

Welcome to Mayo Clinic Health System



















Our Mission

To inspire hope and contribute to health and well-being by providing the best care to every patient through integrated clinical practice, education and research















Our Vision



Mayo Clinic will provide an unparalleled experience as the most trusted partner for health care.













Our Primary Value



The needs of the patient come first.













Clinical Excellence

Mission:

To inspire hope and contribute to health and well-being by providing the best care to every patient through integrated clinical practice, education and research.

Vision:

Mayo Clinic will provide an unparalleled experience as the most trusted partner for health care.

Financial Stability

Service Excellence













Value Proposition

- Mayo Clinic has a moral responsibility to care for those who need hope and healing.
- We bring together teams of experts to provide comprehensive care and trusted answers, focused on the needs of each individual, to provide exactly the care each patient needs in a seamless experience.

Mayo Clinic Orientation















Our Environment

- Physician leadership
- Integrated medical record
- Professional compensation
- Unique professional dress, decorum and facilities















Our Environment

- Highest quality staff mentored in the Mayo culture
- Valued allied health staff with strong work ethic and devotion to Mayo
- Scholarly environment of research and education













Patient care

- Integrated, team approach
- Unhurried exam
- Physician responsibility for direction of care in partnership with local physician
- Highest quality with compassion and trust
- Respect for patient, family and local physician













Patient care

Comprehensive and timely evaluation



 Advanced, innovated diagnostic and therapeutic technology and techniques



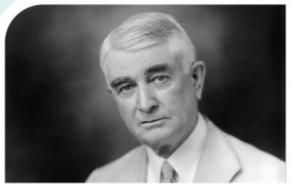
















The best interests of the patient are the only interests to be considered.

DR. WILLIAM J. MAYO, 1914

















An Unparalleled Patient Experience















MAKE A **DIFFERENCE**



We Value Patient's Feedback















Patient Experience Definition

An unparalleled patient experience is the result of inspired and dedicated employees demonstrating excellence, compassion and respect by partnering with patients, family and colleagues to continuously improve the healthcare service experience.

Mayo Clinic Orientation













Essential Communication Behaviors[©]

Acknowledge Introduce **Duration** Ε **Explanation Thank You**

Decreased anxiety

+

Increased Compliance

Improved health outcomes & satisfaction

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Service Recovery in Action

- Listen with empathy
- Acknowledge/Apologize
- Decide on Next Steps
- Problem Solve (if you can)
- Follow Thru and Follow Up

An apology is the most effective action. Offering an apology is not always as easy as it might seem. Research has found that in a breakdown situation a service representative says, "I'm sorry," only half the time. Powerful apologies begin with taking personal responsibility, which goes back to our value statements. Offering an effective apology is an important skill toward service recovery.

Mayo Clinic Orientation















PRIMARY VALUE

The needs of the patient come first

MAYO CLINIC VALUES



Mayo Clinic Orientation

















Entrusted to ServeIntegrity and Compliance at Mayo Clinic



















Mayo Clinic Code of Conduct



- Ethics
- Confidential information and trade secrets
- Conflict of interest and outside activities
- Use of Mayo funds and Assets
- Dealing with suppliers and providers
- Books and records
- Political activity and contributions
- Safety, health, and environment
- Employee relations



Integrity and Compliance Program

- Rooted in Mayo Clinic values
- Organizational safety net
- Tool to assist with the growing complexity of requirements
 - Ethical
 - Professional
 - Legal

Model Professionalism



- Model integrity –
 know and set an example
 in behavior consistent
 with professionalism
 at Mayo Clinic
- Raise your hand ask questions, seek clarification
- Speak out talk to your colleagues, report concerns



Privacy & Your Role in Protecting Patient Information













MAKE A
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What is Patient Privacy?

 Respect for our patients and the information they entrust to Mayo Clinic in order to care for them and to support our business.

- Health Insurance Portability and Accountability Act
 - The Department of Health and Human Services issued HIPAA privacy standards and security standards that <u>require</u> health care entities to protect patient information from unauthorized use or disclosure.

What does Patient Privacy mean to YOU?

- Our patients trust us to protect their privacy and keep their information confidential.
- By law, all Mayo Clinic employees, students, and contractors must keep protected health information private.
- No matter what your role with Mayo Clinic, you will likely encounter Protected Health Information.

What is Protected Health Information (PHI)?

- HIPAA standards apply to all protected health information (PHI) which includes demographic information and any identifying information about the patient including but not limited to:
 - Name
 - Address
 - Dates related to the patient (e.g., birth date, appointment dates)
 - Telephone numbers and email addresses
 - Identifying numbers that are specific to the patient, such as Social Security number or medical record number
 - Pictures of the patient

Patients have the right to:

- Access their medical information.
- Request amendments (changes) to their medical information.
- Obtain a list of when and why their medical information was shared externally.
 - Identified as Accounting of Disclosures request.
- Request to have their patient status remain confidential by opting out of the of Patient Directory.

Patients also have the right to:

- Request restrictions from third-party access to their medical information.
- Request alternate communications.
 - How we communicate their information, including allowing others to receive their information.
- Release their information to others.
- File a complaint.

Permitted Use & Disclosure of PHI

For Treatment Purposes

- To provide, coordinate or manage their care.
- Includes communication between health care providers and other members of the medical team, both within and outside of Mayo Clinic.

For Payment Purposes

 Use and disclose of PHI to create bills and collect payment from insurance companies.

Permitted Use & Disclosure of PHI

For Healthcare Operations

- Use and disclosure of PHI when necessary to improve the quality of care provided to patients.
- Includes activities to improve patient care such as:
 - license staff to care for patients
 - prepare for state and federal regulatory reviews
 - train health care and non health care professionals
 - manage health care operations
 - improve health care services

You need written patient authorization to use patient information for purposes other than treatment, payment or healthcare operations. Check with your supervisor or Privacy Officer.

Permitted Use & Disclosure of PHI

- The need-to-know rule is HIPAA's minimum necessary standard.
- Minimum necessary means the least amount of information you need to do your job function.
- If your job functions require access to PHI, remember to request, share and disclose only the minimum amount necessary to complete the task.



Did you catch that?!



- You must have a treatment or business need-toknow to access a patient's information.
- If you do not have a business need-to-know:
 - You MUST have a valid patient authorization on file in order to access the patient's record for personal reasons.
 - Mayo Clinic Policy prohibits access to your minor child's record using the Electronic Health Record (EHR).
- Do you have written permission or will the access benefit the patient or Mayo Clinic? If the answer is no, the access is personal curiosity and is strictly prohibited by law.



Integrity and Compliance

Pop Quiz

Access to a patient's medical record is authorized in which of the following scenarios:

- Your parent was seen by a provider today; you review provider's instructions regarding medications in the medical record to be sure your parent understands them correctly.
- Your hip replacement patient is experiencing shortness of breath.
 Although you are in Orthopedics, you review previous cardiac consultation notes.
- A patient was seen by your preceptor for an ankle fracture. You are curious about a scar on the patient's neck.
- Your sister asks you to check her son's medical record to verify whether or not a prescription has been called in for his ear infection.

If you answered #2, you are correct. There is a business need-to-know in this scenario, in order to provide optimal patient care.

Your hip replacement patient is experiencing shortness of breath. Although you are in Orthopedics, you review previous cardiac consultation notes.

In all other scenarios, you would need to have a valid patient authorization on file in order to access the patient's record for the purposes indicated.

