

**2016
Contracted
Employee &
Non-Employee
Mandatory
Education**



**Berkshire Health Systems
Education Department**
Hillcrest Campus
165 Tor Court
Pittsfield, MA 01201
413.447.2132

Welcome to Berkshire Health Systems

Mandatory Education is required of all people entering the health system as official entities such as contractors, vendors, volunteers, interns, observers and students.

Please read this booklet and complete the appropriate post test.
Return the post test to the appropriate person or to
the BHS Education Department at the Hillcrest Campus at 165 Tor Court.



Procedure for Hazardous Chemical Spills

1. DO NOT attempt to clean up the spill unless you have been trained and are confident in your ability.
2. Evacuate the area (stay outside the contaminated area until help arrives and do not let anyone into the area).

BMC, Hillcrest Campus, Northern Berkshire Campus

3. Pull the fire alarm.
4. Dial 2313 (447-2313) and report "Chemical Spill".

Fairview Hospital

3. Dial 4444; page "Code Orange" and location three times.
4. Dial 3333 and report "Chemical Spill" with site details.
5. Pull the fire alarm.

Outlying Areas

3. Dial 911 and report "Chemical Spill & Location".
4. Notify BMC Operator at 447-2313

**Do Not Attempt to Clean up the
Hazardous Chemical Spill Yourself!
The Fire Department
will respond to determine what to do next.**

HAZCOM / Right to Know

Access MSDS/SDS Sheets

"HAZCOM" refers to the Federal Hazardous Communications Standard developed by the U.S. Department of Labor Occupational Safety and Health Administration (OSHA). "Right to Know" is a Massachusetts law, enacted in 1984. Both deal with the use of chemicals in the workplace and are designed to protect all of us.

It is your right to know what is in any chemical you come in contact with at BHS. It is BHS' obligation to inform you. If you would like to know what the chemical make-up of a substance please inquire with any employee as we all have access to the employee portal which is our connection to SDS documents. See below .

The screenshot shows the Berkshire Health Systems Employee Portal. At the top left is the logo and name 'Berkshire Health Systems' with the tagline 'The region's leading provider of comprehensive health care services'. On the top right is the 'Employee Portal' title and a search bar. Below the header are navigation tabs for 'BHS Employee Portal', 'BHS Website', and 'Medical Staff Portal'. A secondary navigation bar includes 'Human Resources', 'Wellness', 'Policies & Procedures', 'Education', 'Safety & Security', 'Quality and Patient Safety', and 'Departments'. The main content area features several articles: 'Employee Open Forums', 'Enhancement to 403B Pension Plan', and 'Hip & Knee Replacement Lecture'. On the left sidebar, under 'FEATURED LINKS', the 'MSDS/SDS LINK' is highlighted with a red circle. Other links include 'MyBHS', 'BFS Newsletter', 'Revenue Blues Revue', 'Downtime', 'Patient Portal', 'Privacy and Security', and 'Employee Questions &'. On the right, there are sections for 'Employee Recreation Association', 'Scope Online', and 'ONLINE TOOLS' including 'Wireless Guest Key', 'Eye Wash Log', and 'Medical Records Request Form'.

Clicking on the **MSDS/SDS Link** will direct you to this page.

In the **Search** field, type in one of the following:

- Product Name
- Product a.k.a.'s
- Manufacturer Name
- Manufacturer a.k.a.'s
- Manufacture Product Number or Code

Choose your location from the **Locations** drop down menu.

The screenshot shows the 'MSDS Search' page. At the top, there are 'Login', 'Edit Memory', and 'Help Center' buttons. The Berkshire Health Systems logo is on the left, and 'Powered by MSDSonline' is on the right. Below the header, there are tabs for 'Safety Center' and 'MSDS Search'. The main content area is titled 'MSDS Search' and features a search bar with the text 'Search by Product Name, Manufacturer, CAS #, and/or Product Code or search by index'. To the right of the search bar is an 'Advanced Search' button. Below the search bar are several dropdown menus: 'Locations' (with 'Select Location' selected), 'Groups' (with 'Select Group' selected), and 'Product Data' (with 'Select Product Data' selected). There are also 'Product Status' (with 'Active' selected) and 'Custom Module' (with an empty text box) fields. At the bottom of the search area are 'Search' and 'Reset' buttons. Below the search area, there is a row of letters for filtering: 'Product name starts with: A B C D E F G H I J K L M N O P Q R S T U V W X Y Z 0-9 #+=

Hazard Communication (HAZCOM) & Global Harmonization System (GHS)

Changes in OSHA's Hazard Communication Law affect labels and data sheets.

Changes to labels and data sheets include a Signal Word (Danger or Warning), Hazard Statement(s), Pictogram(s), and Precautionary Statement(s) for each hazard class and category.

**Material Safety Data Sheets
MSDS**
has transitioned to
**Safety Data Sheets
SDS**

Label Sample

- Supplier Identifier
- Hazard Pictogram
- Product identifier
- Signal Word
- Hazard Statement
- Precautionary Information

MARKETING CHEMICALS LIMITED

CAUTION
KEEP OUT OF REACH OF CHILDREN

ACETONE

DANGER
GIVES OFF
FLAMMABLE
VAPOUR
KEEP WELL AWAY FROM HEAT,
SPARKS AND OPEN FLAME.
KEEP CONTAINER CLOSED
WHEN NOT IN USE.

TL	ZCL	ZDL	
CONTAINER SIZE TICKED <input checked="" type="checkbox"/>			

WARNING: This product is volatile. Avoid breathing vapours. Use with adequate ventilation. Avoid contact with skin, eyes and clothing.
USE: Predominant use as a solvent.
LEAKS AND SPILLS: Wear solvent proof gloves, face shield, goggles and boots. Prevent spill liquid from entering surface water drains. Absorb spill liquid with sand or earth then remove it to a safe area for subsequent disposal.
FIRE: Wear breathing apparatus. Use dry powder CO₂ foam, water fog, sand or earth.
STORAGE: Store container in a well ventilated area away from sources of heat.
CONTAINERS: Empty containers can still be hazardous. Keep labelled until decontaminated, then remove or deface label.
Empty uncleaned drums can still be dangerous. Keep labelled until decontaminated, then remove or deface the label.

FIRST AID: In all cases of suspected poisoning, seek medical aid at once. In the interim, the following first aid measures are appropriate:
INTERNAL: If swallowed, DO NOT induce vomiting. Give 250ml water to drink. DO NOT give anything by mouth to an unconscious person. If vapour has been inhaled, remove affected person to fresh air source and obtain medical attention in severe cases.
EXTERNAL: If spilled on the skin, wash the area with soap and water. If splashed in the eyes, bathe immediately with running water. Obtain medical attention should irritation persist.
Laundry contaminated clothing before re use.

