you need it. If Steward policies do not provide enough direction, ask your manager for clarification. If you are uncertain about the ethics or legality of an issue, please keep asking questions and seek additional guidance before proceeding.

There are several resources available to assist you when you have a question or need advice about the topics discussed in this Code of Conduct or about compliance in general.

Resources include:

#### RESOURCE CONTACT INFORMATION

|   |                                    |
|---|------------------------------------|
| Your Manager .....                                      | Refer to your department directory |
| Human Resources Support Center.....                     | 1-800-579-1222                     |
| Office of General Counsel (OGC) .....                   | 617-419-4716                       |
| Office of Corporate Compliance and Privacy (OCCP) ..... | 617-419-4732                       |

### Making the Right Decision

This Code of Conduct reflects our expectations for all Steward workforce members. The sections of the Code that follow contain compliance standards covering our responsibilities to our patients, the communities we serve and each other. In complying with these standards, you should ask yourself the following questions to aid in making the right decision about a possible course of action:

- Are my actions illegal or unethical?
- Could someone's life, health, safety, or reputation be endangered by my action?
- Am I being fair and honest?
- Would I be willing or embarrassed to tell my family, friends or coworkers?
- Would the reputation of Steward be harmed if the action were revealed in the newspaper?



## Section III: Reporting Potential Violations



### Reporting a Potential Violation

Each of us plays an important role in helping to meet our high standards for compliance with laws and Steward policies. *You can make a difference* by telling the appropriate person at Steward if you know of a problem or suspect something is wrong. At Steward, we value integrity, trust and respect. The earlier potential issues can be raised, the sooner they may be resolved.

### Calling Steward's Compliance Support Line

You can contact Steward's Compliance Support Line at 1-800-699-1202 to make an anonymous report in good faith without fear of retaliation.

Steward takes all calls to the Compliance Support Line very seriously and handles calls on a case-by-case basis. Internal investigations are handled in a manner that is as confidential as possible. Steward will determine whether misconduct has occurred and will take actions as appropriate.

If you make a report, you can call the Compliance Support Line back at any time during the process to request follow-up information. Please be aware that we may be limited in the information that we can share with you.

Note that internal investigations may take some time. Don't assume nothing is happening just because it takes a while to close a matter.

### Anonymity and Confidentiality

When you call Steward's Compliance Support Line, you may do so anonymously – you do not have to give your name. You may request to remain anonymous; however, this can limit our ability to fully investigate the matter. Therefore, you will be encouraged to identify yourself whenever possible.

When you choose to provide your name, any issues you report will be treated as confidential to the extent possible. This means your name will be shared only with others on a need to know basis in order to answer your questions or to look into the matter reported. However, in some cases, Steward may be required by law to reveal your identity. Also, it may not always be possible to keep your identity confidential, for example, in situations where you are one of a small number of people who know certain facts or you work in a small department where it may be obvious from the details who originated the complaint.

### Non-Retaliation

Steward policy prohibits intimidation or retaliation against workforce members and others who report a compliance concern in good faith and participate in good faith in an investigation or other proceeding related to such concern. This policy applies to reports made through Steward's Compliance Support Line, or those made through any of the resources identified in this booklet or in any other appropriate manner. Reprisals or retaliation against any person acting in good faith will not be tolerated.

## Section IV: Our Patients and the Community



### Patient Care

Steward is committed to delivering the highest quality care with compassion and respect.

As a Steward workforce member I will:

- Treat all patients with respect and dignity no matter their gender, race, color, national origin, ancestry, religion, disability (including history of disability and perceived disability), age, sexual orientation, genetic information, military status or any other characteristic protected by law;
- Respect our patients' spiritual and cultural values; and
- Not accept personal gifts from patients that might give the impression that our care may be influenced by gifts. Staff may accept homemade items with little or no marketable value, or perishable items which may be shared with other staff.

If I am a Steward physician or other patient care provider I will also:

- Provide only medically necessary goods and services, and
- Ensure that all goods and services that I provide meet professionally recognized standards for quality and safety.

### Emergency Care

Steward will provide all individuals with emergency medical treatment regardless of citizenship, legal status or ability to pay in accordance with the Emergency Medical Treatment and Active Labor Act (EMTALA).

As a Steward workforce member I will:

- Immediately assist any individual who arrives on Steward property and is in need of emergency medical treatment.

If I am a Steward emergency care provider I will also:

- Screen all patients requesting treatment to determine if a medical emergency exists and provide treatment until the patient is stabilized.

### Medical Records

Steward recognizes that medical records must be accurate and complete to ensure patient safety, quality of care and correct billing procedures.

As a Steward workforce member I will:

- Add information to medical records only as permitted by my job responsibilities;
- Ensure that all information that I add to a medical record is truthful and complete;
- Never change information in a medical record except through an approved amendment process;
- Never delete information in a medical record; and
- Ask my manager if I am unsure how to handle any situation involving medical records.



If I am a Steward physician or other patient care provider I will also:

- Document all care that I give to a patient accurately, clearly and completely within required time limits.

## Confidentiality and Privacy

Steward is committed to protecting patients' confidentiality and privacy in accordance with applicable laws and Steward policies. Steward is also committed to informing patients about their rights with respect to their health information.

As a Steward workforce member I will:

- Respect and protect our patients' confidentiality and privacy;
- Guard against improper use and disclosure of patient information;
- Use and disclose only the minimum amount of patient information necessary to do my job;
- Never access, use, disclose, store or transmit patient health information except as permitted by Steward policy and the Steward Health Care Notice of Privacy Practices;
- Refer requests for patient health information to the appropriate responsible party in accordance with department procedure; and
- Report any known or suspected access, use, disclosure, storage or transmission of patient health information in violation of current Steward policy.

## Proper Billing

Steward is committed to accurate reimbursement and billing practices. Steward devotes many resources to preventing and correcting billing errors to Medicare, Medicaid and other payors. The federal government and many states have enacted False Claims Act laws to pursue billing fraud, waste and abuse. Workforce members who suspect billing errors have an obligation to report these to their manager or the Office of Corporate Compliance and Privacy (OCCP) immediately.

As a Steward workforce member I understand that:

- Inappropriate submission of claims, such as intentionally submitting for payment services that are not covered or were not rendered, may be perceived as a false or fraudulent claim which can result in significant fines and/or penalties;
- Falsifying time sheets, work logs, or any other misrepresentation of effort that may in any way be used to construct a cost report on behalf of Steward or its workforce members may be considered a violation of the False Claims Act or fraud and abuse laws;
- Medical services provided to patients must be documented in a timely manner in the medical record to support the claims for services submitted; and

- I must inform my manager and/or OCCP if I know or suspect intentional or unintentional submission of incorrect bills, or retention of overpayments received.

If I am a Steward workforce member involved in the billing process I will:

- Never bill for services that I know or suspect to be inappropriate or not rendered;
- Never put information on a claim only because it will increase the chances of it being paid;
- Never alter billing information unless in accordance with Steward policies and procedures;
- Report any known or suspected billing problems, including time sheets, to my manager and/or OCCP; and
- Never take any retaliatory action against anyone because that person has reported a billing compliance concern.

If I am a Steward physician or other patient care provider I will also:

- Understand the applicable coverage rules governing the services I render;
- Recognize that I am ultimately responsible for the accuracy of any claim which is submitted for a service I have rendered; and
- Contact appropriate billing personnel or OCCP with any questions I have about the proper coding or billing of claims.

## Patient Referrals

Steward obtains patient referrals through legitimate sources, including as a result of its excellent reputation. Steward does not offer or provide compensation in exchange for patient business.

As a Steward workforce member I will:

- Never offer or give anything of value to anyone, including patients, in an attempt to obtain patient business.





## Section V: Our Relationship with the Government and Other Third Parties

### Vendor Interactions

Steward makes purchasing and contracting decisions based on what is best for the organization, our communities and for our patients. Steward is committed to ensuring that all decisions regarding the selection of vendors are made fairly and in the best interest of the organization, free from personal bias or the appearance of personal bias.

As a Steward workforce member I will:

- Adhere to the Vendor Interactions Policy with respect to accepting any type of compensation, gift or gratuity from any business who seeks to do business with Steward.

### Interactions with Regulators, Inspectors and Accrediting Agencies

Steward policy is to be open and honest with government regulators (or investigators), inspectors and accrediting agencies, and we strive to satisfy their requirements by following the law and applicable standards. Government investigators have the right to contact you at home for work-related issues. The Office of General Counsel (OGC) and OCCP should be contacted immediately about any government inquiry or investigation. In most situations, workforce members have the right to decide when and where the interview will be conducted. For more information about your rights regarding government investigators, please contact OGC and/or OCCP.

As a Steward workforce member I will:

- Be open and honest in all dealings with government regulators, inspectors and accrediting agencies;
- Never offer a gift, bribe or thing of value to any government regulator, inspector or accrediting agency; and
- Report to your manager any regulator's request for oral or written information, documentation, or access to data.

## Financial and Political Interests

Steward does not allow its workforce members to use their positions to advance their own personal, financial or political interests or the interests of others.