Breach Reporting

- A Breach occurs when PHI is accessed (viewed) or disclosed (shared) without a business need-to-know.
- Staff are required to report a discovered or suspected breach to the Privacy Office.
 - Contact your site/regional Privacy Officer
 - Report anonymously by calling 1-888-721-5391 or online at <u>www.mayocliniccompliancereport.com</u>
- Mayo Clinic strictly enforces the Anti-Retaliation Policy
- Staff who knowingly violate Mayo Clinic privacy policies will receive appropriate corrective action, up to and including termination of employment.

Basic Security Requirements

- Protect yourself and protect our patients
 - Lock up or keep out of sight any confidential information to ensure that unauthorized people do not see it.
- Always remember to lock your workstation or log off when you leave your work area and do not share your username and password.
 - Any activity under your username is your responsibility!

Confidentiality

Simply by being on the Mayo campus, you may encounter confidential information concerning patients, employees and business information. Confidential information includes all material (oral, paper-based and electronic) related to the operation of Mayo including but not limited to:

- Financial information
- Patient names and other identifying information
- Patient personal and medical information
- Patient billing information
- Employee names including salaries and employment information
- Proprietary products and product development
- Marketing and general business strategies
- Any discoveries, inventions, ideas, methods, or programs that have not be publicly disclosed
- Any information marked as "confidential"

Unauthorized access, use or release of confidential information may be cause for immediate dismissal.

Conclusion – Key Points

- Do not access or disclose patient information to anyone unless there is a need-to-know.
 - Social media use should not include any identifiable (or <u>potentially</u> identifiable) patient information.
- Discuss patient information in a private place where others cannot overhear. If you overhear other staff discussing patient information, respectfully bring it to their attention.
- Keep patient information out of public areas. Do not leave paper containing patient information where others can see it. Dispose of PHI properly.

Pop Quiz:

Which of the following might breach patient confidentiality and be potential cause for dismissal?

- Taking a selfie on your work unit and posting to Twitter
- Discussing patient care while on an employee elevator
- Doing a quick check of your brother's x-rays to see if you identify a broken bone
- Sending an email to your school adviser regarding the unique case you saw this afternoon

All scenarios may be a breach:

- If a patient is in the background, this is potential breach.
- Although an employee elevator may seem like a safe place to discuss patient care, a relative or friend of the patient may be on the elevator.
- Unless you have a valid authorization from your brother on file, you may not access any part of his medical record – even if he verbally requests it.
- If any information is disclosed by which someone might identify the patient, a breach has occurred. Of note, patient information should never be sent via email unless encrypted.





Succeeding at Mayo Clinic















MAKE A
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Mayo Core Competencies



Professional Conduct

Professional Development

Commitment to Quality

Mutual Respect and Diversity

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Mayo Clinic Orientation

MAYO

CLINIC











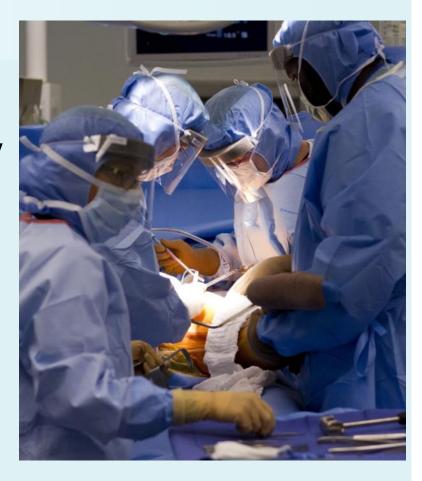






Work Atmosphere

- Teamwork
- Personal Responsibility
- Integrity
- Innovation
- Communication
- Trust → Empowerment



Core Competencies









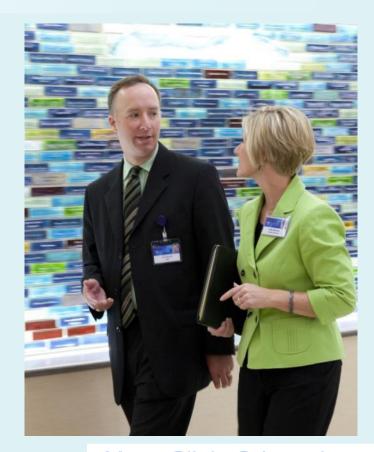






Professional Conduct

- Professional Behavior
- Dependability
- Confidentiality
- Integrity



Core Competencies







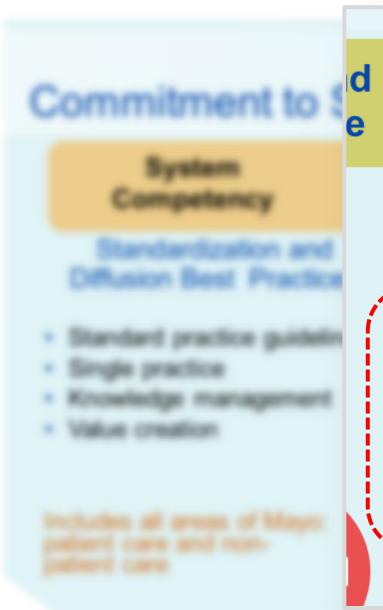












Behavioral Competency

Commitment to Safety in a Fair and Just Culture

Clearly Defined Behaviors

- Pay attention to detail
- Communicate clearly
- Have a questioning and receptive attitude
- Handoff effectively
- Support each other

Accountability for Behavior

Mutual Respect

- Foster mutual respect and support Mayo's commitment to diversity
 - Mutual Respect policy
 - Harassment policy
 - Title IX Sexual Misconduct policy

Everyone has the right to pursue his/her career free from harassment, coercion or disruptive conduct from coworkers or organizational superiors.



New Employee Orientation

Mutual Respect Standards

- Respect
 - For patients, visitors, and coworkers at all times
- Language
 - Verbal, written, electronic
 - Courteous and professional with everyone at all times
- Feedback
 - Provide prompt, direct and constructive feedback

- Behavior
 - Appropriate treatment of everyone at all times
- Confidentiality
 - Protect the privacy, confidentiality of patients, employees, and business information















Sexual and Other Harassment

An unwelcome behavior or action of a sexual nature is sexual harassment when

- Made a term or condition of employment affecting an individual
- Used as the basis for employment decisions affecting the individual
- Interferes with one's work performance or creates an intimidating, hostile, or offensive work environment

Third party harassment can create a hostile work environment.

 May not bother the two people involved in a conversation, but bothers a third party.

Disrespectful Behavior

 Disrespectful behavior of any kind, ranging from subtle hints to overt acts is not acceptable. It may be a one time incident or pervasive bullying behavior.















Reporting

- Attempt to resolve with person involved
- Report to direct supervisor/director
- Report on Employee Intranet using Mutual Respect tab
- HR Service Partner will assist if needed
- A complete investigation is conducted
- Retaliation not tolerated



















Everyone is Different, Everyone is Necessary











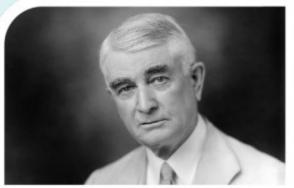


MAKE A
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Mutual respect is one of our values. It is important to create an inclusive environment by treating everyone in our diverse community with respect and dignity.

Thoughts on Diversity







Within its walls, all classes of people, the poor as well as the rich, without regard to color or creed, shall be cared for without discrimination.

DR. WILLIAM J. MAYO, 1914































Diversity and Inclusion

Mayo Clinic will be recognized by patients, employees, peer institutions, and the community as the leading model for diversity and inclusion.

Diversity is broader than race, ethnicity or gender. It's diversity of thought, opinion and work style.

