UNIT 7/343 CHURCH STREET PENROSE PO BOX 13881 ONEHUNGA. TELEPHONE (09) 634 3862. FAX (09) 6 34 3864

GHS Hazard Pictograms

Physical Hazards



Gases under pressure



Explosive;
Self-Reactive;
Organic Peroxide



Corrosive to Metals
Skin Corrosion/Burns
Eye Damage



Flammable;
Pyrophoric;
Self-Heating;
Emits Flammable
Gas; Self-Reactive;
Organic Peroxide



Oxidizer

Health Hazards



Skin & Eye Irritant; Skin Sensitizer;
Acute Toxicity (harmful); Narcotic
Effects; Respiratory Tract Irritant;
Hazardous to the Ozone



Acute Toxicity (fatal or toxic)



Carcinogen; Mutagenicity;
Reproductive Toxicity; Respiratory
Sensitizer; Target Organ Toxicity;
Aspiration Toxicity

Environmental Hazards



Aquatic Toxicity

Hospital Emergency Operation Annexes and Alert Codes

In January 2010, codes and annexes became universal among all entities within Berkshire Health Systems.

The Hospital Emergency Operations Plan (HEOP) is an All-Hazards plan developed to allow the institution to respond rather than react to a number of external and internal events. With the activation of the plan, an incident command structure is activated and the operation of the hospital is controlled through the Hospital Command Center. These events include Mass Casualty and Hazmat incidents and Weapons of Mass Destruction, as well as utility failures and dignitaries.

BMC, Hillcrest, & Northern Berkshire Emergency Number 413-447-2313 or extension 2313

Codes

- Codes are response procedures
- Codes outline employee initial actions to a certain emergency

BHS Codes are:

Code Red:	Fire or Smoke	Code Silver:	Weapon/Violent Incident - call 911
Code Blue:	Cardiopulmonary Arrest	Code Tech:	Telecommunications, IT or Nurse Call Issue
Code Orange:	Hazardous Spill	Code Lost:	(FVH ONLY): Missing Adult
Code Black:	Bomb Threat	Code Gray:	Aggressive Person/Violent Situation
Code Pink:	Infant Abduction	Code Full (BMC) Code HELP (FVH):	The Emergency Department is full with admissions waiting
Code Amber:	Child Abduction		

Annexes

The annexes represent the various threats or incidents the hospital may need to respond to.

Annexes include the information all employees need in order to respond to the identified emergency or incident.

Type of Plan Activation

Alert Level: The Hospital Command Center is open. Departments locate the Hospital Emergency Response Guide and then standby.

Full Activation: All departments respond according to their departmental Standard Operating Guidelines. The hospital is run from the Hospital Command Center.

Listing of Annexes

Annex A:	Abduction: Confirmed Infant/Child	Annex L:	Local Evacuation: Community
Annex B:	Bomb: Device Found	Annex M:	Mass Casualty Incident in the Community
Annex C:	CBRNE Incident (Chemical, Biological, Radiological, Nuclear, or Explosive)	Annex N:	Natural Gas Failure
Annex D:	Disturbance Call	Annex O:	Medical Gas Failure (oxygen or suction)
Annex E:	Evacuation: Hospital	Annex P:	Pandemic
Annex F:	Fire with Flames/Smoke Present	Annex Q:	Dignitary/Media Event
Annex G:	Hazmat in the Community	Annex R:	Water Failure
Annex H:	Hazmat on Hospital Property	Annex S:	Structural Damage
Annex I:	Information Systems Failure	Annex T:	Telecommunications Failure
Annex J:	Joint Commission Survey	Annex U:	Loss of Domestic Sewer
Annex K:	Electrical Power Outage	Annex V:	Violent Incident (Code Silver)
		Annex W:	Weather: Severe
		Annex X:	Other Emergencies

Notification of Emergency at Berkshire Medical Center, Hillcrest Campus, and Northern Berkshire Campus

- All employees are responsible for calling extension **2313** to notify the House Nursing Director of an emergency situation.
- Authority to activate HEOP is delegated by Chief Operating Officer (COO) to Administrator-on-Call and House Nursing Directors.

Notification of Emergency at Fairview Hospital

- Employee with information calls extension **3333**.
- Employee will clearly and concisely report the emergency situation to the operator using the code “**name**”.
- The operator will notify the Shift Director or overhead page per procedure.

Notification of Appropriate Emergency for Outlying Buildings

- 610 North Street dial **9-1-1** then extension **2313**
- 510 North Street dial **9-1-1** then extension **2313**
- Bishop Clapp dial **9-1-1** then extension **2313**
- Clock Tower dial **9-1-1** then extension **2313**
- Central Block dial **9-1-1** then extension **2313**
- Crane Center dial **9-1-1** then extension **2313**
- Hillcrest Family Health Center dial **9-1-1** then extension **2313**
- Medical Arts Complex dial **9-1-1** then extension **2313**
- Urology Center dial **9-1-1** then extension **2313**
- Wound Care Center dial **9-1-1** then extension **2313**

Notification of Emergency for Off-Site South County Practices

- Dial **9-1-1**
- Clearly and concisely report the emergency situation to the 9-1-1 Dispatcher
- Notify Fairview Hospital by dialing **854-9700**

Contacting the Hospital Command Center during activation

- BMC Hospital Command Center **447-7530 or x-7530**
- BMC Hospital Command Center Fax **447-7921 or x-7921**
- FV Hospital Command Center **854-5443**
- FV Hospital Command Center Fax **854-9898**

Contacting the Operator

- BMC Operator **447-2000**
- FVH Operator **528-0790**

For All Medical Emergencies Call 911

TAKE 5

Code Silver & "L" Stickers

Any staff person who encounters or suspects a person carrying a weapon, an act of violence or a hostage (or potential hostage) situation should follow these procedures:

1. Do not attempt to intervene or negotiate, but call the Pittsfield Police Department immediately using 9-1-1 and dial 2-3-1-3 to report Code Silver to the switchboard.
2. Evacuate area if possible. Everyone in hallways or open areas are to seek shelter in nearest room marked with an "L" sticker on the door and warn others of situation.
3. Lock "L" sticker doors from the inside. Barricade doors that do not lock. Hide/Shelter in blind corners of the room out of sight from windows and doors.
4. Turn off lights. Remain quiet, calm and alert.
5. Do not respond to fire alarms UNLESS you know there is a fire in the building OR Police/Security have called for an evacuation.

Once it is safe to exit room, Police or Security will slide a document with an identifying logo under the door and provide further instructions.

HIPAA

HIPAA Goals

- Protect insurability of workers who change jobs (COBRA)
 - Simplify healthcare administration
 - Standardize electronic communication
 - ****PROTECT PRIVACY AND SECURITY OF INDIVIDUAL HEALTH INFORMATION****
-

What is considered Protected Health Information (PHI)?