As a Steward workforce member I will:

- Only use my position at Steward or Steward resources to financially benefit Steward or Steward entities;
- Never use Steward resources to advance my own interests;
- Truthfully disclose my or my immediate family member's financial interests in a company doing business with Steward in accordance with relevant Steward policies, including the Conflict of Interest Policy;
- Never make a donation on behalf of Steward or imply that a donation is made on behalf of Steward unless authorized as part of my job responsibilities; and
- Not use Steward resources for federal, state or local political interests beyond what is permitted by law and with appropriate advance authorization from Steward senior management.

As a Steward physician or other patient care provider I will:

- Never make a patient referral to any entity in which I have or my immediate family member has a financial interest unless such referrals are lawful and disclosed to Steward in advance through OGC.

## Conflict of Interest and Outside Activities

Steward workforce members must avoid situations in which their personal interests could conflict, or reasonably appear to conflict, with the interests of Steward. For example, any opportunity for personal financial gain apart from a workforce member's normal compensation is a potential conflict of interest.

Steward workforce members should act with loyalty to Steward and refrain from engaging in outside activities that would interfere with their job responsibilities.

Workforce members should avoid outside employment or activities that could have a negative impact on their job performance, conflict with their obligation to Steward, or negatively impact Steward's reputation in the community. Steward workforce members who think they may have a conflict of interest due to investments or outside activities should disclose it to their manager or OCCP.

As a Steward workforce member I will:

- Ensure that my outside activities do not interfere with my job responsibilities;
- Disclose to my manager or OCCP if I have a second job with any vendor or contractor of Steward; and
- Comply with any further disclosure obligations I may have under my employment contract or applicable policy.



## Section VI: Our People and Our Workplace



### Protection of Steward Assets

Steward takes efforts to protect its assets against improper use so as to maximize its resources for patient care. Steward assets should be used for the benefit of Steward and may not be used by workforce members or others for personal gain. Assets are more than equipment, inventory, funds and office supplies.

Assets include medical records, concepts, financial data, intellectual property rights, research data, business strategies, plans about Steward's business activities and all Steward systems.

All Steward systems and the records and information stored on them are the property of Steward regardless of how you mark or label them. Generally you should not expect any confidentiality or privacy when using Steward systems. Steward may at its sole discretion inspect your files and messages or monitor your internet usage at any time without advance notice or consent. Use of a Steward system constitutes consent to inspection, monitoring and access by Steward, as permitted by law.

As a Steward workforce member I will:

- Be cost conscious;
- Guard against fraud, waste and abuse of Steward assets;
- Only use Steward assets, systems and records for conducting Steward business;
- Look for ways to improve efficiency; and
- Never borrow or remove Steward property without written permission.

### Protection of the Workplace and the Environment

Steward is committed to providing a safe workplace, using natural resources responsibly, minimizing waste, and developing innovative ways to protect the environment.

As a Steward workforce member I will:

- Strive to maintain a safe and healthy environment;
- Follow all rules for disposing of medical waste and dangerous or poisonous materials;
- Follow all rules regarding the storage of hazardous substances;
- Accurately and promptly file all required reports to state and federal environmental and workplace safety agencies, if required as part of my job responsibilities; and
- Report to my manager and/or facilities management if I learn of or suspect of any dangerous or unsafe conditions in the work area or of any unsafe storage or disposal activities.



## Workplace Civility

Steward recognizes that excellent care is best delivered in a work environment of respect and cooperation.

As a Steward workforce member I will:

- Treat all coworkers and individuals with respect, patience and courtesy;
- Refrain from conduct that would intimidate or threaten other individuals;
- Never engage in abusive or disruptive behavior;
- Not tolerate any threats of harm - either direct or indirect – or any conduct that harasses, disrupts or interferes with another workforce member’s work or performance or that creates a hostile work environment; and
- Never use alcohol or illegal drugs while working or while on any Steward premises. However, Steward workforce members may responsibly consume alcohol at events sponsored by Steward or attended in conjunction with their job duties on Steward property with the appropriate approvals.

## Licensure and Professional Certifications

To deliver on our commitment to providing world class health care, many of our workforce members maintain professional licenses and certifications (e.g., MD, NP, PA, PharmD, RN, CPA, CISA, attorney-at-law, etc.). Anyone holding professional licenses and certifications has a personal responsibility to maintain such licenses and certification in good standing through timely renewals, and (where required) the attainment of the appropriate level of continuing education.

As a Steward workforce member with a professional license and/or certification I will:

- Maintain all pertinent licenses and certifications in good standing at all times, and
- Report to my manager and/or Human Resources any disciplinary action that is pending or taken against me by any licensing body in any jurisdiction.



## Excluded Individuals and Entities

Steward takes precautions to ensure that individuals and entities that have been sanctioned from participating in government health programs do not work at or do business with Steward.

The federal government has the authority to exclude individuals and entities from Federally-funded health care programs (Medicare, Medicaid, and other federally sponsored health care programs) pursuant to sections 1128 and 1156 of the Social Security Act.

Exclusions are imposed for a number of reasons including criminal convictions. For example, exclusions can result from actions including but not limited to: 1) misdemeanor convictions related to health care fraud other than Medicare or a State health program, fraud in a program (other than a health care program) funded by any Federal, State or local government agency; 2) misdemeanor convictions relating to the unlawful manufacture, distribution, prescription, or dispensing of controlled substances; 3) suspension, revocation, or surrender of a license to provide health care for reasons bearing on professional competence, professional performance, or financial integrity; 4) provision of unnecessary or substandard services; 5) submission of false or fraudulent

claims to a Federal health care program; 6) engaging in unlawful kickback arrangements; 7) defaulting on health education loan or scholarship obligations; and 8) controlling a sanctioned entity as an owner, officer, or managing employee.

As a Steward workforce member I will:

- Report to my manager and/or the Office of Corporate Compliance and Privacy (OCCP) immediately if any issue or legal action is pending or taken against me that may result in my exclusion from participating in government health programs, and
- Report to my manager and/or OCCP immediately if I ever learn or suspect that an individual or entity doing work for Steward has been sanctioned or disciplined, or is being investigated by any government health program.

## Section VII: Our Business

### Proprietary Information and Trade Secrets

Steward takes reasonable steps to protect its confidential information, its intellectual property, and all information related to its business.

Workforce members must safeguard Steward proprietary information and trade secrets. This includes information that is not generally disclosed to the public or information that is useful to Steward's competitors, such as:

- Patient information
- Financial data
- Planned new projects
- Information about areas where Steward intends to expand
- Wage and salary data
- Workforce member information
- Capital investment plans
- Projected earnings
- Changes in management or policies
- Information about the physical security of our facilities or systems
- Unpublished research data

Workforce members are also expected to refuse unauthorized confidential information and trade secrets of any other company, including our competitors.

As a Steward workforce member I will:

- Refuse to disclose Steward proprietary information and trade secrets outside

of Steward or only in conjunction with the Office of General Counsel, which can provide appropriate disclosure agreements for trade secrets or confidential information;

- Discuss proprietary information with others internally only on a need to know basis;
- Be vigilant about inadvertently discussing confidential information or trade secrets in either social conversations or in routine business relations; and
- Never use the Steward name or logos, except as permitted by my job responsibilities.

### Business Records

Steward is committed to maintaining high ethical standards of business conduct and to keeping accurate records of its business activities.

As a Steward workforce member I will:

- Ensure that all information that I enter into a business record is accurate and truthful to the best of my ability;
- Never omit relevant information from a business record; and
- Retain all information in accordance with internal record retention schedules or longer, if instructed by my manager or by the Office of General Counsel.





## Financial Integrity

Steward has a responsibility to provide full, fair, accurate, timely and understandable disclosure in reports and documents that are filed with governmental and regulatory agencies.

As a Steward workforce member I will:

- Keep Steward records accurate, true, and complete;
- Ensure that reports and documents that Steward submits to governmental and regulatory agencies are full, fair, accurate, timely, and understandable; and
- Cooperate fully with Steward's independent public accountants and never take any action to manipulate or mislead them.

## Media Relations

We should always exercise care not to disclose confidential, proprietary information through public or casual discussions with the media (e.g., newspapers, magazines, trade publications, radio, television or other external sources seeking information about Steward or its patients). External inquiries from the media must be referred to the appropriate Steward resource for a response. In general, refer all media inquiries to the Steward Director of Media Relations. While Steward's standard policy is to respond to external inquiries in an honest, candid and appropriate manner, responses may be limited by confidentiality requirements or other related concerns.

As a Steward workforce member I will:

- Refer any request for information by a member of the media to the Steward Director of Media Relations.

## Social Networking

We expect all who participate in social media (e.g., blogs, wikis, social networks, virtual worlds, or any other kind of social media) personally or on behalf of Steward to understand and follow Steward's guidelines. These guidelines will continually evolve as new technologies and social networking tools emerge—so be sure to routinely check Steward policies.