Diversity and Inclusion Priorities

- 1. Caring with Awareness Provide high quality, culturally appropriate care in a welcoming environment to all patients
- 2. Reflecting our Community Increase the diversity of Mayo Clinic patient population
- 3. **Welcoming of All** Improve inclusiveness and participation of diverse employees at all levels of the organization
- 4. Balancing Opportunities Increase the proportion of women and minority students, faculty and administrators and staff where under represented
- Developing Talent Increase the proportion of women and minorities in senior leadership
- 6. Pursuing Health Equity Identify and eliminate health disparities; become a national leader in the science and promotion of health equity





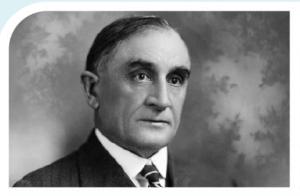
















There are no inferior jobs in any organization. If it is done well and with dignity, it contributes to the function of everything around it and should be valued accordingly by all.

DR. CHARLES H. MAYO

















Mayo Clinic's Commitment to Quality



...seeks to continuously improve the processes and services which support patient care, education, and research.

Core Competencies















Additional Policies

- Social Media
- Dress and Decorum
- Equal Employment















Social Media Guidelines





Visit the Mayo Clinic Social Media Network page via the intranet



- Do not share confidential or proprietary information about Mayo Clinic.
- Must maintain patient privacy.
- Applies whether posting to own sites or commenting on other sites.
- Photographs containing any patient identifiable information are strictly prohibited.



























Dress Code

















Dress and Decorum

- Impacts patients' perceptions of Mayo Clinic
- Maintains our commitment to quality and excellence associated with Mayo Clinic tradition
- Maintains Mayo Clinic's professional image



• Key Policies















Volunteer Dress Code Policy

- It is the policy of Mayo Clinic Health System that each volunteer's dress, grooming, hygiene and demeanor support MCHS's standards of professionalism in health care
- It is therefore the responsibility of each volunteer to dress, groom and conduct themselves in a manner that is appropriate to their work setting and that presents a positive image of Mayo Clinic Health System















Clothing

- All clothing, including volunteer vests, will be neat, clean and a conservative length.
- Hosiery/socks will be worn at all times in patient care areas.















Name Badges

- Mayo Clinic Health System NWWI identification cards are worn on the upper torso with the photograph side of the card visible between the neck and waistline.
- The identification cards must be worn at all times while on the premises. The identification card may be displayed using lanyards, retractable cord badge reels, clips, or plastic magnetic holders.















Identification









Corum

















Grooming/Hygiene

- Cosmetics and fragrances should be used conservatively
- Hair must be clean and neatly styled; extreme hair colors and styles are prohibited
- Beards and moustaches must be short, neatly trimmed, well groomed
- Clothes and/or hair must not smell of cigarette smoke, or other offensive odors















Body Piercing/Tattoos

- Visible body piercing, other than the ears, is unacceptable during your volunteer shift
- Tongue and facial jewelry are not acceptable except nose piercing















Nails

- Artificial nails and extenders of any type are not allowed on clinic or hospital volunteers who have direct patient contact
- Natural nail tips should be less than ¼ inch long, clean and well trimmed; nail polish, if worn, should be unchipped. Appliqués are unacceptable















The following items are not acceptable:

- Denim pants, any color
- Shorts
- Overalls
- Spandex pants/skinny jeans/leggings
- Athletic/yoga pants
- Low cut tops, tank type tops

- Clothing with inappropriate advertising or symbols/designs including camouflage
- Flip flops (only open toed shoes in non-patient positions, i.e. gift shop, clerical)
- No sweatshirts, hooded sweatshirts or hooded sweaters
- No caps









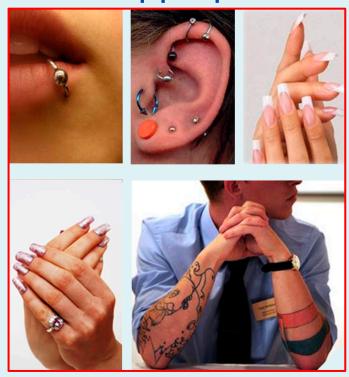






Hygiene

Not Appropriate



Corum

Appropriate



Mayo Clinic Orientation















Inappropriate Attire















>>

Footwear









Corum
Oress & Decorum















Food/Beverages

- Consumption of food, including gum chewing, is not allowed in any area that is visible to the public
- Generally food and beverages should be consumed in areas out of public view

















Infection Prevention and Control Everyone's Responsibility













MAKE A
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It is unfortunate that so few appreciate from what small causes diseases come.

DR. CHARLES H. MAYO







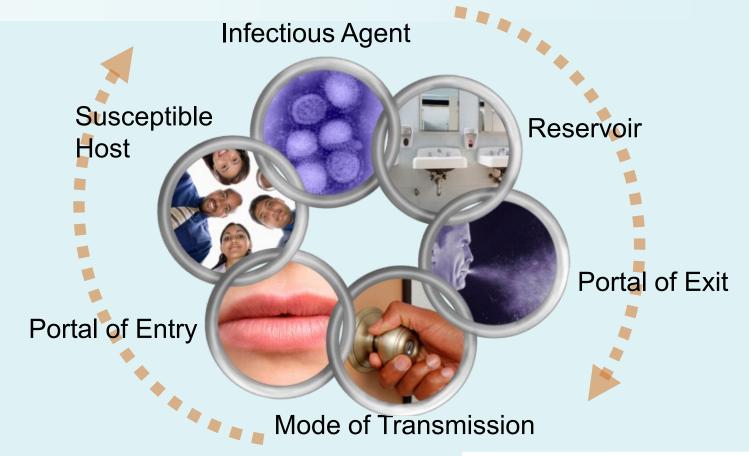








The Chain of Infection















Primary Prevention – Stay Healthy

- Eat healthy
- Drink water
- Exercise
- Get proper rest
- Routine check ups



















Primary Prevention – Stay Home When Sick

- Fever
- Persistent cough
- Diarrhea
- Vomiting













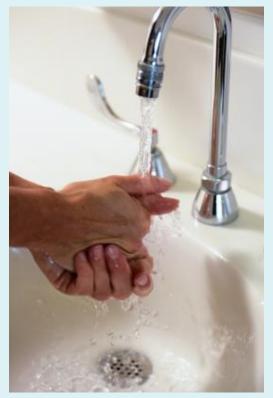






Primary Prevention – Stop Transmission at Work

- Hand hygiene
- Respiratory etiquette
- Disinfect your work area
- Immunizations
- Stay informed













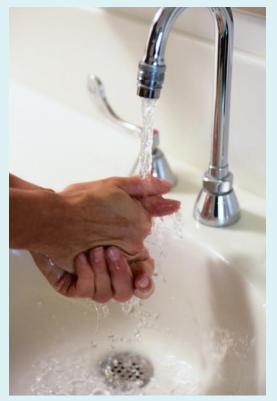






Your Role – Hand Hygiene

- Soap and water
 - Before eating
 - After using the restroom
 - When hands are visibly soiled
- Waterless alcoholbased hand rub



















How to Handrub?

RUB HANDS FOR HAND HYGIENE! WASH HANDS WHEN VISIBLY SOILED

O Duration of the entire procedure: 20-30 seconds



Apply a palmful of the product in a cupped hand, covering all surfaces;



Rub hands palm to palm;



Right palm over left dorsum with interlaced fingers and vice versa;



Palm to palm with fingers interlaced;



Backs of fingers to opposing palms with fingers interlocked;



Rotational rubbing of left thumb clasped in right palm and vice versa;



Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;



Once dry, your hands are safe.



Patient Safety

SAVE LIVES Clean Your Hands yee Orientation









WHY is it important to perform hand hygiene?

• Hand hygiene is the simplest, yet most important step in preventing the spread of bacteria and other disease-causing organisms.