PHI is information that can uniquely identify you as you, such as:

- Name
 - Birth date (except year)
 - Medical record number
 - Telephone number
 - Fax number
 - Photographs
 - Biometric identifiers (fingerprints, DNA)
 - Geographical location smaller than state
 - Social Security number
 - Email address
 - URL or IP address
 - Driver's license number
 - Vehicle identification number
 - Health plan beneficiary number
 - Encounter or account number
 - Any other unique code or characteristic
-

What are a patient's rights under HIPAA?

- Right to receive notice of privacy practices
 - Right to access one's medical record (with some exceptions)
 - Right to request an amendment of one's medical record
 - Right to accounting of the disclosures of protected health information
 - Right to request restriction on use and disclosure of one's health information
 - Right to have confidential information communicated by alternate means or at an alternate location to protect one's confidentiality
 - Right to file complaints
-

Parents may have access to their minor child's protected health information except where State Law prohibits, such as:

- Cases of child abuse
 - Emancipated minor
 - HIV testing without parental permission
 - Mature minor
-

What is the difference between USE and DISCLOSURE of PHI?

- Use includes acts such as sharing, examining, applying, or analyzing information (as in patient care)
 - Disclosure includes acts such as releasing and transferring information (as when seeking payment) PHI can be used or disclosed under the following circumstances:
 - Seeking treatment or payment
 - Information disclosure to the patient or other authorized parties
 - Healthcare operations
 - Agreement or authorization from the patient
 - Incidental disclosure (such as a doctor talking to a patient in a semi-private room – in this case, while information may be inadvertently overheard, it is
-

The Role of the BHS Privacy Officer (413-445-9321 or privacyofficer@bhs1.org)

- Develop and implement HIPAA policies and procedures
- Receive inquiries about policy content
- Monitor compliance with privacy practices
- Receive and investigate complaints about policy issues
- Provide information about the notice of privacy practices

What You, as a Non-Employee, can do to Protect Confidentiality and Privacy

While in a BHS facility and within an official role of contractor or non-employee guest.

- Never use your cell phone in patient areas.
- Always keep your phone on silent.
- Never take photos, videos, or audio recordings on BHS property without permission.
- Only use computers when authorized to do so.
- Never use a computer under someone else's login information without that person present.
- Do not listen to conversations that involve patient information.
- If you find patient information or documents, return it to an appropriate BHS employee or your supervisor.
- Do not look at information on desks or computer screens.
- Never discuss what or who you see in a BHS facilities with anyone in or outside of the BHS facilities.
- Always acknowledge people you know but do not discuss why they are in one of the BHS facilities.
- Never put anything you see or hear while here on any type of social network, including email.
- Always respect patient privacy.

Mobile Electronic Devices

Business use of Non-BHS devices for patient related information is NOT permissible UNLESS the device is safeguarded by BHS IT Services. Contact the Helpdesk prior to using any personal devices, including all laptops, tablets, smart phones, PCs, etc.

Important BHS policies to read, understand, and uphold (available on the employee portal):

- MIS-012 BHS PDA Security Policy
- EC.F.6 – Use of Cellular Telephones
- BHS Policy 225 – Social Networking
- BHSP 101 – Confidentiality
- BHSP 106 – Harassment
- BHSP 202 – Information Systems User Account Policy
- BHSP 203 – Information Systems Email Policy
- BHSP 206 – Information Systems Acceptable Use and Monitoring Policy
- BHSP 210 – BHS Portable Device Policy
- BHS P2 P34 – Minimum Necessary Access & Disclosure to Protected Health Information

How Do You Know?

When determining how confidential information is used, it is important to ask yourself (or others) the following:

- Do I need this information to perform my job?
- If so, what is the minimum amount of information I need?

Enforcement of HIPAA

Failure to comply with HIPAA laws may result in federally prosecuted criminal or civil penalties.

Non-compliance can result in:

- \$100-\$50,000 fine for each violation
- Maximum of \$1,500,000/year per specific provision
- Penalties can also include prison for instances of knowingly violating the law and/or fraud.

In addition to any legal penalties, at ANY BHS entity, failure to comply with the law will result in disciplinary action, up to and including termination.

If you have questions or need more information, please contact the BHS Education Department (413-447-2132), the Fairview Education Department (413-528-2663), or the BHS Privacy Officer, Greg Bianca, (413-445-9321).

OSHA

AIRBORNE PATHOGENS:

Tuberculosis (TB) Prevention and Control

Airborne Pathogens

“Germs” are put into the air when a person with an airborne pathogen coughs, sneezes, sings, or laughs. These are very small (aerosol-sized) and remain suspended in the air for a period of time. Examples include (but are not limited to) tuberculosis, measles, and the varicella-zoster virus (which causes chicken pox).

What Is Tuberculosis (TB)?

TB is a communicable disease caused by bacteria called Mycobacterium Tuberculosis. It is spread from person to person through the air. The infected person (source) exhales germs into the air, and another person (host) inhales them. TB usually affects the lungs, but can also affect other parts of the body, such as the brain, kidneys, or spine.

How is TB Transmitted?

TB is a type of bacteria that is carried through the air in tiny droplet nuclei. These tiny droplets are less than 5 microns in size. They can stay in the air for long periods of time, riding on air currents.

Who Tends to Get TB?

Anyone can contract TB. However, some people are at higher risk; those more susceptible include:

- People who share the same breathing space
- Homeless individuals
- People who live in residential facilities (including jails)
- Foreign-born people from countries where TB is a public health problem
- Substance abusers

People with diseases that cause immunosuppression, such as diabetes and HIV

Symptoms of TB

The following is a list of possible symptoms of TB infection:

- Feeling weak
- Weight loss
- Bloody sputum
- Fever
- Night sweats
- Loss of appetite
- Chest pain
- Persistent cough lasting 3 weeks or longer

Diagnostic Testing for TB

There are 4 methods used for testing for TB.

- Tuberculin Skin Test
- Chest X-Ray
- BAMT-Quantiferon-Gold Blood Test
- Sputum Culture

ALL NON-EMPLOYEES WITHIN THE BHS SYSTEM MUST RECEIVE A TB TEST ANNUALLY.

Prevention of TB

At BMC and FVH, there are several plans in place that are designed to prevent the spread of TB. Policies which address prevention are available on the Employee Portal.

Procedures at BMC and FVH that help decrease the chance of spreading TB include:

- Airborne Precautions
- Annual employee education
- Use of respiratory protection (N95 mask at BMC; MaxAir Hood at FVH) when entering the room of a patient with known or suspected diagnosis of TB. Staff caring for these patients at BMC will be fit-tested for these masks in Occupational Health and Wellness. The staff at FVH is educated as to the assembly and use of the MaxAir Hood.

Patients with confirmed or suspected diagnosis of TB must be placed in a private room with all of the following:

- Monitored negative pressure with a minimum of 6-12 air exchanges per hour
- Appropriate discharge of exchanged air to the outside
- Closure of the room door at all time, keeping the patient in the room

The transport of the patient from the room is limited to essential purposes only. When necessary for the patient to leave the room, place a surgical mask over his/her mouth & nose.