As a Steward workforce member I will:

- Not make any inaccurate or disparaging comparisons, claims, representations or statements about Steward;
- Not disclose proprietary information of Steward including business or financial information;
- Not represent that I am communicating the views of Steward, unless required by my job duties;
- Not use or disclose any workforce member, subscriber or patient identifiable information of any kind; and
- Always adhere to Steward policies regarding harassment and professional conduct.

## Section VIII: Additional Information about Our Office of Corporate Compliance and Privacy (OCCP)

OCCP is responsible for implementing Steward's Compliance and Privacy Program which promotes the prevention, detection and resolution of conduct that does not conform to law and Steward compliance and privacy policies. The Chairman and CEO, and the Compliance Committee of the Board provide oversight of OCCP and the Compliance and Privacy Program.

OCCP is available to receive all reports of suspected violations of laws and Steward compliance and privacy policies. OGC is also available to assist with questions about how to comply with the law. The OCCP conducts internal investigations into reported concerns about potential compliance violations and assists management with taking steps to prevent recurrence.

OCCP Compliance Officers and staff work with each Steward entity as a resource for questions and concerns about compliance and the current health care environment. They work with managers and appropriate committees at each entity to help ensure compliance with law and Steward compliance and privacy policies. The Compliance Officers and OCCP staff also provide education on compliance topics for all Steward workforce members, conduct compliance auditing and monitoring activities as well as other compliance and privacy program activities.

For more information about the OCCP or the Steward Compliance and Privacy Program call 617-419-4732 or e-mail [compliance@steward.org](mailto:compliance@steward.org).



## Section IX: Frequently Asked Questions



**Q:** Does the U.S. or state government encourage compliance programs?

**A:** Yes. The government would like the health care industry to adopt a model of self-compliance to prevent fraud and abuse.

**Q:** As a workforce member, I receive my medical care here. Is my medical record kept confidential?

**A:** Yes. Steward policy requires all employees to respect the confidentiality of every patient and his or her information. Confidentiality standards are the same for ALL patients.

**Q:** Of course compliance with Steward policies is important, but can I skip a few steps in a procedure in order to meet our goals, especially when some of the requirements seem like administrative red tape?

**A:** No. Taking shortcuts is never acceptable. Procedures have been designed to help our organization meet specific goals and objectives. If you believe a requirement is unnecessary, discuss the issue with your manager.

**Q:** What should I do when I can't answer a question from a government official or other regulatory or accrediting body?

**A:** If you do not know the answer, say so and tell the inspector you will get the answer promptly. Do not guess or make up a response. Also, do not present information in a misleading way or omit critical information.

**Q:** Can I use my Steward computer for personal matters?

**A:** Generally, you may access e-mail and the internet using company systems for limited personal purposes under certain conditions. For example, your use should not violate the law or Steward policy or impact your job performance. Personal use must take place before or after work, or during breaks.

**Q:** I am moving to another department in Steward. Should I take all of my records with me?

**A:** Many of your electronic records will automatically transfer with you, such as e-mails and those stored in electronic folders. However, records that are part of your old department's business should stay with that department. Before you transfer, talk with your manager about the best way to ensure that the proper records (including electronic records) remain with your old department.

Q: I need to send confidential data to a vendor that is doing work for Steward. What should I do?

A: You should obtain approval from your manager and your manager needs to make sure that all appropriate protections are in place with any outside company, institution or individuals before any confidential information is revealed. If you have any question you may contact the Office of General Counsel or OCCP.

Q: During a neighborhood picnic, a reporter asked me what I thought about a political candidates' position on issues that face Steward. I wasn't sure what to say. How should I respond?

A: You should politely decline to respond. Your personal opinion might be misinterpreted as an official statement from Steward. Any public statement about Steward should be reserved for the Media Relations Department. The best thing to do is to say that you don't speak for Steward and refer the reporter to the Steward Director of Media Relations.

Q: When should I turn to the Steward Compliance Support Line?

A: You should call the Compliance Support Line if you suspect a violation of the Code of Conduct, a Steward policy or applicable law. If you have a general question about compliance or privacy, you may call the OCCP Main Line at 617-419-4732 or e-mail [compliance@steward.org](mailto:compliance@steward.org).

COMPLIANCE  
IS **EVERYONE'S**  
RESPONSIBILITY



Steward

**Steward Health Care System LLP** 500 Boylston Street Boston, MA 02116  
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**Annual Safety Training  
St. Elizabeth's Medical Center**

**Main HR Number  
617-789-2968**

Believe.

Steward



# Annual Mandatory Education

- Values
- Part One – Infection Control
- Part Two – Workplace Issues
- Part Three – Rehabilitation/Ergonomics
- Part Four – Risk Management/Compliance
- Part Five – Fire and Security/Oxygen Safety
- Part Six – Confidentiality and Privacy
- Part Seven – Electrical Safety/Clinical Engineering
- Part Eight – Emergency Preparedness
- Part Nine – Chemical Spills, Chemical Hygiene, Radiation
- Part Ten – Diversity/Interpreter Services



# Who are we as a system?

St. Elizabeth's is a part of Steward Health Care Family

- Second largest health care provider in the Commonwealth
- Steward Health Care is currently comprised of:
  - Over 30 Hospitals
  - Steward Home Care
  - Steward Hospice
  - Laboure College
  - Por Christo
  - Steward Physician Network (SPN)
  - Steward Research Institute

More than 37,000 employees serving more than one million patients annually in more than 150 communities across Massachusetts!

Believe.

Steward



# Mission Statement

**Steward Health Care is committed to providing the highest quality care with compassion and respect.**

We dedicate ourselves to:

- Delivering affordable health care to all in the communities we serve
- Being responsible partners in the communities we serve
- Serving as advocates for the poor and underserved in the communities we serve



# Values

- **Compassion:**
  - Providing care with empathy in such a way that the person experiences acceptance, concern, hopefulness and sensitivity
- **Accountability**
  - Accepting responsibility for continuous performance improvement, embracing change, and seeking new opportunities to serve.
- **Respect**
  - Honoring the dignity of each person
- **Excellence**
  - Exceeding expectations through teamwork and innovation
- **Stewardship**
  - Caring for and responsibly managing patients entrusted to our care.



# Expected Behaviors – How we live our values

- The culture of an organization is revealed not primarily in its documents, or in formal statement about itself, but in the unspoken informal behavior patterns, rituals, roles and relationships within the group.

**We encourage a culture that lives the values we believe in.**

## **That means we all:**

- Embody the mission and values of Steward Health Care daily – no excuses
- Work as a team to create a world-class health care environment
- Provide an exceptional patient centered environment for patients, families, visitors, and co-workers.



# It's All About You!

*You are what people see when they arrive here.*

*Yours are the eyes they look into when they're frightened and lonely*

*Yours are the voices people hear when they ride the elevators and when they try to sleep and when they try to forget their problems.*

*You are what they hear on their way to appointments that could affect their destinies and what they hear after those appointments.*

*Yours are the comments people hear when you think they can't.*

*Yours is the intelligence and caring that people hope they'll find here.*

*If you're noisy, so is the hospital. If you're rude, so is the hospital. And if you're wonderful - so is the hospital.*

*No visitors, no patients can ever know the real you, the you that you know is there, unless you let them see it. All they can know is what they see and hear and experience.*

*And so we have a stake in your attitude and in the collective attitudes of everyone who works at the hospital.*

*We are judged by your performance.*

*We are the care you give, the attention you pay, The courtesies you extend.*

*You are this hospital.*

# Infection Prevention

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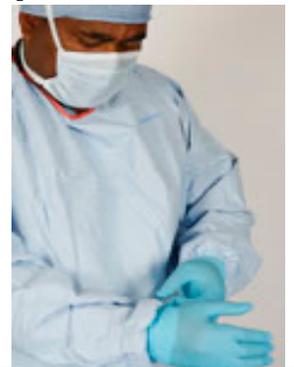
# Infection Prevention is Everyone's Responsibility

- **The Centers for Disease Control and Prevention (CDC) has a two-level system for prevention:**
  - **Standard Precautions**
  - **Transmission-Based Precautions**



# Standard Precautions Include:

- **“Clean hands”**
- **“Cover Your Cough”**
- **Personal protective equipment (PPE)**
- **Treating all blood and bodily fluids and non-intact skin, with exception of sweat, as infectious (can cause you to be sick)**



# Hand Hygiene

*A Steward Healthcare HAI Collaborative Initiative*

Believe.

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# Background

The CDC estimates that each year nearly 2 million patients in the U.S. get an infection in hospitals, and about 90,000 of these patients die as a result of their infection.

The cost of treating these infections is estimated to be in excess of **\$4,500,000,000!**

Many studies have shown that the bacteria that cause hospital-acquired infections (HAI) are most frequently spread from one patient to another on the hands of healthcare workers.