Your Role – Follow Respiratory Etiquette

- Cover your cough or sneeze
- Perform hand hygiene















Your Role – Disinfect Your Work Area

- Establish a regular schedule for disinfecting your work area
- Follow your work area expectations















How Can You Break the Chain?





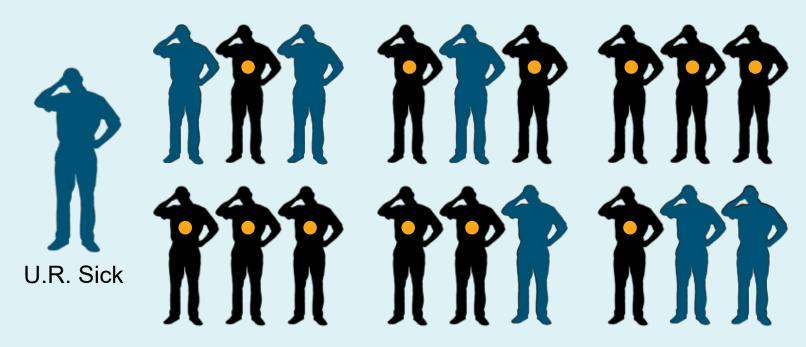








Your Role – Get Your Immunizations



- At risk of illness
- Vaccinated













Summary



Stay healthy



Stay home when sick



Soap & Water

- Before eating
- After restroom
- Visible soil



Break the Chain

- Hand hygiene
- Respiratory etiquette
- Disinfect your work area
- Immunizations
- Stay informed















Security















MAKE A
DIFFERENCE



Security Officer Duties

- Provide a safe environment for patients, staff and visitors
- Assists all NWWI sites with security related issues
- Quarterly duress alarm testing and monthly fire extinguisher inspections.
- Provide security escorts for staff members













Contacting Your Security Team

- Security should be contacted for:
 - Workplace violence incidents or concerns
 - Criminal Activity
 - Suspicious people or activity
 - Card Access or Access Control issues
 - Any security related concerns or issues
- Contact Information
 - Main Security Line answered 24/7: 8-3994 / (715)838-3994
 - EMERGENCY: 9-911 (Police)
 - Internal Emergency/Overhead Paging 8-3333













How Security can help you...

- Provide Customer Service to Patients and Visitors
- Ensures a safe work environment for MCHS Employees
- Conduct reporting and follow up on various issues:
 - Theft Reports
 - Suspicious Activity/Persons
 - Disorderly Conduct Reports
 - Employee/Patient Threat Assessment
- Provide Training and Education for MCHS Departments
 - Example: Workplace Violence Awareness
 - Women's Self-Defense













Culture of Security

Be Responsible & Communicate













Be Alert

- Awareness of surroundings
- Awareness of people out of place













Be Responsible

- Secure property & confidential information
- Doors, Filing cabinets, etc.
- Don't bring highly valuable personal items to work













Be Responsible

- Personal responsibility
- Maintain confidentially of assigned ID's, passwords and all other access control devices including, but not limited to:
 - Cypher codes
 - Key
 - MCHS Access Identification Cards
 - •PIN















Responding to Security Alerts



















Security Alert: Active Shooter

- An Active Shooter is an individual actively engaged in killing or attempting to kill people in a confined and populated area; in most cases, active shooters use firearms(s) and there is no pattern or method to their selection of victims.
- Announcement heard overhead:
 "Security Alert Active Shooter" (location)
- Before an incident occurs, have a plan and know:
 - The exits from your department
 - Rooms to hide in
 - What to do with patients in rooms Pew Employee Orientation













Run/Hide/Fight Your Response Will Include:

- Exiting the building if at all possible
- Directing patients and visitors away from the location(s) reported
- Not confronting the shooter
- Barricading/locking yourself and others in a room if you can't exit
- Turning off all communication devices & lights
- Waiting for an "All Clear" announcement













Security Alert: Active Shooter

- Active Shooter; How to Respond booklet is an excellent 'how to' guide.
- Click on this link and watch Run Hide Fight; Surviving an Active Shooter Incident, a great video that shows you how to respond (5 minutes). When you have finished watching the video complete the Active Shooter Response document in your orientation folder.













Initial Response to an Active Shooter

- Anyone who becomes aware of a person armed with a gun(s) needs to call 911 when it is safe to do so.
- Provide your name, location, number of shooters and any other pertinent information.













Security Alert: Active *Threat*

- Active Threat is a person who is attempting to harm someone using a weapon other than a firearm (such as using a knife to stab people) and the action will continue until they no longer have the capability to do so.
- Response to an Active Threat would be the same as an Active Shooter response: RUN/HIDE/FIGHT
- Announcement heard overhead: "Security Alert -Active Threat" (location)
 New Employee Orientation













Security Alert: Emergency Dept./Facility Lockdown

- Lockdown The act of securing the entrance(s)
 to a normally free access facility or area in order
 to ensure that only authorized persons are
 granted access, generally to prevent a
 security threat from entering the area.
- Announcement heard overhead; "Security Alert
 -Emergency Dept. or Facility Lockdown Plan is
 now in effect"













Volunteer Response to Lockdown

Expectations for volunteers during the lockdown event include:

- Report to work through designated employee entrances and do not allow others to enter.
- Wear your Mayo Clinic Identification/Access badge to and from work as only card access entry will be allowed to some areas.
- Don't defeat security measures by allowing anyone to gain entry into the facility.
- Remain alert to unknown persons entering work areas and know how notify appropriate response personnel.
- Don't talk to the demonstrators or media, other than referring them to the Public Affairs spokesperson or designee.













Security Alert: Building Threat

This announcement is to alert all departments that bomb threat search procedures are to be started.

- Person receiving the threat or call:
 - Obtain as much information as possible using the bomb threat card
 - Call your local emergency response number with the information
 - Participate in a search using your department Bomb Search Card and procedures
- Additional response; participating in a search
 - Look around your unit to determine if anything is or has taken place.
 - Check if an unusual package/container has been left in your area that cannot be identified or does not normally belong there.
 - If you find something out of the ordinary, notify Security. Do not touch or move anything you find!
 - DO NOT conduct intrusive searches or inspections of boxes, packages or containers that could New Employee Orientation expose you to risk! Do not touch anything you find!











Security Alert (location)

- This announcement would be made during a hostage situation
- Overhead announcements (if made based on site specific characteristics) shall refer to incident as "Security Alert", and list the location of the incident, so that staff who are not involved in the incident know to avoid the area and to direct patients/visitors away from the area.
- The primary goal of organizational response to any hostage situation will be to notify local law enforcement and facilitate their response so that they may take control of the situation as quickly and seamlessly as possible, in order to minimize risk of harm to those taken hostage as well as others in the facility.

 New Employee Orientation

















Hostage Situation

It is important to know how to respond to situations where a person or persons may be taken hostage.

- If you have been taken hostage, or if a hostage has been taken in your area:
 - Assume the hostage taker is armed.
 - REMEMBER: SAFETY FIRST
 - Cooperate with the person. Do what they tell you. Do not antagonize them or threaten them.
 - Believe what they tell you.
 - Evacuate as much as possible; at least to another floor or preferably outdoors.
 - Be the best witness possible. Note as many details of person as possible.
 - When at all possible, call site emergency number of a hostage situation; where upon, Switchboard will initiate announcement: "Security Alert- building and floor".
 - If someone is able to, call 9-911 to notify the police. Provide them with as much specific information as possible.













Volunteer Response to Missing Child/Infant



- If you witness an abduction or are aware an infant or child is missing, call:
 - NWWI Security: 8-3994
 - Site specific Emergency Number

 "Security Alert – Missing Infant or Child" (building, dept., floor, age, sex) will be then be announced over the public address system













Volunteer Response to Missing Child/Infant

- The most critical part of our Missing Child/Infant Procedure takes place on the first floor exits or main exit doors
- Departments near an exit are asked to post someone at the doors to ask people leaving the building to open coats and bags to check for hidden infants
- Do not to leave the post until the "all clear" is announced













Security Awareness: It is Everyone's Responsibility!