TB Infection vs. TB Disease

People with **TB disease** are sick from the bacteria that are active in their bodies. These people are capable of giving the infection to others. Medicines that can cure TB are prescribed for them.

People with **TB infection** have the bacteria in their bodies, but they are not sick because the bacteria are inactive (latent). They cannot spread the germ to others. However, they may develop TB disease in the future, especially if in high risk groups. Medication used to treat TB is prescribed for them.

TB Treatment

Most patients with TB must take anti-TB medication for 6-12 months. They may have to take as many as 5 different medications, depending on their plan of care. Treatment plans must be followed diligently.

The contagious period depends on the patient's response to treatment. It may be as short as two weeks, or can last longer based on the results of sputum tests, X-rays, CT scans and symptoms.

TB Isolation

Tuberculosis patients at BMC will only be housed in the Critical Care Step Down Unit (CCSDU) or in the Critical Care Unit (CCU). There are also two negative pressure rooms in the Emergency Department that can house patients until they are admitted. These rooms will be identified with an "AIRBORNE PRECAUTION" sign outside the room. (See BMC POLICY IC.B.2.)

Work Practice Controls for TB

Certain Work Practice Controls will reduce employees' risks of exposure to TB in the healthcare setting.

- Pre-employment evaluation of employee for TB infection and disease
- Employee awareness of policies and procedures to reduce exposure
- Knowledge of the proper use of PPE
- Periodic skin testing of employees as needed
- Reporting symptoms suggestive of TB

Summary

As healthcare workers, we must understand our role in keeping our patients, their families and visitors, our peers, and ourselves free from disease. Always:

- Understand how TB is transmitted
- Identify risk factors
- Recognize signs and symptoms
- Institute Infection Control measures as warranted
- Assure treatment and follow-up for patient

OSHA

BLOODBORNE PATHOGENS

What is a Bloodborne Pathogen?

A **bloodborne pathogen** is a virus, bacteria, or microorganism found in one person's blood and/or body fluids that can cause the same infection if it enters another person's blood or body. The **most common bloodborne pathogens** are Hepatitis B, Hepatitis C, and HIV. Other examples of bloodborne diseases include malaria and syphilis.

Hepatitis

The Hepatitis B (HBV) and Hepatitis C (HCV) viruses invade the liver and can cause life-long liver damage. They can also cause potentially life-threatening infections. Signs and symptoms of both HBV and HCV include:

- Fatigue
- Abdominal discomfort
- Light-colored stools
- Loss of appetite
- Dark urine
- Fever
- Diarrhea
- Nausea/vomiting
- Jaundice (yellowing of the eyes and/or skin)
- Itching
- Aching muscles/joints

Hepatitis B Vaccination

The Hepatitis B vaccination is available at no cost to all employees. The vaccination consists of a series of 3 injections: one initially, one in a month, and one in 6 months.

The HBV vaccine appears to provide lifetime immunity at a level of 90-95%. At this time, the Center for Disease Control (CDC) has no recommendations for a booster.

If you decide **not** to accept the vaccine, you will be asked to sign a form declining it yet may change your mind later.

For more information about the vaccine, or to make an appointment to receive the vaccine, please call: **Occupational Health and Wellness** at **447-2684**.

Hepatitis C

Infection with Hepatitis C (HCV) is referred to as the "silent epidemic," because it progresses slowly - often over many years. Most people who are infected with it are not aware of symptoms for a long time.

Currently, there is no available vaccine to prevent people from getting Hepatitis C.

Exposure Control Plan

The Exposure Control Plan, BMC POLICY IC.C.4 is located on The Employee Portal.

Discusses how the organization addresses OSHA regulations.

Identifies the potential risks of exposure of employees by job classification.

Category 1: Performs tasks with the potential for exposure to blood & body fluids.

Category 2: Performs tasks that do not involve exposure but there may be an unplanned exposure.

Category 3: Performs tasks with no actual exposure.

Infection Control and Standard Precautions

All human blood and body fluids are treated as if known to be infectious for HIV, Hepatitis B, Hepatitis C, and other bloodborne pathogens.

Use precautions for anticipated contact with blood, body fluids, excretions, secretions.

HANDWASHING/HAND HYGIENE is necessary before donning and after removing gloves, and before and after contact with patients, clients, and residents.

Personal Protective Equipment (PPE) – **Know where your PPE is located in your work area.**

Methods of exposure

- Needlesticks
- Contact with open skin
- Sharing needles
- Perinatal
- Sexual contact
- Mucous membrane exposure

Activities related to needlestick injuries include (but are not limited to) the following:

- Drawing blood
- Recapping needles*
- Failing to activate safety devices
- Disposing of needle incorrectly
- Handling trash and contaminated linens

*** Recapping needles is Strictly Prohibited**

Engineering Controls

Physical and mechanical systems that physically prevent you from touching blood or body fluids with your body are called Engineering Controls. Examples of Engineering Controls include:

- CPR masks
- Sharps/safe needle devices
- Equipment sterilization
- Sharps containers

Personal Protective Equipment

Personal Protective Equipment (**PPE**) is an important barrier between your body and potentially infectious blood and body fluids. When there is a risk of exposure, the appropriate **PPE** must be utilized. Be sure to apply, remove, and dispose of the **PPE** so that you are not contaminated. **PPE** may include:

- Gloves
- Aprons
- Masks
- N95 Mask/PAPR (BMC)
- Gowns
- Face Shields
- Goggles
- MaxAir Hood/N95 Mask (FVH)

Environmental Controls

Environmental control is achieved through good environmental practices. These practices can play a part in your protection, and are the responsibility of all healthcare workers. These practices include:

- Maintaining cleanliness in the work area
- No eating or drinking in the workplace/work area
- Using appropriate solutions when cleaning
- Using tongs, forceps, or dust pan & brush when picking up glass
- Disposing of contaminated articles in appropriate containers
- Discard anything soaked or saturated with blood and/or body fluids in a red biohazard bag

Labeling

A biohazard label is used to warn of an existing bloodborne hazard or infectious waste.

Never open or go into this type of container! You may see these labels on:

- Containers of regulated waste
- Refrigerators or freezers used to store blood or body fluids
- Red biohazard bags, used for infectious waste handling

It is the responsibility of providers of patient care to bag all infectious waste in red 3.0 ml red bags, sealed securely to eliminate leaks, and deposited in trash receptacles designated for infectious waste.