*Cleaning hands before and after having contact with patients is thought to be the **single most important measure** for preventing the spread of bacteria in healthcare settings.*



# Hand Hygiene

## What About Waterless Hand Sanitizers?

- Usually Alcohol-Based
- Antimicrobial by Nature
- Meant to be Used Without Running Water or Paper Towels
- Not Sink-Dependent (more convenient)
- Use in *preference* to soap and running water

***EXCEPT ...***



# When to Wash Hands with Soap and Running Water

- Wash hands with soap and running water:
  - Use of soap and water for visibly dirty hands and after caring for a patient on **“Special Contact Precautions”** for diarrheal infections.
  - Before preparing, handling, serving or eating food
  - After personal body functions, such as using the toilet or blowing one’s nose



# National Patient Safety Goal 7: Reduce the Risk of Healthcare-associated infections

## The Center for Disease Control – 4 Moments of Hand Hygiene- The Before Moments

- **Before** having direct contact with patients
- **Before** putting on gloves
- **Before** engaging in an sterile procedure



# CDC Moments of Hand Hygiene Continued...

## The After Moments

- **After** contact with blood, body fluids, secretion, excretions, mucous membranes, non-intact skin or wound dressings
- **After** contact with a patient intact skin (taking a BP)
- **After** removing gloves
- **After** contact with the patient's immediate environment or objects in the environment (Bedside table, side rails)
- **After** handling specimens, soiled linen or clothing
- When moving from a “dirty body site” to a clean body site



# Glove use....

- Remember, glove use is **not** a replacement for hand hygiene
- Gloves must be removed after contact with patient or patient environment prior to touching clean equipment or personal items (such as cell phones or pagers)
- Hand hygiene must be performed **before** and **after** using gloves.



# Infection Prevention is Everyone's Responsibility

- **The Centers for Disease Control and Prevention (CDC) has a two-level system for prevention:**
  - **Standard Precautions**
  - **Transmission-Based Precautions**



# Patient Education on Hand Hygiene

- Patients should be encouraged to participate in their care and expect HCW clean their hands before rendering care.

REMINDE  
me to  
WASH  
my  
HANDS.

Excellent  
CARE IS  
in all our  
HANDS.

This  
is our  
BELIEF.



At St. Elizabeth's Medical Center, our staff are committed to excellent hand hygiene. We wash our hands with soap and water or hand sanitizer before and after each contact with every patient. If we don't, remind us.

**St. Elizabeth's  
Medical Center**

A STEWARD FAMILY HOSPITAL

WORLD-CLASS HEALTH CARE  
WHERE YOU LIVE



Believe.

Steward

# Clean Hands Include:

- Use of soap and water for visibly dirty hands and after caring for a patient on “Special Contact Precautions” for diarrheal infections.
- Use of an alcohol-based hand rub, such as Purell<sup>®</sup>, if your hands are not visibly dirty.
- Cleaning your hands is one of the most effective ways to prevent the spread infection.

# Four Moments of Clean Hands (Hand Hygiene) Include:

- Before and after touching a patient
- Before and after touching a patient's environment (bedside table, chair, equipment)
- After any possible body fluid contact
- Before doing any sterile procedure



You still have to clean your hands  
when gloves are used!

# CLEAN HANDS SAVE LIVES!

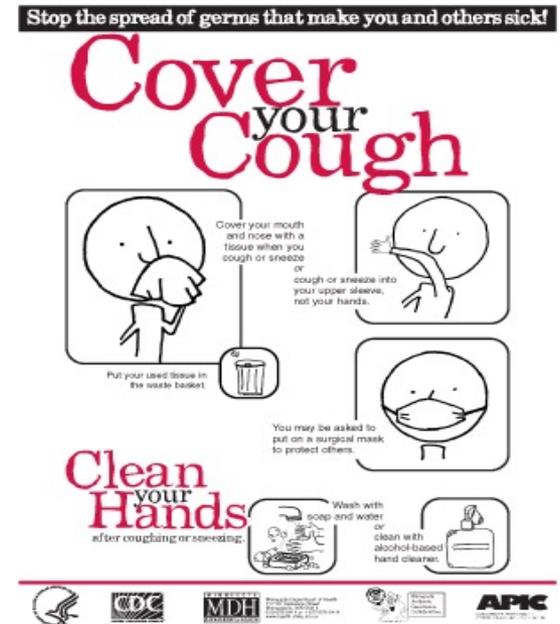
- *Hand Hygiene Compliance is KEY*
- *To Protecting Our Patients,*
- *And Protecting Ourselves:*



**Clean in, clean out  
every patient,  
every time!!!**

# Cover Your Cough Includes:

- Space yourself at least three feet and turn your head away from others
- Cough into a tissue
- Cough into your elbow if no tissue
- Put tissue into the trash
- Clean your hands



# Blood Borne Pathogens

Exposures usually occur:

- Through sharp injury (needle sticks) and splashes to eyes, mouth, nose and breaks in the skin

For Further information on Bloodborne Pathogens refer to St. Elizabeth's Exposure Control Plan.

# Blood Borne Pathogens Prevention Includes:

- Clean Hands
- Use of Personal Protective Equipment (PPE)
- Contain sharps and place in hospital-supplied biohazard container
- Use Safety devices only
- Never recap a needle
- Use “safe zones” or safety devices when available
- Hepatitis B vaccine for employees at risk for exposure to patients’ body fluids or non-intact skin

# What Do I do if Exposed to Blood and Bodily Fluids?

- Wash area with soap and water after an exposure to a sharp or splashes
- Rinse eyes, mouth and nose with clean water
- Notify your supervisor, director or manager
- Report to the Emergency Department immediately
- Follow up with EHS as soon as possible thereafter for further follow-up
- An employee incident report is completed for all actual and “near miss” exposure events.

# Regulated Waste

***“Medical Waste” is regulated waste that is considered “potentially infectious” or “physically dangerous”.***

Handling of such waste is regulated by the State Sanitary Code and OSHA’s Bloodborne Pathogen Standard.

- Must have biohazard labeling



# Transmission-Based Precautions Include:

- Airborne Infection Precautions (Respiratory Isolation)
- Droplet Precautions
- Contact Precautions
- Special Contact Precautions



# Tuberculosis (TB)-Airborne Isolation

- Is very contagious and is spread through the air
- Patients with TB are placed in special rooms
- Employees need special masks to care for patients with TB
- All new employees are required to have Tuberculin Skin Testing (TST)
- All employees who care for patients are required to have an annual TST and fit testing for the special masks



# Droplet Precautions

- Spread through breathing in **large respiratory droplets** that contain Bacteria and viruses
- No special room required
- Regular surgical mask must be worn.



# Contact precautions

- Requires that you wear gloves when you **enter** the room even when no contact with patient or environment is anticipated
- Requires a yellow gown if you anticipate patient contact or contact with any items in the patient room



# Special Contact Precautions



- Special Contact Precautions used when patients have infectious diarrhea (C-diff or Norovirus)
- Requires that gloves and gown be worn **upon entry into the patient room.**
- Requires hand hygiene with soap and water. If sink not accessible, use alcohol based hand rub and wash with soap and water as soon as possible.

# Influenza (FLU) is a Preventable Disease

- Spread through breathing in large respiratory droplets that contain the virus
- Spread through physical contact (ex: door knobs, facial tissues) with large respiratory droplets that contain the virus
- You can spread the virus to patients and family and not feel sick
- Prevented by vaccination, clean hands and “covering your cough”
- Vaccination is safe
- Vaccination is free at SEMC

# Infection Prevention Projects

- Surgical Care Improvement Project
- Ventilator Associated Pneumonia Prevention Project
- Catheter Associated Bacteremia Prevention Project
- Healthcare Associated infection Prevention Project
- Catheter Associated Urinary Tract Infection Prevention



# Workplace Issues



# DOMESTIC VIOLENCE

- Social and public health problem of epidemic magnitude.
- Domestic Violence is an ongoing debilitating experience of physical, psychological and/or sexual abuse in the home, associated w/increased isolation from the outside world and limited personal freedom.
- 1 in 4 women will experience domestic violence during her lifetime.

# DOMESTIC VIOLENCE and WORKPLACE ISSUES

- Contact Social Services through the page operator for an emergency consultation if patient does not feel safe returning home.
- We are not mandated reporters for domestic violence to victims between the ages of 19 and 60.
- The Commonwealth of Massachusetts mandates all health care workers to report suspected child and/or elder abuse to civil authorities.

# Sexual and Workplace Harassment Policy

- All employees of St. Elizabeth's Medical Center are covered by the Steward Sexual and Workplace Harassment Policy.
- This policy can be found on MySteward under the Human Resources Policies section.
  - This policy and others can be found on our MCN on-line policy system which is located on the St. Elizabeth's Home Page with an icon labeled MCN Policy Manager
- Employees must review this policy and contact the Human Resources Department with any questions or concerns



# Sexual Harassment/Harassment

- It is the policy of St. Elizabeth's Medical Center to maintain a work environment free from sexual harassment or other forms of unlawful harassment.
- Any individual who believes he or she has been subjected to inappropriate conduct may report any complaints to his/her supervisor, the Director of Human Resources or an HR Advisor.
- The manager to whom the incident of harassment is reported must contact a Human Resources representative as soon as possible.