- REMEMBER: If you see anything suspicious, call <u>Security</u> to assess the situation.
- Be as descriptive as possible
- Timely reporting is important, notify security as soon as possible

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It is OUR Responsibility

















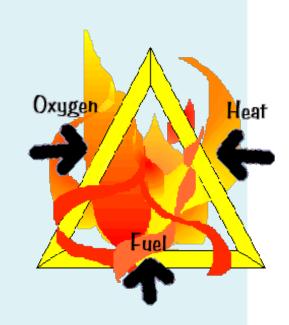


This section provides an overview on how to safely respond to a fire emergency.

This training helps meet standards established by The Joint Commission (TJC).

The Fire Triangle – Fire Prevention

- Fuel, heat and oxygen must come together and stay together for a fire to burn.
- Prevent the three legs of the Fire Triangle from coming together and you prevent a fire
- Remove the fuel, heat or oxygen leg of the fire triangle and you put out the fire

















Fire Response - RACE

The **R.A.C.E.** procedure teaches you how to safely respond to a fire.

Rescue... The Person in Danger

Alarm... Pull the Fire Alarm.

Confine... The Fire (close doors & windows)

E Evacuate... or Extinguish

New Employee Orientation













Fire Response Procedures – R.A.C.E.

"E" stands for EVACUATE/EXTINGUISH















PASS that Fire Extinguisher

- Pull safety pin from extinguisher
- A Aim low, and point nozzle at base of fire
- Squeeze lever below handle
- **S** weep from side to side















CODE RED

- Our alert code for fire is called Code Red
- You will hear this announcement:
 "Code Red building name, floor, location, area"
- Code Red procedures are all the actions you need to take in case of a fire to keep yourself and everyone safe

New Employee Orientation













Your Role If the Fire Alarm Sounds

- If you are walking in the hospital or transporting a patient in the hospital when the fire alarm sounds:
 - Listen to the announcement
 - Determine if you are in the department where the fire is located
 - If you are in the department where the fire is located, move beyond the first set of fire doors
 - Wait until the "all clear" is announced
- Be sure to explain to patients what is happening and offer reassurance.















Emergency Operations Plan













MAKE A DIFFERENCE



This section provides an overview on how the organization will manage staff during an emergency. This section addresses Joint Commission Regulation and CMS:

"As part of its Emergency Operations Plan, the organization prepares for how it will manage staff during an emergency - the hospital trains staff for their assigned emergency response roles"



Emergency Operations Plan

The Emergency Operations Plan provides an organized process to initiate, manage, and recover from a variety of emergencies, both external and internal, which could confront Mayo Clinic Health System in the Northwest Wisconsin Region and the surrounding community.

The Emergency Operations Plan takes an "all hazard approach managing emergency incidents. "All Hazards" approach means taking preparedness actions that will help facilities deal with hazards of all types much more efficiently and effectively by using a standardized method.

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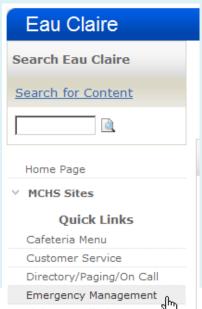




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EOP Locations

- Site Emergency Operations plans are found in the <u>Emergency Operations Plan- NW WI</u> <u>Region</u> under Related Documents.
- Or Quick Links Emergency Management















Responding to an Incident

Whether there is a planned or unplanned incident, if it is significant enough to disrupt our daily work routine, we need to implement the Incident Command system.

















Managing Incidents at Mayo Clinic Health System

- We manage incidents by using HICS (Hospital **Incident Command System)**
- HICS assists hospitals in improving their emergency management planning, response and recovery capabilities for unplanned and planned events
- It strengthens hospital disaster preparedness activities along with community response agencies













"Incident Command Alert - Briefing"

- Not all incident command activation will require a briefing but when it does, the overhead announcement will be "Incident Command Alert -Briefing"
- VPs or administrators, directors, supervisors, house supervisor, physician chairs and Nursing Administration or their designees attend briefings to receive information from the incident commander about the incident















Volunteer response to an "Incident Command Alert- Briefing

- If assigned to work in a specific department/area, remain there and perform duties as assigned.
- If not assigned to a specific department/area, report to the Volunteer Services office for assignment (Labor Pool possibly)
- •Staff assigned to the Surgery Family Information desk transfer event related calls to the Switchboard (0).



Mayo Clinic Orientation













MAYO CLINIC

Volunteer Response to Facility, Medical and Weather Alerts



















+ Code Blue + (location)

+ Code Decon +

(location)

Trauma Team Red/

Trauma Team Yellow

+ Active Shooter

+ Assistance Needed

+ (location)

+ Building Threat

+ Facility Lockdown

+ Missing Person

Thunderstorm/Tornado

Watch/Warning

+ Winter Weather

Advisory/Winter

Storm Warning

+ (system)

To request an emergency alert: Menomonie Bloomer Dial 7-1000 Mondovi Dial 7-6789 Chippewa Falls

Dial 7-2222 Dial 7-3333 Dial 7-8759

NW	WI	Regio

Announcement

Identify location/type of fire. Know the location of fire extinguishers and fire alarm pull stations in your area. Evacuate to the nearest Smoke Compartment through Smoke or Fire doors or exit the building. See the General Fire Safety "Code Red"

Blue Response Plan policy.

respond. See Bomb Threat policy.

See Thunderstorm/Tornado policy.

Decontamination policy.

Evacuation Plan policy.

Termination policy.

Emergency Response Team + (location) Alpha C Section + (location) Medical

Alert

Security

Alert

Weather

Alert

Facility

Alert

Instructions policy.

EC-Clairemont

EC-Luther

instruction. See Active Shooter Response policy.

Clear* is announced. See Threats to Person or Property policy.

Dial 8-6789

Dia18-3333

Description

Code Red + (location)

Evacuation

+ (location) + (details)

Incident Command Alert +

(descriptors)

procedure. See Cesarean Section Classification policy.

A person needs immediate emergency help. "Medical Alert" summons assistance to any area of facility. See Emergency Response Team Activation policy. A stat cesarean section. Only designated personnel should respond per

Initiate for any cardiac or respiratory arrest in the medical center. Person finding

an unresponsive person call out for help. Call your site's emergency number.

initiate CPR and send someone for an AED if one is located nearby. See Code

Instruct the contaminated person to leave the building using the same door they

Trauma Team Red/ Trauma Team Yellow – Emergency Department room X, ETA

Exit the building immediately, moving away from the path of danger. If a safe exit is not possible, shut, lock and barricade your work area doors and wait for further

A disrupting or threatening situation. Designated response personnel will respond

Bomb threat or disrupting/threatening situation. Only designated personnel should

The announcement will indicate "adult," "child" or "infant" and provide descriptors. Be watchful of anyone carrying an infant or child, an infant car seat, bulky bag or

package or is wearing bulky clothes. Post two staff (if possible) by all doors. See

immediately to the location announced. All others should avoid the area until "All

Immediately secure entrances in event that could result in property damage or

potential harm to staff, residents, patients or visitors. See Lockdown policy.

Missing Infant/Child and Elopement - Missing Patient/Resident policies. If some or all of facility becomes unsafe and requires a complete or partial evacuation, and it is necessary to protect life and safety of patients, staff and

collaboration with Local Authorities in a Unified Command, See Hospital

rooms or hallways. Yellow triangular "Tornado Shelter" signs are posted

throughout facility. See Thunderstorm/Tornado policy.