Post-Exposure Follow-up

If you have an exposure to blood or body fluids at work, follow this correct protocol **immediately**:

- **Provide yourself with first aid.** Skin should be washed with soap and water, small wounds and punctures cleansed with alcohol based hand hygiene agent or chlorhexidine; mucous membranes should be flushed with water or saline. **Use Eye Stations where available.**
- **Notify** your supervisor or the appropriate person
- **Report at once** to the Emergency Department and complete all paperwork as directed.
- **Time is of the essence** as post-exposure treatment should be started within 1-2 hours of the exposure.
- **ALL information is confidential.**

Cleaning Up a Bio-Hazard Spill

If you come across a blood or body fluid spill, you must call the Environmental Services Department to clean the spill at the following phone numbers:

- BMC Campus: extension **2496 (447-2496)**
- Hillcrest Campus: extension **9260 (445-9260)**
- Northern Berkshire Campus: extension **2496 (447-2496)**
- FVH Campus: extension **5075 (854-5075)**, or have the operator page Environmental Services

Hand Hygiene

The single most effective means of stopping the spread of infection is hand hygiene.

Hand hygiene should occur:

- When your hands are visibly soiled, you must use soap and water to wash your hands.
- When hands are not visibly soiled you may use an alcohol-based hand rub solution to decontaminate your hands. **Exception:** if the patient has *c. difficile* you must use soap and water. Alcohol gel is not effective in killing the spore form of this organism.
- Hands must always be cleaned before and after seeing a patient for any reason.
- Hands must always be cleaned before putting gloves on and after taking gloves off.

Additionally, anyone having direct patient contact are required to comply with the following:

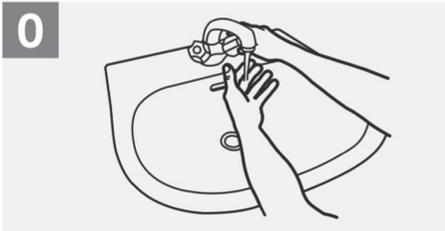
- Fingernails must be kept short and groomed (no longer than ¼ inch in length)
- If used, nail polish must be freshly maintained and free of chipping
- Healthcare employees having direct patient contact **may not wear** artificial nails, including but not limited to bonding, acrylics, gels, tips, wraps, tapes, or nail jewelry.

How to Handwash?

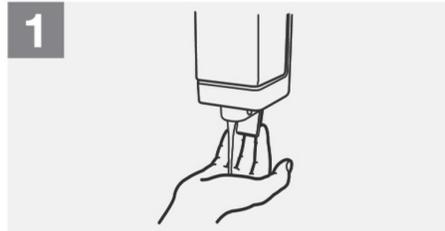
WASH HANDS WHEN VISIBLY SOILED! OTHERWISE, USE HANDRUB

 Duration of the handwash (steps 2-7): 15-20 seconds

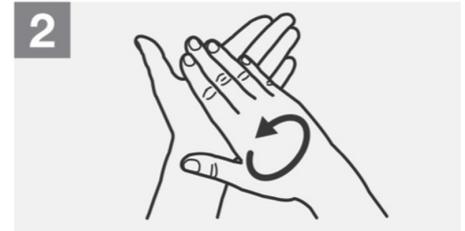
 Duration of the entire procedure: 40-60 seconds



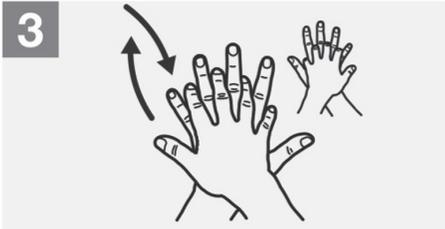
Wet hands with water;



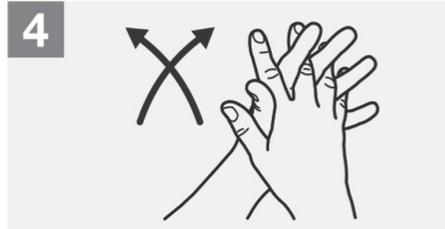
Apply enough soap to cover all hand surfaces;



Rub hands palm to palm;



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



Palm to palm with fingers interlaced;



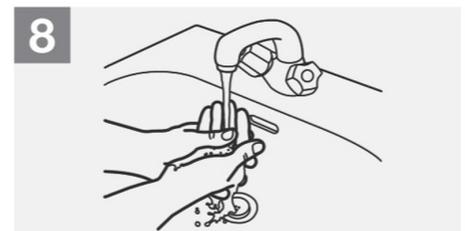
Backs of fingers to opposing palms with fingers interlocked;



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



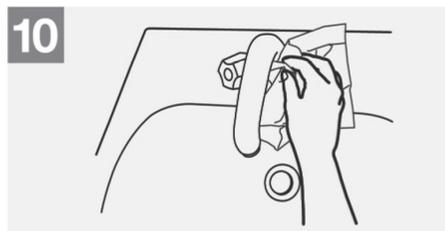
Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;



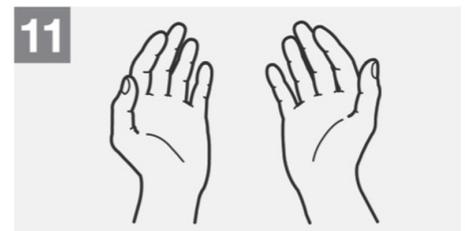
Rinse hands with water;



Dry hands thoroughly with a single use towel;



Use towel to turn off faucet;



Your hands are now safe.



World Health Organization

Patient Safety

A World Alliance for Safer Health Care

SAVE LIVES

Clean Your Hands

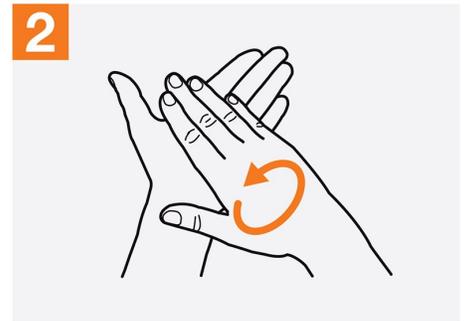
How to Handrub?

RUB HANDS FOR HAND HYGIENE! WASH HANDS WHEN VISIBLY SOILED

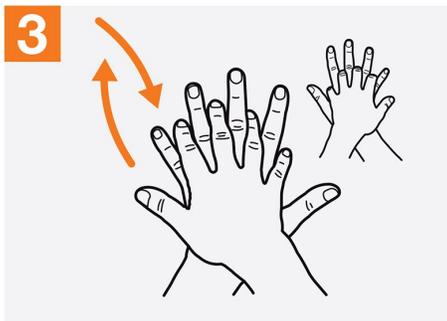
 **Duration of the entire procedure: 20-30 seconds**



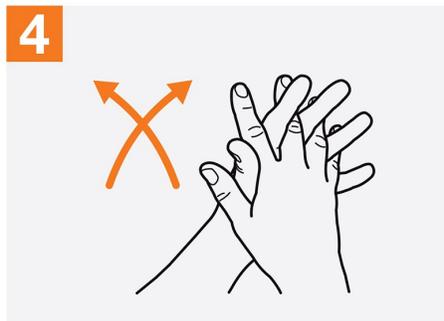
Apply a palmful of the product in a cupped hand, covering all surfaces;