# EXAMPLES OF SEXUAL HARASSMENT

- Unwelcome and unwanted sexual jokes, language, epithets, advances or propositions.
- Written or verbal abuse of a sexual nature.
- Display of sexually suggestive objects, pictures, posters or cartoons.
- Unwelcome leering, whistling or touching of an individual, such as patting, pinching, stroking, hugging, kissing, or repeated brushing against his/her body.



# Types of Workplace Harassment

- **Quid Pro Quo** - "This for that." Threatening or implying that "sexual cooperation" will have an effect on employment or on compensation, advancement or any other condition of employment. This type of harassment typically involves a member of management or person in authority.
- **Hostile Work Environment** – Any verbal or physical unwelcome contact that degrades or shows hostility to any employee because of his/her race, color, gender, sexual orientation, religion, age, national origin, ancestry, military status, disability or genetic information.

## How to Respond

- Direct communication with offending party
- Formal complaint with manager or Human Resources
- Contact the Employee Assistance Program (UNUM) for free, confidential advice (1-800-854-1446)



# Retaliation

Definition: Adverse employment action or hostile work environment created against someone because that person complained in good faith about possible harassment or discrimination or provided information during an investigation of possible harassment or discrimination.

**Retaliation in any form is strictly prohibited and will not be tolerated at any time.**



# Rehabilitation



# Rehabilitation – Fall Prevention

- Falls are the most common cause of injury to hospitalized patients
- Patients at high fall risk are identified with a yellow bracelet and a yellow sign is posted at their bedroom door.
- High Fall Risk Prevention Strategies include:
  - Ensure patient is toileted every two hours and not left alone in bathroom
  - Bed/chair alarm applied
  - Provide patient with physical assistance with ambulation

# Rehabilitation - Swallowing

- Dysphagia: difficulty chewing and swallowing food and or liquid.
- Aspiration: when liquid and/or food passes through the vocal folds and enters the lungs. Most people cough in response to aspiration. However, some people do not cough, resulting in silent aspiration.
- Red mats on food trays or red signs posted at a patient's bedside indicate that this patient has a swallowing difficulty or is at risk for aspiration.

# Rehabilitation - Swallowing

Clinical signs and symptoms of dysphagia and aspiration:

- Patient complains of difficulty swallowing
- Patients has difficulty chewing, shaping or holding food
- Drooling
- Coughing before, during or after taking food or liquids
- Nasal regurgitation
- Poor voice quality: wet, gurgly, hoarse
- Observable delayed swallow
- Frequent burping, regurgitation and or reflux
- Chronic copious secretions

# Quality & Safety, Risk Management, and Compliance

**SEMC Regional Compliance & Privacy Officer:**  
Kathleen Gringras – 781-375-3350

**SEMC Safety Officer:**  
Brian Murphy – 781-789-2088



# Patient Safety

## A “Culture of Safety”:

- Requires all employees to use identified safe behaviors throughout the organization which result in safe, reliable, and productive performance
- Provides the staff with error reduction tools for use daily in the delivery of patient care
- Emphasizes blameless reporting, successful systems, knowledge, respect, confidentiality, & trust

# Six Safe Behaviors to Create a “Culture of Safety”

- Pay Attention to Details
- Communicate Clearly and Slowly
- Have a Questioning Attitude
- Perform Effective Handoffs
- Work together with Your Team
- Follow the Rules



# Error Reduction Tool: STAR

“Pay Attention to Details” using the STAR tool:

**S**top:                   Pause for 1-2 seconds to focus on what you are about to do

**T**hink:                   Think about what you’re about to do—  
Is it the right thing?

**A**ct:                     Concentrate and perform the task

**R**eview:                 Check to see if the task was done right



# Additional Error Reduction Tools

- ✓ Write Down – Read Back
- ✓ Phonetic and Numeric Clarifications
- ✓ Ask Questions to Clarify
- ✓ Peer Checking and Coaching
- ✓ Use checklists
- ✓ Develop written protocols
- ✓ Build in reminders
- ✓ Identify gaps/holes
- ✓ Reduce steps/people required
- ✓ Use a calculator
- ✓ Manage fatigue/stress
- ✓ Minimize distractions

# Have a Questioning Attitude

## *Stop and Ask Questions...*

If something does not seem right, STOP and ask questions before proceeding...

*"I have never seen this in my career..."*

*"Something does not feel right..."*

*"Is this normal?"*

Ensure that work activities are stopped when uncertain/unsafe conditions are identified to minimize the chance of error.

# National Patient Safety Goals

## ➤ Identify Patients Correctly

- Use at least two ways to identify patients (*name & date of birth*) (**Policy POC 19 – Patient Identification**)
- Make sure that the correct patient gets the correct blood (**Policy POC 47 – Administration of Blood and Blood Components**)
- Label blood and specimen container in the presence of the patient (**Policy POC 24 - Identification and Care of Specimens**)

## ➤ Improve staff communication

- Report critical results to the right staff person on time. (**Policy POC 28 – Communicating Critical and/or Significantly Abnormal Results of Tests and Diagnostic Procedures**)

## ➤ Use medicines safely

- Before a procedure, label medicines that are not labeled (**Policy MM 23 – Labeling of Medications and Solutions**)
- Take extra care with patients who take medicines to thin their blood (**Policy MM 02 – Anticoagulation Management and Safety**)
- Record and pass along correct information about a patient's medicines (**Policy MM 26 – Medication Reconciliation**)

## ➤ Prevent infection

- Use the hand hygiene guidelines (**Policy IC 20 – Hand Hygiene**)
- Use guidelines to prevent infections that are difficult to treat. (**Steward Policy IC 37 – Multi Drug Resistant Organisms**)
- Use guidelines to prevent central lines infections (**Policy IC 31 – Prevention of Central Line-Associated Blood Stream Infections (CLABSI)**)
- Use guidelines to prevent surgical site infections (**Policy IC 51 – Prevention of Surgical Site Infections**)
- Use guidelines to prevent urinary catheter infections (**Policy IC 07 – Prevention of Catheter-Associated Urinary Tract Infections (CAUTI)**)

## ➤ Identify patient safety risks

- Identify patients at risk for suicide (**Policy POC 22 – Suicide Risk Assessment and Management**)

## ➤ Prevent mistakes in surgery (**Policy POC 23 – Universal Protocol**)

- Make sure that the correct surgery is done on the correct patient and at the correct place on the patient's body
- Mark the correct place on the patient's body where the surgery is to be done
- Pause before the surgery to make sure that a mistake is not being made

# Incident Reporting

- Report **ALL** events that are not consistent with desired operations of the organization or care of the patient to your supervisor.
- Complete the on-line INCIDENT REPORT in rL solutions
- For incidents involving medical staff or medical decision-making, notify the Risk Manager, the Patient Care Assessment Coordinator and/or the appropriate division chair:
  - Cases of unethical conduct-behavioral concerns
  - Incidents of practice outside approved privileges
  - Incidents which may result in negligence
  - Incidents regarding issues w/informed consent
  - Patient complaints related to care
- NOTIFY RISK MANAGEMENT at x.2498

# Reporting Facts

- *WHAT DO I REPORT:*
  - Any undesirable and unexpected event, which has an actual, potential (near miss) or perceived adverse impact on a patient or visitor
  - EMPLOYEE EVENTS TO EMPLOYEE HEALTH
- *HOW DO I REPORT:*
  - rL Solutions ONLINE Web Application, or
  - Call RISK MANAGEMENT directly
- *WHEN DO I REPORT:*
  - Immediately following situation or by end of your shift
- *WHO SHOULD REPORT:*
  - Person responsible for incident, or
  - Person who observes the incident, or
  - Person who discovers the incident, or
  - Person to whom the incident was reported
  - Duplicate reporting is NOT a problem
- *PROTECTION:*
  - The processes of reporting, investigation, corrective action and follow-up of patient events are intended to be an integral part of hospital medical peer review process. All information and documents are intended to be protected from disclosure to the extent provided by law as indicated by M.G.L. C. III, @205(B).

# What is Done with the Information?

## Apparent Cause Analysis

We look for:

1. What happened
2. Where it happened
3. Where the breakdowns occurred
  - Behaviors
  - Processes
  - Decision making
  - Equipment and Facilities

# Never Events

## Examples of Never Events:

- A Never Event is “an unexpected occurrence involving death or serious physical or psychological injury, or the risk thereof.” They are patient events that should never happen when the patient is under our care.
  - Medication error resulting in death or serious disability
  - Fall resulting in death or serious disability
  - Surgery/Procedure on wrong patient/wrong body part
  - Death or serious disability associated with use of restraints
  - Suicide or attempted suicide resulting in serious disability
  - Unintended retention of foreign object
  - Maternal death related to delivery
  - Stage 3 and 4 pressure ulcers
  - Hospital Acquired Infections



# Fire Safety Security



# Know Your Emergency Codes

- **Code Pink:** Infant Abduction
- **Code D:** Internal or External Disaster
- **Code Blue:** Cardiac Arrest
- **Code Green:** Bomb Threat
- **Code Orange:** Hazardous Material Spill
- **Code Gray** Security

**Call Security at x2222** for any security concerns or suspicious activity.

# Basic Fire Safety

## Fire Components: The Triangle

- Air (oxygen)
- Combustible Material (fuel)
- Heat source (spark, flame, spontaneous combustion)

***When one or more of the three components are removed, there is no fire.***

# Fire Extinguishers

Class A Extinguisher: Green 

Ordinary combustibles – water

Class B Extinguisher: Red 

Burning liquids, gasoline, oil grease; contains carbon dioxide (CO<sub>2</sub>) and dry chemical used to smother or remove the oxygen; water can't be used on a Class B fire.