Announcement will include which staff members should report and where. The

Watch: Monitor weather announcements. Close all curtains and avoid windows.

Warning: Close curtains and avoid windows. Assist patients and staff to interior

warning's duration.) See Winter Weather Advisory - Ice and Snow Storms policy. A utility or system failure: airborne hazard, electrical, flooding, medical gas, sewer

The National Weather Service has issued a (Winter Weather Advisory/Winter

Storm Warning) for our area from X to X a.m./p.m. (A PA announcement of a

warning will be made every 4 hours for the first 24 hours, then daily, for the

system & water. See Emergency Management/Facilities Services policies.

Administrator on-call or House Supervisor/Lead Nurse will determine when Incident Command is activated. See Incident Command Activation and

visitors. Hospital Incident Command will give the order to evacuate in

entered, Only Decontamination Team members should respond. See Hazmat

X minutes. See Barron, Bloomer, Eau Claire, Menomonie and Osseo policies.

Osseo Rice Lake All other

Dial 7-8596 Dial 911/9-911

Medical Alert

- Emergency Response Team: For a non lifethreatening situation:
 - Call site specific emergency number
 - Give exact location and nature of the emergency
- Should a patient become faint or lose consciousness inside the buildings:
 - CALL FOR HELP!
 - Call a CODE BLUE
 - Call site specific emergency number
 - Give exact location and nature of the emergency













Severe Weather Tornado

- Tornado Watch Weather conditions are favorable for severe thunderstorms that could produce tornadoes. Tornadoes can occur in or near the watch area.
- Tornado Warning A term used by the National Weather Service to inform the public that a tornado has been sighted or is imminent based on radar indications.



Tornados are a high threat situation in the Northwest Region, and are likely to happen. Know how to respond at work and at home.













Safe Areas

- Areas designated as <u>Safe Areas</u> are not intended to imply that these spaces guarantee safety during a storm, but are identified as the safest available areas in the building.
- These areas describe a location or locations in a building identified as the safest areas available in a building during a storm.
- Each department and regional sites have their own specific procedure identifying their safe area(s) during a severe storm or tornado.

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To request an emergency alert:

Barron	Dial 7-6955	Menomonie	Dial 7-2222
Bloomer	Dial 7-1000	Mondovi	Dial 7-3333
Chippewa Falls	<i>Dial 7-6789</i>	Osseo	Dial 7-8759
EC-Clairemont	<i>Dial 8-6789</i>	Rice Lake	Dial 7-8596
EC- Luther	<i>Dial 8 – 3333</i>	All Other	Dial 911/9-911















Volunteer Response to a Mass Casualty Incident













MAKE A
DIFFERENCE



On-Duty Volunteer Response

 Volunteers: Stay in your area or if directed to do so report to the labor pool.















Volunteer Response to Workplace Violence and Security Alerts















MAKE A
DIFFERENCE



MCHS NWWI Region

Workplace Violence

- Workplace Violence is defined as: Threats, threatening behavior, acts of violence, or any related conduct which disrupts an employee's work performance.
- Acts include the use of weapons of any kind and/or any unwanted physical attack such as hitting, pushing, scratching or throwing objects.
- Threats include any expression designed to frighten, terrorize, or otherwise place a person in fear of bodily injury.

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Safety is a Priority

- Conduct that threatens, intimidates, or coerces another employee, volunteer, patient, or a visitor and/or violence of any nature will not be tolerated.
- Actions that threaten employees, volunteer, patients and/or visitors should be dealt with immediately by supervisors, managers and/or Security personnel.















Warnings and Signals

Anxiety	a change or increase in behavior (e.g., pacing, finger-drumming & withdrawal).
Defensive	beginning to lose rationality (e.g., noncompliant and belligerent).
Risk Behavior	behaviors that pose a risk to self or others (e.g., strikes, kicks and grabs).
Tension Reduction	a decrease in physical and emotional energy (e.g., crying and apologizing).







Reporting

- Actions that threaten employees, volunteers, patients and/or visitors should be dealt with immediately. Report to your supervisor, manager and/or Security.
- The incident must be reported to Security, and a workplace violence statement form should be completed.
- For NWWI Region, contact the Security Control Center at 83994















Waste Management















MAKE A
DIFFERENCE



Objectives

- Describe volunteer responsibilities for:
 - Solid Waste
 - Regulated Medical Waste (Infectious Waste)
 - Hazardous Waste
 - Recyclable Materials
 - Electronic Equipment













Key Points

- Avoid direct contact with hazardous materials, infectious waste and hazardous wastes
- Only trained staff should have direct contact with those materials
- Report unusual items to staff













Solid Waste

Solid waste: Common trash or garbage

Examples:

- Paper towels
- Candy wrappers
- Facial tissue
- Food















Solid Waste Disposal

Place solid waste in clear bags for disposal in a landfill















Regulated Medical (Infectious) Waste

- Contains pathogens that can lead to infectious disease
- Mainly blood and body fluids















Regulated Medical (Infectious) Waste Disposal

- Volunteers do <u>not</u> handle infectious waste
- This is a responsibility of trained staff

















Hazardous Waste

- Hazardous waste is capable of causing injury or death and may damage or pollute the land, air or water
- Volunteers do <u>not</u> handle hazardous waste
- This is a responsibility of trained staff

















Examples of Hazardous Waste

- Unused medications
- Mercury-containing items
- Bulk chemotherapy agents
- Alcohols and alcoholbased materials

- Nicotine and Warfarin and their packaging
- Unused chemicals, including cleaning chemicals













Aerosol Can Disposal



 Place aerosol cans next to waste baskets for collection by Environmental Services













Hand Sanitizer Container Disposal: Non-Empty

 Hand sanitizer containers that are **not empty** are considered a flammable hazardous waste















Hand Sanitizer Container Disposal: Non-Empty

 Place non-empty hand sanitizer containers next to wastebaskets for collection by Environmental Services















Hand Sanitizer Container Disposal: Empty

 Place empty alcohol-based hand sanitizer containers in the regular trash















Recyclable Material

Recyclable material is solid waste that is returned to productive use as material or

energy.















Paper Recycling

Acceptable:

- Paper materials/forms
- Newspaper, magazines and manuals
- Post-it[®] pads
- Adhesive labels and stickers
- Overhead transparencies
- Diskettes and computer disks
- Videotapes
- Legal paper

Unacceptable:

- Food
- Gum and candy
- Candy wrappers
- Plastic wrappers
- Drinking cups
- Facial tissues













Recycling Cans, Glass and Plastic Bottles



 Place cans, glass bottles and plastic bottles in designated containers near your work area.













Battery Disposal



- Place spent batteries in designated collection containers
- Place protective covers or tape over battery terminals of nine volt batteries before placing in collection containers













Questions About Waste Disposal

Contact staff with questions about waste disposal













Hazard Communication















Safety Data Sheets (SDS)

- Provide information about chemical hazards
- Contact the department in which you work, Volunteer department leadership, Environmental Services or a Safety Coordinator if you want to see a SDS for a certain product













Container Labels

 Container labels include pictograms, signal words, precautionary statements and other specific information about the products.















Transporting Specimens

- If items are not packaged or secured properly – Do not handle – Contact staff from that department
- If a specimen container is leaking or a spill occurs – Do not handle – Contact staff from that department













Contaminated Patient Encounters

- Avoid direct contact with the patient.
- Notify staff of situation
- Luther campus have someone dial 8-3333, request the Emergency Response Team, and indicate patient decontamination is needed
- Clairemont Campus have someone dial 9-911
- At the Regional Sites dial your Site Specific Emergency Phone Number
- Direct patient back outside and assure them they will receive care















Abuse Prevention and Employee Caregiver Misconduct Reporting















MAKE A
DIFFERENCE



Mayo Clinic Health System - NWWI

State Statute

Wisconsin statute section 146.40 (4g) (4r) states that all employees, physicians, volunteers and people under contract with Mayo Clinic Health System and its affiliates are required to immediately report any occurrences of suspected employee caregiver misconduct or injuries of unknown source.