Rub hands palm to palm;



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



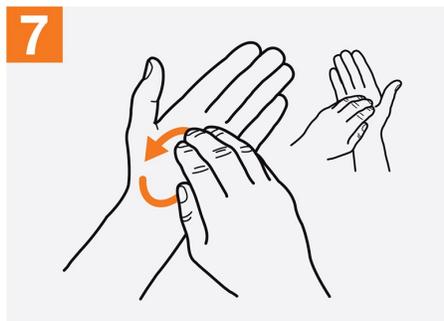
Palm to palm with fingers interlaced;



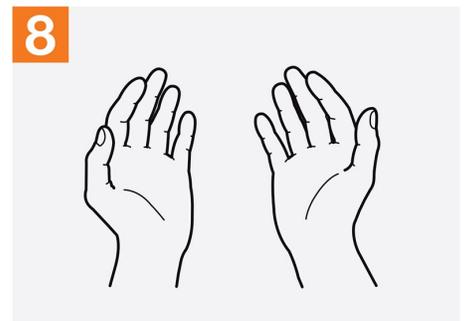
Backs of fingers to opposing palms with fingers interlocked;



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.



World Health Organization

Patient Safety

A World Alliance for Safer Health Care

SAVE LIVES

Clean Your Hands

Disinfectant Chart

Disinfectant	Container	Department Utilization	What do I use it on?	Kill Time	Does it Kill C diff?	Type of Disinfectant
Dispatch Wipes		All clinical areas	Used for modified contact precautions Use to clean and disinfect equipment being brought out of a modified contact isolation room Blood or body fluid spills	2 minutes for blood and body fluids 5 minutes for C difficile	Yes	Bleach
PDI Sani-Cloth AF3		All clinical areas	All patient rooms and shared equipment Portable electronic equipment Nursery crib and isolettes Ultrasound probes Discharge charts Plastic surfaces you need to see through	3 minutes	No	Quaternary Ammonium Compound
Oxycide		Environmental Services	All patient rooms and shared equipment C diff rooms Blood & body fluid spills Discharge Charts Nursery crib & isolettes Plastic surfaces you need to see through	5 minutes	Yes	Broad spectrum disinfectant Hydrogen peroxide & peracetic acid

Smoke-Free for a Healthy Community

Berkshire Health Systems

Berkshire Health Systems is committed to the promotion of health and the prevention of disease. To maintain a safe and healthful environment for patients, visitors and employees, Berkshire Health Systems has decided to become a Tobacco and Smoke-Free Organization.



**Tobacco and Smoking
are NOT allowed
on any BHS property.
(even in your car in a BHS parking area)**

Patient Bill Of Rights

The Patient Bill of Rights is the policy created to assure that all patients and people working in the health system are aware of patients' rights and responsibilities. A sample of these rights and responsibilities are included in the welcome packet given to every patient in the hospital. In addition, the policy is posted in several locations throughout Berkshire Medical Center and Fairview. The main points of the Patient Bill of Rights with a brief description include:

- **Informed Consent**

Competent adult patients over the age of eighteen in a healthcare facility have the right to informed consent to the extent provided by law.

- **Massachusetts Healthcare Proxy**

The healthcare proxy is the State of Massachusetts advanced directive. While "Living Wills" are not recognized by the Commonwealth as an advanced directive, BHS hospitals honor these requests from patients and use them as guides.

- **Life Saving Treatment**

Patients have the right to prompt life-saving treatment in an emergency without discrimination.

- **Right to Refuse**

The patient has the right to accept or refuse care. If they refuse treatment, they will be informed of the effects on their health.

- **Right to Information**

Patients have the right to information regarding:

- Medical records; patients have the right to inspect or receive a copy;
- Names and specialties of persons responsible for their care;
- Relationship of the facility to any other health care or educational facilities, as it applies to their care;
- Their rights and responsibilities as a patient;
- Financial assistant programs and what they may be responsible for;
- For maternity patients, the annual rates of primary and repeat C-sections, percent of deliveries in birthing rooms, and other pertinent information.

- **Confidentiality**

A patient in a healthcare facility has the right to expect that his/her privacy will be maintained in every respect:

Patient Population Considerations

Berkshire Health Systems provide services to all age groups and recognize the need for everyone to promote health and meet the needs of individuals according to who they are as an individual. As we continue to build a multi-disciplinary patient care service, an increased awareness of the individual's age-specific needs will assist in meeting the outcome goals of patients and their families' significant others. Our patients and their families will benefit by everyone responding to their needs by utilizing the most appropriate tools, resources, and information that are available to us in the era of new technology and research.

When considering the multifaceted needs and characteristics of each age group, it is especially important to consider aspects of safety and communication. The age-specific populations that are served by BHS will benefit from your ability to interact, communicate, support patient relationships with significant others and maintain the safety of the patient.

For those working with patients, please read Appendix A on page 32 to familiarize yourself with the safety concerns of each population.

Patient Property

The responsibility for patient property at Berkshire Medical and Fairview applies to all BMC and FVH employees, medical staff, house staff and volunteers. There are systems in place which are effective in preventing and/or reducing the incidence of lost property.

As a contractor or non-employee visitor, when you find patient property, you should:

1. Notify a BHS Employee who will take care of it
2. Or at BMC, Hillcrest and Northern Berkshire Campuses, call Security promptly for pick-up (x-2311 or 447-2311).

Please do not leave items outside of the Security Office.

3. At FVH, call the Shift Director or Flow Coordinator (x-5032)

Patient / Visitor Online Quality Tracking System

The Patient/Visitor Quality Tracking System exists for BHS not only to track errors and injuries, but more importantly to identify potentially hazardous situations and fix or improve them **before** an injury occurs. We are required by the Patient Care Assessment Law to have such a system in place, and it is the duty of **every person** to report incidents using this system. An incident is defined as an unusual event that results in or could result in an adverse outcome for a patient or visitor. Incidents to be reported include (but are not limited to): falls, equipment failures, and security issues.

It is our mission to improve the health status of our community; if a patient or visitor is injured here due to an unsafe condition, then we have violated the trust of those who seek care at BHS facilities. The best way to bring attention to a problem is to file a quality tracking form.

As a contractor or non-employee worker or guest, you should :

1. Recognize any errors, accidents, injuries, or potential liabilities outside of your job site and report them to your BHS supervisor immediately
2. Stay with person filing the Quality Tracking Form until report is complete
3. Never allow any incident to go unreported

Sensitivity towards Patients and Families during Critical Illness

As people in a health care setting, it is our duty and responsibility to show compassion towards patients and family members at all times, but especially during times of critical illness. Everyone who works in this hospital system has an obligation to ensure that our patient's comfort (physical, social, or mental) is maintained throughout their stay here. Those patients diagnosed with a critical or terminal illness need our assistance, our compassion, our sympathy and our empathy. A white rose on a patient's door indicates that the patient has recently passed away.