Class C Extinguisher: Blue 

Used for electrical fires

# OXYGEN (O<sub>2</sub>)

- An oxygen enriched environment causes materials to ignite easier and burn more quickly.



# Fire Codes

- The fire code for St. Elizabeth's Medical Center is **Code Red**.
- Reporting a fire requires pulling the fire alarm, calling out "Code Red" and dialing x666 from any Medical Center phone.



# In Case of Fire, Remember: **RACE**

- R:** Rescue - anyone in immediate danger.  
Call Out “Code RED”
- A:** Alarm – activate the fire alarm and call x666
- C:** Contain – the fire by closing all doors and windows
- E:** Extinguish – the fire if small enough

***Know where your fire alarm pull stations are located!***

# Smoking

St. Elizabeth's is a smoke-free campus.  
There is **NO** smoking allowed anywhere  
on the campus of SEMC.



# **Electrical Safety Clinical Engineering**



# Electrical Safety and Clinical Engineering

- Who is responsible for shutting off the Medical Gas system zone valve in an emergency?

**The unit charge nurse is responsible for shutting off the medical gas zone valve.**



# Electrical Safety and Clinical Engineering

- How can you tell if an emergency outlet is on emergency power?

**An emergency power outlet will be designated in one of the two ways:**

- The outlet will have a **red plate**
- The outlet itself is **red**

# Electrical Safety and Clinical Engineering

- What must you do if a medical device you are operating on is involved in an injury?

***Take the device out of service immediately, save all attachments and consumables, do not adjust settings and immediately notify your supervisor as well as Risk Management and Clinical Engineering .***

# Electrical Safety and Clinical Engineering

- The safety sticker attached to your medical device indicates the following:

***The device is approved for use  
in a patient area.***

# Emergency Preparedness



# EMERGENCY MANAGEMENT

- **Code Disaster** is announced during an activation of the medical center's Emergency Management Plan
- SEMC follows HICS (Hospital Incident Command System) as its model for incident management and command
- All staff are considered essential in a disaster. Staff should return to their own department and follow supervisor's instructions.
- Brian Murphy is the Emergency Management Manager and can be reached at x2088.

# **Chemical Safety**

# **Chemical Hygiene**

# **Radiation**



# Chemical Spills

Identify the chemical

Assess your ability to safely contain and clean up the spill

I have been trained and **CAN** safely clean up the spill

Notify coworkers and secure the area

Don personal protective equipment, review MSDS, use spill equipment and clean up the spill

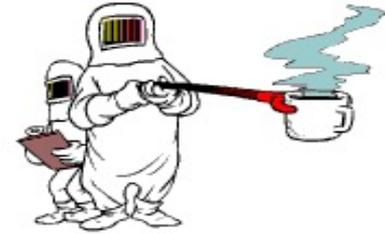
I **CANNOT** safely clean up the spill

Notify coworkers and vacate/secure the area

Call Code Yellow, x.666

Complete an Incident Report

*Any Questions? Call Brian Murphy at x2088*



# Chemical Hygiene Plan

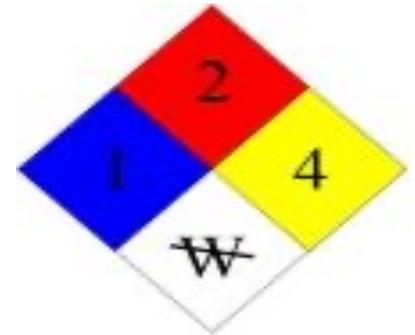
## When Working with Chemicals:

Some of the following rules can be found in the **Chemical Hygiene Plan**

**Handling Chemicals:** Do not taste or smell chemicals. Use chemicals for which the quality of ventilation and personal protective equipment is appropriate. If unsure consult the safety data sheet (SDS) prior to beginning work.

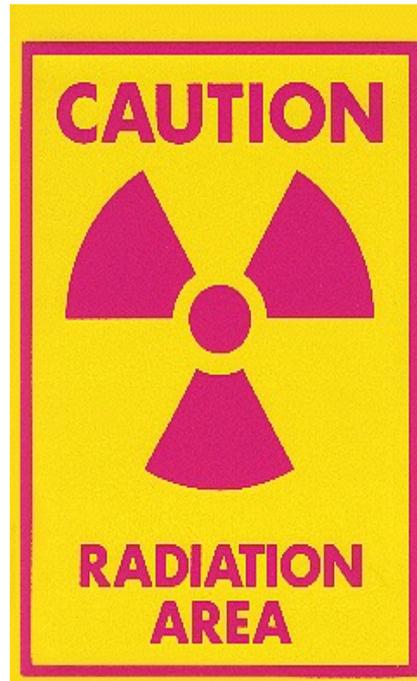
**Hazardous Materials:** When working with chemicals consult the National Fire Prevention Association (**NFPA**) diamond. It is also used to tell you about the type and severity of the hazards to which you may be exposed.

The Chemical Hygiene Officer at SEMC is **Nicholas Tsaniklides**, x.3252



# Radiation Safety

- Radiation Safety Officer for SEMC is **Alan Ashare, M.D.** Nuclear Medicine  
x.2828



# Radiation Safety

Radiation can be produced from x-ray machines that produce radiation or from radioactive sources which are located in certain areas of the hospital.

The magenta and yellow sign indicates the presence of radioactive materials in the area.

# What can I do to reduce or limit the amount of radiation I receive?

- TIME- Limit the amount of time spent around the source of radiation.
- DISTANCE- If you double your distance from the radiation, you receive only a quarter of the dose.
- SHIELDING- An object between you and the source of radiation could dramatically lower the amount of dose you receive.



# How much radiation could I receive as a non-radiation worker?

- The traditional unit of radiation measurement most often used to describe the dose received by people is the millirem (mRem).
- As a non-radiation worker you would be expected to receive less than one millirem per hour at a distance of three feet from a nuclear medicine patient you are transporting. The same approximate dose per hour occurs if you are about three feet from a prostate implant patient.
- A portable x-ray machine can produce several millirem at 3 feet from a patient being exposed, with only about 10% of that dose when the distance is increased to 9 feet.



**Whom may I talk to at STEWARD St. Elizabeth's Medical Center, in addition to my supervisor, if I have questions about radiation safety?**

- **Alan B. Ashare, M.D.**, Radiation Safety Officer (RSO) and Radiation Safety Committee Chairman, at x.2828
- **David DeSantis, Ph.D.**, Radiation Oncologist Physicist at x.3232.



# Diversity/Interpreter Services



# Cultural Competency

- Cultural Competence is the willingness and ability of a system to value the importance of culture in the delivery of services to all segments of the population. It is the use of a systems perspective, which values differences and is responsive to diversity at all levels of an organization.



# Cultural Competency

- Medically trained interpreters are available 24 hours a day, 7 days a week.
- St. Elizabeth's patients speak many languages. The most common languages spoken by our patients are Russian, Portuguese, Spanish and Chinese.

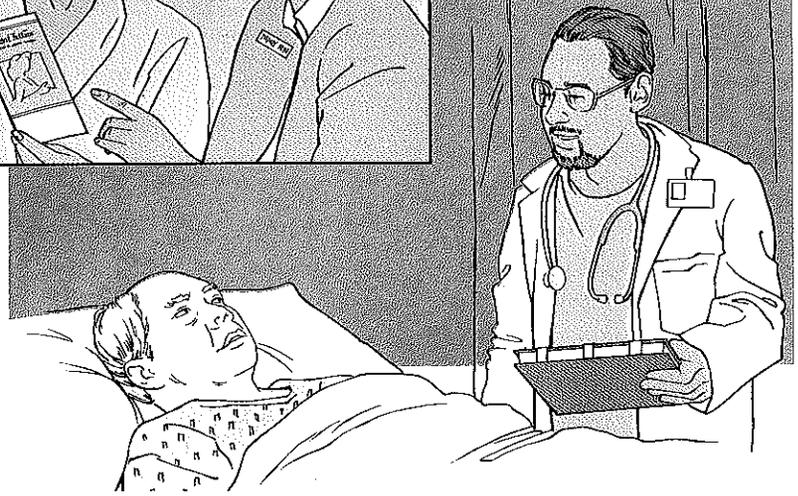


# Cultural Competency

- There are also communications devices available to reach interpreters in 140 different languages as well as American Sign Language 24 hours a day, 7 days a week.
- A patient's family member cannot be used as an interpreter unless requested to do so by patient and only after a hospital interpreter has been utilized to get that refusal in the patient's language.