Definitions and Examples of Various Employee Caregiver Misconduct

- ABUSE: is the willful infliction of injury, unreasonable confinement, intimidation or punishment with resulting physical harm, pain or mental anguish. Examples include, but not limited to:
 - Any intentional hitting, slapping, kicking, pinching of a patient or resident.
 - Any inappropriate touching of a sexual nature by a caregiver to a patient or resident.
 - Verbal threats or intimidation of a patient or resident.
 - Any conduct that is not part of the treatment plan or is in conflict with organization's policies & procedures that result in physical pain or injury, mental or emotional damage to a patient or resident.
- NEGLECT: is the failure to provide goods and services necessary to avoid physical harm, mental anguish or mental illness
- MISAPPROPRIATION OF PROPERTY: (or theft) is the deliberate misplacement, exploitation or wrongful temporary or permanent use of a patient's belongings, money or medications without the patient's consent













Employee Reporting of Caregiver Misconduct

- Report immediately (definition of immediately as soon as possible after the discovery of the incident)
- Report to one of the following: (not necessarily in this order)
 - Immediate supervisor
 - Department director/Assistant administrator
 - House supervisor
 - Human Resources representative
 - Department vice president













You Will Not Get into Any Trouble!

Mayo Clinic Health System will not tolerate any form of retaliation against anyone who reports suspected employee caregiver misconduct.















Abuse Prevention

We must do all that is within our control to prevent occurrences of mistreatment, neglect or abuse of our patients.















Managing Your Stress



- Stress can lead to physical, emotional or behavioral symptoms in a person
- It is important to recognize these symptoms in yourself and to take care of yourself in order to minimize stress
- As a professional, it is your job to manage stressful situations with as much knowledge, calmness, preparation, training and self-control as possible
- As a member of the healthcare team, it is your responsibility to help ensure an environment that promotes patient and resident sensitivity, security and prevention of mistreatment, neglect and abuse















Patient Rights and Responsibilities



















Patient's Bill of Rights

 The Patient Bill of Rights was written for the protection of patients and was an effort to educate healthcare providers, as well as patients, regarding patients' right to information about their health status.













Everyone is Responsible!

- All staff are responsible for ensuring that patients' rights are respected and protected at all times.
- Failure to adhere to these standards can result in large fines, loss of facility accreditation or the revocation of a license to operate.















How Does Mayo Clinic Health System Support Patient Rights?

- Provides informed patient consent
- Involves the patient/family in their plan of care
- Maintains patient safety
- Uses policies and procedures to provide standardized, evidencebased care
- Provides patient/family education
- Abides by HIPAA
- Investigates all situations of violations
- All clinic and hospital care providers, physicians, department directors, and patient service representatives are committed to understanding and resolving a patient concern in a timely and respectful manner

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Reporting Concerns or Complaints

- Patients are instructed to report their concerns or complaints if we fail to meet their expectations
- Concerns or complaints may be reported in the following manner (in no particular order):
 - To a care provider or physician
 - To the director of the hospital department or transitional care
 - To a patient service representative (888-838-4777 or 715-838-3311)













Patients **Always** Have the Right to Contact:

- The Wisconsin Division of Quality Assurance: One West Wilson Street, P.O. Box 2969 Madison, WI 53701-2969. Phone: 608-266-8481
- The Joint Commission: 800-994-6610 or their online complaint form















Relinquishing Custody of Newborns















MAKE A
DIFFERENCE



Description

It is the policy of Mayo Clinic Health System to comply with the Wisconsin Act 2 Law: "Relinquishing Custody of Newborns."

The purpose of this section is to guide volunteers on proper procedures for responding to such situations.















Upon receiving a child under protection of this law, the staff member shall:

- Try to get as much voluntary information as possible from the person who surrenders the child, including:
 - The child's date and time of birth
 - Any known medical history of the child and birth parents
 - Contacts if they are willing to provide them
 - Names if they are willing to provide them













Procedure

- In the event a newborn child is surrendered under the protection of this law, the staff member taking the child into custody shall take any action necessary to protect the health and safety of the child.
- Volunteers should contact paid staff as soon as possible.













Additional Information













Body Mechanics

- Volunteers do not usually become involved in lifting heavy items
- Call Environmental Services (Housekeeping) to do any lifting of heavy items
- Volunteers never lift patients/visitors

Call nursing to assist patients/visitors if lifting is required















Oxygen Tank Safety Hazards

- Compressed gas cylinders are extremely dangerous if not handled properly, as the pressure inside a full tank is 2200 pounds per square inch!
- It's extremely important to handle them carefully; if they inadvertently tip over and the valve at the top becomes damaged, it becomes a missile and can cause serious harm to patients and staff in the vicinity.
- Please click <u>here</u> to watch The Myth Busters in a controlled demonstration of an oxygen cylinder.













Safe Oxygen Tank Handling

- If you see an unrestrained oxygen tank:
 - Keep it under your direct control and contact the Respiratory Care Dept. or other staff in unit
 - Place in oxygen tank dolly and return to Respiratory Care Dept.















Transporting Patients

Volunteers may transport patients/visitors

- •to the parking ramp through the covered walkway
- •to a waiting vehicle at the clinic/hospital entrances

Volunteers may transport patients in w/c without staff if:

- Patients can transfer independently or are assisted by staff to transfer
- Patients have no IV's, or other accompanying equipment
- Patients are considered in stable condition.
- Patients are not under any infectious precautions

Volunteers may transport patients in w/c with oxygen if:

- Volunteer contact with oxygen tank is limited to placing the tank into holder.
 - Oxygen tank is secured in an oxygen tank holder
 - Attached to the wheelchair.
- In an oxygen tank dolly and an additional person assists with the transport.
- Volunteers may transport patients with home oxygen units in self-carry bags.

Volunteers can <u>assist staff</u> in transporting patient's with IV's and other accompanying equipment that needs to be pushed

- Patients may be in wheelchair or on a bed
- •Volunteers will not perform these transports independently Clinic Orientation













Signs on Patient Room Doors

Dove: Patient is dying and on comfort care measures only

















Signs on Patient Room Doors

Oak Leaf- Patient has recently passed, family and/or patient is still in room















Isolation Precautions: Staff, volunteers and visitors who are trained and have the proper equipment to enter a room with contact precautions.