Diversity, Inclusion and Cultural Competence

Diversity, inclusion and cultural competence are necessary if BHS is to create a welcoming, inclusive, and safe environment for all patients, visitors, and employees.

Be Aware of Diversity and Use Inclusive Practices

- Be willing to learn.
- Examine your own values and prejudices.
- Keep an open mind; look at the world through varying perspectives.
- Respect differences among people.
- Be patient, friendly and flexible. Allow for extra time when it is necessary to meet out-of-the-ordinary needs.
- Do not judge different beliefs even if you do not agree with them.

- Do not judge based on looks or behaviors; each patient deserves professional care given with respect and dignity regardless of size, mental health, emotional state, or frequency of visits.
- Never push or hang onto a wheelchair without asking permission to do so.
- Always ask if someone needs help and wait for the answer before helping.
- If a service dog is in a harness, do not distract it or touch it.
- Treat each person as an individual.
- Do not raise your voice if someone does not understand you.
- People with disabilities should not be called “disabled”. For example, we care for patients with disabilities not disabled patients.
- Do not use labels and name calling; for example, terms such as fat, fat-so, frequent flyer, med seeker, bell ringer, honey, sweetie, doll, crippled, retarded, confined to, victim, and the like are unacceptable.

Plant Safety: The Environment of Care Committee

Plant Safety at Berkshire Medical Center (including Hillcrest and Northern Berkshire Campuses) and Fairview Hospital is monitored by the Environment of Care Committees at each hospital. By “environment of care,” we mean the environment in which the care is given and includes the systems outlined in this section. The Environment of Care Committees meet formally once per month to review safety related issues, but various members meet more frequently to act on safety problems, and all members participate in hazard inspection tours throughout the health system.

Questions and Safety Issues

1. Contact the BMC Safety Officer at extension **x 2310**, FVH Safety Officer at extension **x 9672**
2. Contact any member of the Environment of Care Committee at BMC or FVH.

Utility Systems

The **BMC Engineering Department** and the **FVH Maintenance Department** monitors utilities systems and has comprehensive plans in place for procedures during utilities failure. In the event of power, heat, or water problems in your area, including Hillcrest and Northern Berkshire Campuses, contact the BMC Engineering Department (x 2050) or FVH Maintenance Department (beeper #9678) immediately.

In the event of a failure of the BMC telephone system, the switchboard can be reached via an independent phone at **447-7063**.

- The independent phone at the Hillcrest campus is **413-448-2546**
- The independent phone at Northern Berkshire Campus is **413-664-8154**
- The independent phone at Fairview Hospital is **413-528-8600**

Power

BMC power is supplied by two separate power supplies from the utility. If one supply fails, the hospital is automatically transferred to a secondary supply. Additionally, BMC has two emergency generators capable of supplying power to all critical areas and other selected areas which require emergency power. The emergency power systems are started weekly and fully load tested monthly.

The Hillcrest and Northern Berkshire Campuses are supported by emergency/standby power generators capable of supporting all functioning services on each campus.

FVH power has the capacity for both oil and natural gas, as well as an emergency generator to supply all critical areas.

Heat

Problems with heat should be referred to the Engineering Department by dialing the help center at extension **#77 at BMC** and the Maintenance Department at **Beeper #9678 at FVH**.

Water

BMC is supplied by two different water mains. In the unlikely event that both should break at the same time, we have an agreement with the Pittsfield Fire Department, who will provide trucks as needed to pump water into the hospital's stand pipe system for non-potable uses such as hand-washing and lavatory use. If needed, the Pittsfield Fire Department has access to 1,500- and 2,000-gallon water tankers through the County Mutual Aid System for additional water. This contingency plan would also serve both the Hillcrest and Northern Berkshire Campuses in the event of water loss.

In the event the FVH water main should break, water will be supplied by Great Barrington Fire District for non-potable uses. Potable water would be supplied by Hillside Spring Farm, Crescent Creamery, and Berkshire Springs.

Fire Safety

This section includes some basic information on fire prevention, the general rules for responding to a fire in the hospital, and an overview of the types of fire extinguishing systems we have, as well as some notes on their operation. It is up to you to also know the following specific locations and/or procedures from your own area of work: Upon orientation to your area of work you should know where to find:

- **fire alarms**
- **fire exits and escape routes**
- **emergency phone numbers**
- **fire extinguishers**

Common Fire Locations

Fires are particularly likely to occur in areas enriched in one of more of the components of the fire triangle (Oxygen, Heat, and Fuel). Such areas include:

- Laundries
- Laboratories
- Boiler rooms
- Storage rooms

RACE (Response to fire):

R RESCUE patients, visitors, or fellow employees by moving them to safety, through a fire door. **NEVER** place yourself in serious danger to do so.

A Pull the **ALARM**; phone the emergency switchboard or 911 as soon as possible.

C CONTAIN the fire/spill by closing doors and sealing openings. DON'T get so involved that your own life may be in danger.

E EXTINGUISH a fire ONLY if **(1)** you have performed steps R - A - C, **(2)** the fire is relatively small and safe to approach, **(3)** you are confident in your ability to use the extinguisher, and/or **(4)** you are forced to confront the fire to make your escape.

A red slash through any of the fire-class symbols on an extinguisher's label means you must not use the extinguisher on that class of fire.

Fire Emergency Numbers:

BMC, Hillcrest Campus, and Northern Berkshire Campus Emergency: x-2313 (413-447-2313)

Fairview Hospital Emergency: x-3333

BMC phone out: 447-7063

Hillcrest phone out: 448-2546

Northern Berkshire Campus phone out: 911

Fairview phone out: 528-8600

NON-BMC CAMPUS MEDICAL EMERGENCY: 911

Extinguish

Before fighting a fire, be sure that . . .

- 1. You have been trained to operate the extinguisher.**
- 2. Everyone not designated to use extinguishers is leaving the area and someone has sounded the alarm and called 9-1-1.**
- 3. You have an unobstructed escape route in case you can't put out the fire.**
- 4. The fire is small, confined, and not spreading.**

You know what's burning and your extinguisher is right for the fire.

PASS (Using portable extinguishers:)

Keep your back to a clear exit and stand six to eight feet away from the fire, and remember the acronym PASS:

Pull the pin that unlocks the operating lever.

Aim the extinguisher nozzle or hose at the base of the fire.

Squeeze the lever above the handle to discharge the extinguishing agent. To stop the discharge, release the lever.

Sweep the nozzle or hose from side to side. Keep the extinguisher aimed at the base of the fire and sweep back and forth until the flames appear to be out.

- Watch the fire area. If the fire re-ignites, repeat the process.
- Have the fire department inspect the fire site, even if you think you've extinguished the fire.