# Developing Cultural Competencies



# What are cultural competencies?

They're the skills you use to work well with patients of all cultures. These skills involve:

## Considering every patient's culture when giving care

Culture—the values, beliefs and practices shared by a group—can affect how a patient views health care. A patient may belong to different ethnic, regional, religious and other groups.

## Treating every patient as an individual

It's important to consider culture. But it's also important to:

- avoid stereotyping
- consider other factors that may affect care, such as age
- learn about each patient's unique views on health care.



Answers to quiz on p.15:  
1. F 2. T 3. T 4. F 5. T  
6. F 7. F 8. T 9. F 10. T

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# Why learn about cultural competencies?

Because developing cultural competencies benefits everyone. You can:

## Help patients receive more effective care

Taking patients' cultural views on health into account helps maintain their right to be treated with respect. They also respond better to their care.

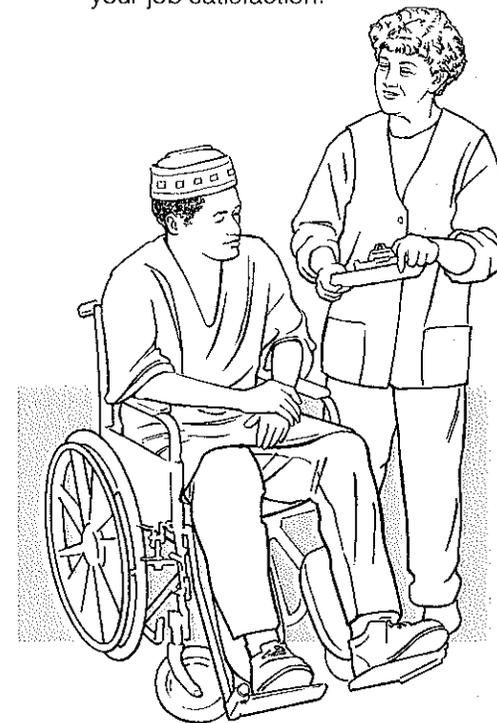
## Improve your job performance

Helping patients get the best possible care can also increase your job satisfaction.

## Help your facility meet standards of The Joint Commission

Awareness of cultural factors can help your organization meet the needs of the population you serve—one area of focus for the Joint Commission (formerly JCAHO) survey.

Caring for patients from many cultures is an important part of health care today!



### Please read:

Talk to a professional! This booklet is not a substitute for the advice of a qualified expert. It does not take the place of state or federal laws, or your organization's guidelines.

For ease of reading, the terms "parents" and "family" are used in this booklet. They may refer to others who are involved in a patient's care, such as a legal guardian or a person with durable power of attorney for health care.

# Cultural competencies require self-awareness.

Examine your assumptions about culture. Start by taking this quiz.

1. People who are classified the same way (for example, as "Hispanic") share one culture. . . . . True  False
2. A gesture's meaning can vary across cultures. . . . . True  False
3. A patient may nod or smile while speaking with you, but not actually understand or agree. . . . . True  False
4. A patient who refuses a certain type of care is just being difficult. . . . . True  False
5. A patient who does not answer a question right away needs you to ask it again. . . . . True  False
6. Considering a patient's culture takes too much time. . True  False
7. Culture may affect how much a patient tells you about his or her condition. . . . . True  False

## How did you do?

1. False. They may share some traits, but they may also belong to many different cultural groups.
2. True. For example, the gesture for "goodbye" in one culture may mean "come here" in another.
3. True. Patients from some cultures may nod or smile to show respect, but this doesn't always mean they understand or agree.
4. False. A patient's reasons may have to do with many cultural factors—for example, religious beliefs about acceptable medical treatments.
5. False. Some cultures value periods of silence during talks. Give some time before asking again.
6. False. It saves time, because patients respond to care better from the start.
7. True. For example, a person who is used to obeying authority figures may not volunteer important information.



## Know your own cultural beliefs and practices.

Think about how your culture and upbringing affect you. For example, you may have certain ideas about:

- how to show politeness when talking with someone
- acceptable ways to express pain
- how often to seek medical care
- appropriate ways to treat children or older people.



## Be aware of the culture of health care in the U.S.

For example:

- Patients are expected to arrive at exact appointment times. But some patients may think of a time as referring to a general part of the day—for example, 2:15 as mid-afternoon.
- Self-care is often promoted in treatment. But in some cultures, family and others are expected to play a leading role.

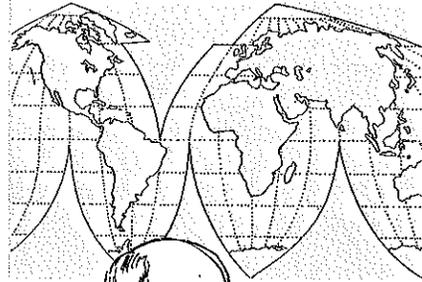
Use the information in this booklet as a starting point to develop the skills you need for your job.

# There are many cultural factors to be aware of.

They include a patient's:

## Country of origin

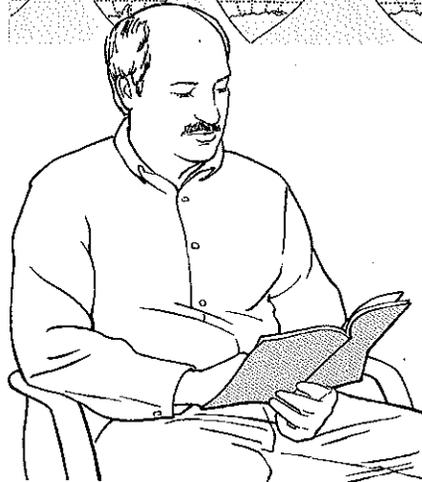
Most people who live in the U.S. have roots in other countries. How long a person has lived here may affect his or her views toward health.



## Preferred language

Patients who are encouraged to talk or read about care in their own language may:

- feel more at ease
- understand their care better.



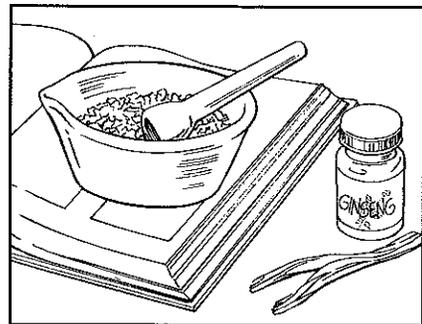
## Communication style

Nonverbal and verbal styles may differ. For example, culture may affect how—or whether—a patient expresses pain.

## Views of health

The patient may see an illness as:

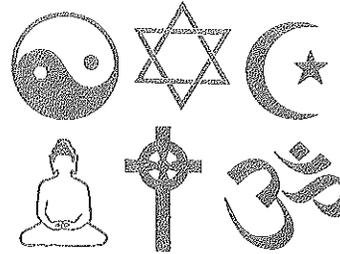
- having a supernatural cause, such as punishment for sins
- needing a certain traditional cure, such as an herbal remedy or a specific diet.



## Relationships

A patient may expect certain family members, friends or other support people to be:

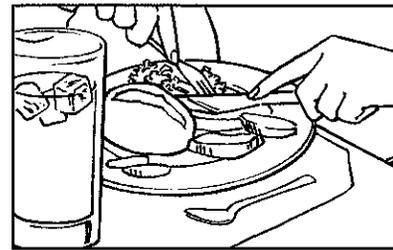
- involved in his or her care
- allowed to visit.



## Religion

A patient's religion may affect his or her:

- consent to treatment
- schedule of care or room arrangement (because of certain prayer practices, for example)
- birth and death practices.



## Food preferences

Religious, healing and other cultural practices all can affect what foods a patient may eat or avoid.

## Developing cultural competencies does not mean knowing everything

about every cultural group you work with. It does mean:

- being aware of cultural factors
- taking appropriate steps to learn about each patient, such as asking questions.

Developing the cultural competencies needed for your job means you can help patients of all cultures feel better about their care.



# Take time to learn about each patient.

## Ask questions to avoid cultural stereotypes.

It's important to have general knowledge about a culture. But it's also important to assess each individual patient because:

- Differences exist among members of the same cultural group.
- Cultures change over time.
- Climate, war and other situations in another country may have affected an immigrant's health.

## Learn the patient's views about health.

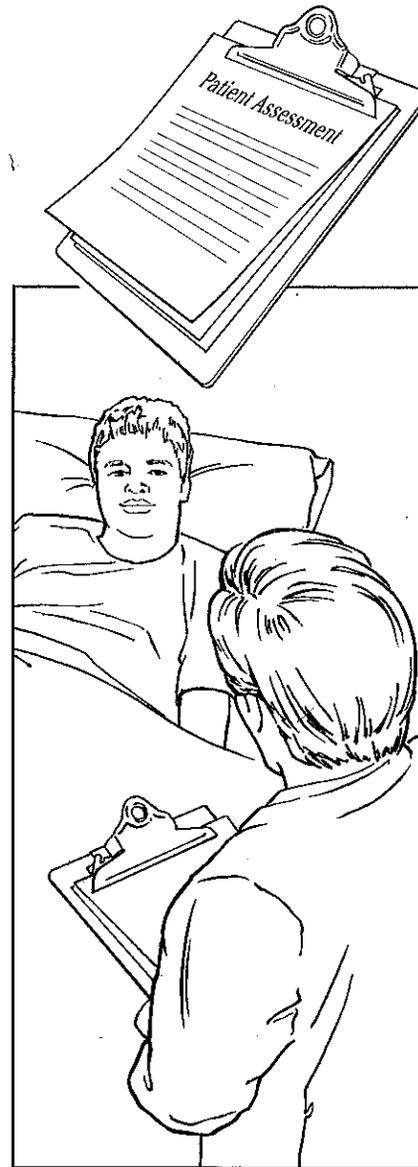
For example, ask:

- What are you doing to care for your illness? How has it worked?
- Is anyone else treating your illness? What is he or she doing?