Hospital Quick Reference Card for Isolation Precautions

Expectations for Isolation Precautions

- · Standard Precautions are followed for all patients, regardless of isolation status
- Hand hygiene is required using alcohol-based hand rub or soap and water (follow site-specific procedures)
- Personal Protective Equipment (PPE) is worn for room entry and removed before exiting the patient room
- · Use dedicated patient care equipment and disinfect any equipment used between patients or removed from an isolation room
 - In an outbreak situation, Infection Prevention and Control may modify the recommendations below

Туре	Disease Requiring Isolation (this is not an exhaustive list)	Room Type	Gloves	Gown	Mask or Respirator	Environmental Services	Patient Requirements
Airborne	Tuberculosis	Negative air Door to remain closed at all times	No	No	Fit-tested N95 respirator or PAPR	Door to remain closed for 60 minutes prior to standard terminal room cleaning	Limit transport to essential purposes only Patients are discouraged from ambulating out of their room - Patient must perform hand hygiene and wear a surgical mask before leaving room
Contact	MRSA, VRE, RSV*, resistant gram- negatives, scabies, diarrhea	Private Door may remain open	Yes	Yes	No	Routine daily and terminal room cleaning	Patient must perform hand hygiene, wear a clean gown and have clean dressings before leaving room for essential purposes or a therapeutic walk
Modified Contact	Suspected or confirmed C. difficile or norovirus infections	Private Door may remain open	Yes	Yes	No	Routine daily and terminal room cleaning with bleach wipes	Patient must perform hand hygiene, wear a clean gown and have clean dressings before leaving room for essential purposes or a therapeutic walk
Droplet	Pertussis, RSV*, parvovirus, influenza (seasonal), Neisseria meningitidis, mumps^, rubella^	Private Door may remain open	Yes	No	Mask	Routine daily and terminal room cleaning	Patient must perform hand hygiene and wear a surgical mask before leaving room for essential purposes or a therapeutic walk
Modified Droplet	Novel influenza, respiratory infection outbreaks (as directed by Infection Prevention and Control)	Private Door to remain closed during aerosol generating procedures and 60 minutes after	Yes	Yes	Mask with eye protection PAPR (or fit-tested N95 respirator plus eye protection) for aerosol generating procedures	Routine daily and terminal room cleaning	Limit transport to essential purposes only Patients are discouraged from ambulating out of their room - Patient must perform hand hygiene, wear a clean gown and surgical mask before leaving room Note: Patient activities may be limited by Infection Prevention and Control based on severity of illness
Protective Environment	Absolute neutrophil count < 500 cells/dl, post stem cell transplant	Private Door to remain closed at all times	No	No	No	Routine daily and terminal room cleaning	Patient must wear a surgical mask or N95 respirator when out of room, and when room is being cleaned and for 30 minutes after cleaning
Negative Air* (must be ordered with Contact Precautions)	Disseminated zoster^, chickenpox^, measles^	Negative air Door to remain closed at all times	Yes	Yes	No	Door to remain closed for 60 minutes prior to standard terminal room cleaning	Limit transport to essential purposes only Patients are discouraged from ambulating out of their room - Patient must wear a surgical mask before leaving room

- * Some respiratory diseases require both Droplet and Contact Precautions (e.g. RSV)
- ^ Non-immune staff and visitors should not enter this room
- # Airborne Precautions are an acceptable alternative to Negative Air Precautions if staffing/supplies allow













Other Signs on Patient Doors

 Leaf with Tear Drop: Loss Related to Pregnancy



 The swirl card is used as a visual aid in the ED to identify all high risk patients.















NWWI Mission and Vision for Volunteer Services

Our Mission

Volunteer Services provides compassionate, supportive, well trained volunteers who respond to the needs of those we serve.

Our Vision

Volunteer Services will work in collaboration with senior leadership, department leaders and staff along with the community of NWWI to develop, implement, and sustain rewarding, value-added volunteer roles which enhance the patient experience.













Role of Volunteers in Hospital, Clinic, and Home Setting

- Volunteers play a vital role providing support services to our patients, their families and our staff.
- Volunteers provide unpaid support services that supplement essential services and contribute to the enhancement of patient care.
- Supervision of volunteers will be performed by staff in their assigned department. The staff is responsible for supervision, including initial and ongoing training, performance evaluations, and performance issues.













Benefits For Volunteers

- Complimentary food and beverage allowance with a minimum of a 2 hour shift
- 20% Discount on Eye Glasses
- 10% Discount at Medical Store
- Annual Recognition Event
- Fitness Center membership as offered to employees
- Flu Shots
- Complimentary ECT bus pass









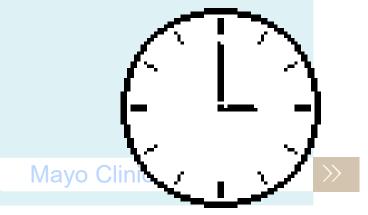






Keeping Track Of Your Volunteer Hours

- Please remember to sign in when you start your shift and sign out when you finish
- Your site specific coordinator will show you where your sign in area is located and how to use it.













Scheduling/Absences

- If you have a last minute absence (less than 48 hours in advance), please call the department you volunteer in directly to notify them of your absence.
- You may also add yourself to any shift in your area that has a Help Wanted notice.
- An automatic email notification for schedule changes will be sent to the Volunteer Services staff and the supervising staff in your assigned area.
- If you do not have access to a computer with internet, please call your Volunteer Coordinator with the information.













Scheduling/Absences cont.

- If you have a planned absence, please remove yourself from the schedule for your area. You will be shown how to do this via the computer on your first day of training.
- We understand that you may be gone for an extended vacation.
 Please give us as much notification as possible.
- If you need to be gone more than 50% of the time during the year, we will talk about the option to fill in as a substitute, giving others who are here year round the opportunity for a more regular position.













Weather Emergencies

- Volunteer and gift shop activities will be cancelled if the following criteria is met:
 - Activation of the Emergency Staffing Plan for Mayo Clinic has been made by the Hospital Operations Administrator (or Administrator On-Call after hours) or the Mayo Clinic Incident Commander.
 - Area schools have been canceled.
 - Unnecessary travel is not advised.
- In the event volunteering activity is canceled entation volunteers should not report for duty.















Valuables

- We strongly encourage our volunteers to leave items of value in their car or at home, as we are not able to guarantee the safety/security of these items while volunteering.
- If you loose an item, you can check with Lost and Found.
- If a lost item is turned in, please report it to Lost and Found immediately, as this is the best way to ensure items are returned to their rightful owner.













Personal electronic devices

 Use of personal electronic devices, including cell phones (and texting) for personal business or entertainment is not allowed during work shift except in emergency situations.

 Volunteers and staff are expected to portray a professional image and be alert to their surroundings













Criminal Charges/Reporting/Notification Policy

 Mayo expects all volunteers to conduct themselves in accordance with high personal, moral and ethical standards. This includes adherence to the law, both in their professional and personal lives. The volunteer's role and responsibilities at Mayo Clinic will be considered in determining the appropriate action to be taken based on an investigation of the nature and circumstances of the charges.













Criminal Charges/Reporting/Notification Policy continued

 Anyone who has charges pending or has been charged with or has been indicted or found guilty of a crime including alcohol or drug offenses, excluding minor traffic violations (e.g., parking, speeding), must notify their Supervisor within five days of the event and or before returning to work, whichever occurs first.









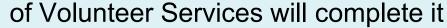




Reporting Injuries

- If you are injured while volunteering you must report your injury to your immediate supervisor and also to a member of the Volunteer Services staff.
- If your injury requires immediate attention, you should go to the Emergency Department (not to Employee Health) and register for treatment. Payment is the responsibility of the volunteer.
- Your injury must be documented on the online Incident Reporting Form, the same form we use for patients and visitors

If the supervisor or staff member does not fill out this form, the Director















Training and Orientation of Volunteers

- Volunteers are required to complete
 - Orientation PowerPoint
 - First day orientation
 - Department specific orientation
 - Annual in-service
 - Other trainings as necessary













Please complete and/or turn in the following items within the first 30 days of volunteering. If you have any questions, please call the Volunteer Office. Thank you!

- ____ Health History Form
- 1st TB Skin Test
- 2nd TB Skin Test (within 1st 21 days)
- MMR Dates or Titer
- ____ Flu Vaccine Tracking Form (Oct Mar)
- ____ Orientation PowerPoint/Completion Form
- ____ Active Shooter Response Training Sheet
- ____ Computer User Agreement (First Day)
- ____ Service Area Training Sheet (within 1st 30 days)













Please contact the Volunteer Services staff if you have any questions.

Thank you