Accept the patient's practices whenever possible. (When needed, discuss any health risks of the patient's remedies or diet—including drug, or food and drug, interactions.)

## Learn about accepted ways to show respect.

For example, ask how a patient prefers to be addressed.



## Understand relationships.

For example:

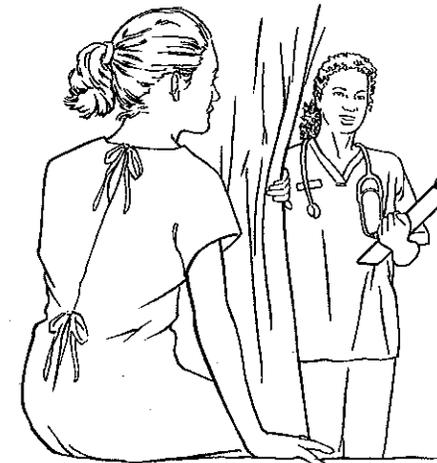
- Ask about family or other people who are important in the patient's life. When possible, allow these people to visit, take part in care or be present during death, if they wish.
- Ask about healers and spiritual leaders who may be involved in care—and other ways the patient's community may provide support.
- Ask whether the patient takes part in any support groups.



## Consider privacy needs.

For example:

- Ask about privacy concerns, such as being touched or being unclothed. Respect privacy as much as possible—for example, by letting a patient keep a certain garment on or bathe him- or herself.
- Build trust. A patient may need time to feel comfortable discussing a problem or undergoing a procedure.



**Work with the patient and others to find the best approach to his or her care.**

# Communicate effectively.

## Listen to how the patient talks about his or her condition.

For example:

- Ask how he or she refers to it. (For example, some cultures classify illnesses as “hot” or “cold” and treat each type differently.) Ask for any details you may need to understand better.
- Ask what he or she thinks is causing it.

Some patients may expect you to have answers—not questions. Explain that knowing the patient's views helps you give better care.

## Ask indirect questions, if needed.

Direct questions may make some patients uneasy. For example, ask how a healer or someone else from the culture would treat the illness.

## Look for clues.

For example, take note of whether the patient:

- wears or displays objects that may be religious
- makes or avoids eye contact
- keeps a certain distance away or tries to be closer.



## Ask how the patient prefers to receive information.

For example, some patients may prefer to read about their treatment options, rather than talk about them.

## Talk with others who know the patient.

If a spouse or other family member or support person is involved in care, ask for his or her views of the condition.

## Ask for the patient's views on treatment.

- Explain the recommended treatment and procedures.
- Ask the patient (and family or other support people, if needed) if the approach sounds like it will work for him or her. Consider other approaches, if needed.

## Use interpreters effectively.

For example:

- Use a trained medical interpreter whenever possible.
- Avoid using family members. They may lack medical knowledge, or other issues may prevent full discussion of the patient's condition.

**Never assume you know something about a patient—even one who does not appear to have any cultural differences from you.**

# Consider other factors that may affect care.

These include:

## Age

For example:

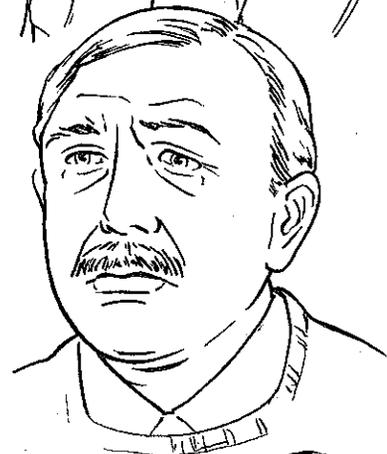
- An older patient may assume certain problems are a normal part of aging and not mention them.
- An adolescent may be sensitive about privacy or how treatment will affect his or her appearance.



## Gender

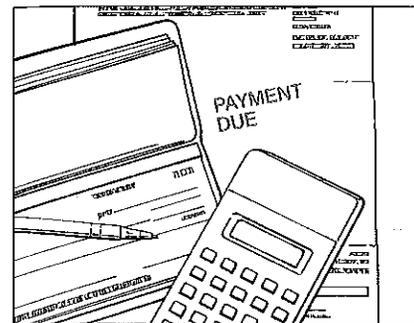
For example:

- A patient may prefer to receive care from someone of the same sex.
- Cultural values may prohibit touching between members of the opposite sex—including spouses during certain times, such as childbirth.



## Sexual orientation

A patient who is unsure of a health-care provider's response may not mention being gay, lesbian or bisexual. Asking questions that avoid assuming sexual orientation can help put him or her at ease.



## Socio-economic status

For example:

- Financial hardship may keep a patient from seeking or following treatment.
- Classes may exist within a cultural group, based on income or other factors. A patient's beliefs and practices may be related to his or her class.



## Presence of a physical or mental disability

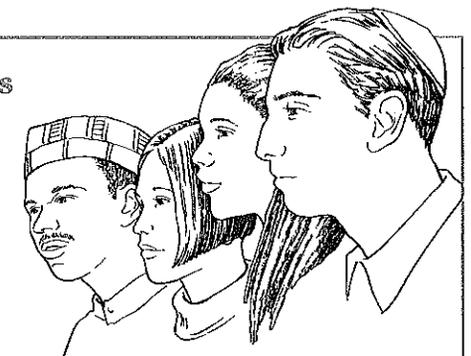
Patients may have different views about:

- how disabling a certain condition is
- how to explain a psychological condition—for example, some may consider it a mental illness, others the result of a supernatural force.

## Use cultural competencies with co-workers, too.

You may work with people from many cultures. When staff members make the effort to work well together:

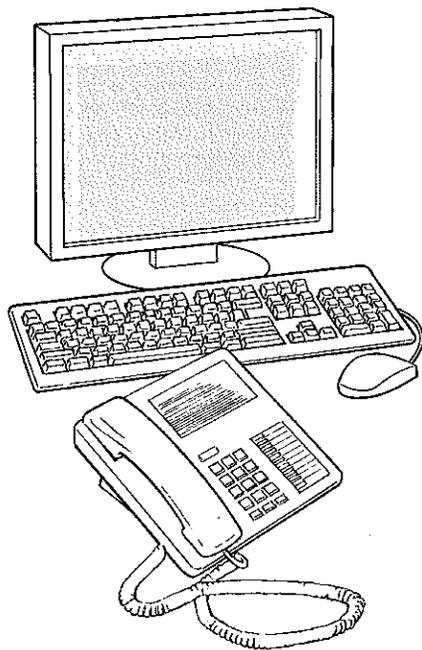
- Job satisfaction increases.
- Patients receive the best care.



# Learn more about cultural competencies in patient care.

Find out about the cultural groups your facility serves.

- Borrow materials from your facility's library, if there is one. Also check local libraries or the Internet.
- Attend a group's event, such as a festival.
- Contact co-workers, community leaders and organizations from different groups. Ask if they have any information to share.



Find out more about the skills involved in cultural competencies—and the benefits they can bring. Contact the:

- Center for Cross-Cultural Health  
1-612-331-3311  
cch@crosshealth.org  
www.crosshealth.org
- Office of Minority Health  
Resource Center  
1-800-444-6472  
1-301-251-1432 (TDD)  
info@minorityhealth.hhs.gov  
http://minorityhealth.hhs.gov.

# Test your knowledge of cultural competencies by checking "true" or "false."

1. You can always tell if a patient has cultural differences from you by how he or she looks. . . . . True  False
2. Cultural competencies are the skills used to work well with patients of all cultures. . . . . True  False
3. A patient's views toward health are affected by culture and other factors. . . . . True  False
4. When asking a patient questions, always use direct questions. . . . . True  False
5. Emphasizing self-care may not be the best approach for all patients. . . . . True  False
6. All human beings express pain the same way. . . . . True  False
7. Family members make the best interpreters. . . . . True  False
8. Learning about cultural competencies can benefit employee relationships. . . . . True  False
9. Always discourage patients from using traditional remedies and healers. . . . . True  False
10. Different cultures have different ideas about family involvement in patient care. . . . . True  False

I have read the booklet, "Developing Cultural Competencies."

Employee's signature \_\_\_\_\_ Date \_\_\_\_\_

Instructor's/supervisor's signature \_\_\_\_\_ Date \_\_\_\_\_

The answers are on page 2.

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