**The mission, or charge, of the
Environment of Care Committees is to**

- **Analyze identified safety management issues**
 - **Develop recommendations for resolving them**
 - **Seek opportunities to improve the overall safety**
- within our healthcare environment.**

Electrical Safety

The BMC Engineering Department is responsible for Utilities Systems including electrical power; problems with power or electrical outlets at BMC and licensed satellites.

Electrical Safety is every employee's responsibility. Problems can't be corrected in a safe and timely fashion unless they are reported. Any time you use a piece of electrical equipment at work, you should make a visual inspection. Is the device, or the power cord, damaged in any way? Has it been dropped or splashed with liquid? If so, don't use it. Take it out of service, label it, and report it to your supervisor.

Life Safety Management

Purpose:

The Life Safety Program at BHS is specifically geared to design, implement, monitor, and manage a safe environment to reduce the risk of injury for patients, staff and visitors for Berkshire Medical Center, Hillcrest Campus, Northern Berkshire Campus, Fairview Hospital, and off-site locations, and to provide compliance with applicable codes and regulations, as applied to the buildings, services, properties and grounds on all campuses. Required characteristics specify general elements to consider for an effective Life Safety Management Program.

Responsibilities

The Life Safety Management Program is administered by the Safety Officer, who has the authority from Administration to police all aspects of the program. The Safety Officer at BMC is assisted by the Director of Facilities, the Chair of the Environment of Care Committee, and the Environment of Care Committee membership.

The Director of General Services at FVH is the Safety Officer, and has the authority from Administration to police all aspects of the Life Safety Management Program.

Procedures and Monitoring

A. Life Safety Management Program

The Life Safety Management Program addresses the policies and equipment affecting all patients, personnel, and visitors. Some of the elements that affect the program, include, but are not limited to:

1. Life Safety for all occupants during renovations to buildings from planning stages to construction and code compliance.
2. Reporting and investigating Life Safety issues.
3. Inspecting and testing of systems.
4. Training.

B. Important aspects of Life Safety

1. The "unit concept" approach to Life Safety; identification of smoke compartments and staff education of the locations of those compartments.
2. Testing of all Life Safety systems as required by law.
3. New materials compliance with applicable laws on flame and smoke.
4. Training for emergencies.
5. Drills.

C. Identification Indicators

1. The "unit concept" approach must be adhered to because the rapid evaluation of bedridden patients is, many times, near impossible. Therefore, every unit must be maintained and inspected as often as required.
2. Life Safety systems are inspected and tested per requirements.
3. New materials are not put to use unless the Purchasing Department has received manufacturers' specifications of flame/smoke spread. If a material is in-house without proper specifications, the Purchasing Department test is similar to CMR20.

Prevention	
Fire Exits	Fire exits must be kept clear at all times. Never leave a fire door propped open, and never block a fire exit. During a fire emergency a blocked fire exit could cost someone's life.
Storage	Flammable materials must be stored in specific areas. All storage areas must be kept neat and clean, and exits must not be blocked. Be sure not to store supplies within 18" of sprinkler heads.
Oxygen	Fire requires three things: oxygen, combustible material, and a spark. Help to minimize risk by turning oxygen off when not in use. Also, know the location of main O2 shutoff valves in your area. The RN in charge of a unit is responsible for shutting off the O2 after the last patient leaves in the event of an evacuation.
Aerosols	The use of aerosol sprays in the hospital is very limited today. Still, it is important to note that these products can be extremely flammable - in the presence of open flame, or spark from a piece of electrical equipment, they present a serious fire hazard.

4. Training takes place every month through the Education Department's Orientation Schedule. There are also department-scheduled annual retraining classes for staff, students and volunteers. Construction workers are managed through the Facilities Department at BMC.
5. Fire drills are held at the rate of once a month involving the whole complex with all shifts being covered quarterly. (overnight patient areas).

D. Thresholds for Evaluation

All aspects of the Life Safety Program will have a threshold of 100%. Anything less will require immediate evaluation and action.

E. Documentation

Documentation of all tests, drills, problems, and reviews will be formulated as necessary.

F. Reappraisals

Reappraisals will be conducted at least annually (and more often if needed) by the Environment of Care Committee.

Life Safety Addendum

Interim Life Safety Measures (ILSM)

1. Interim Life Safety Measures (ILSM) are a series of 14 administrative actions required to be taken if identified hazards in accordance with The Life Safety code (NFPA 101) are observed or expected creating deficiencies.
2. Implementation of ILSM is required in or adjacent to all construction areas and throughout building where existing Life Safety Code (LSC) deficiencies occur or are planned to occur. ILSM apply to all personnel including construction workers. The measure must be assessed upon project development and initiation, and continually enforced through project completion.
3. ILSM are intended to provide a level of Life Safety comparable to that described in all pertinent chapters of the latest Life Safety Code. Each ILSM action will be documented.

Except as stated below, frequencies for inspection, testing, training, and monitoring must be established by us depending on the scope of the deficiencies.

ILSM consists of the following actions:

1. Ensuring exits provide free and unobstructed path. Personnel shall receive training if alternative exits must be designated.
2. Ensuring free and unobstructed access to emergency services.
3. Ensuring fire alarm, detection and suppression systems are not impaired. A temporary, but equivalent system (Portable Fire Extinguisher) shall be provided when any fire system is impaired. Temporary systems must be inspected and tested monthly.
4. Ensuring temporary construction walls if installed are smoke tight and built of non-combustible material if required based on scope of work.
5. Providing additional fire-fighting equipment and training for users.
6. Prohibiting smoking on all BHS property.
7. Developing and enforcing storage, housekeeping, and debris removal that reduce the flammable and combustible fire load to the lowest possible level necessary for daily operations.
8. Increasing hazard surveillance of buildings, grounds and equipment with special attention to construction areas, and construction storage and field offices.
9. Training personnel when structural or compartment features of Fire Safety are compromised.
10. Conducting safety education programs to ensure awareness of LSC deficiencies, construction hazards and these ILSM.

Radiation Safety – Right to Know

What Is Radiation?

Radiation is a general term used to describe a bundle of energy in the form of electromagnetic waves, it comes in many different “colors” (energies), some of which we can see with our eyes, many of which we cannot. All the different types of radiation carry energy.

How Do I Protect Myself from Ionizing Radiation?

- Follow the ALARA (keep the radiation exposure “as low as reasonably achievable”) principle.
- Pay attention to radiation warning signs.
- Do not enter areas controlled for radiation protection purposes without first checking with a supervisor.
- Be aware of any potential radiation sources.
- Use **Distance**, **Time**, and **Shielding** to reduce your exposure.
 - **Distance** is the best way to reduce your exposure to radiation, since it falls off very rapidly with even a small increase in distance from the source. For example, at 6 feet from the source you receive only 3% of the radiation you receive at 1 foot from the source.
 - Minimize the **Time** you spend exposed to radiation. Exposure is proportional to the time of exposure.
 - If possible, use **Shielding** (aprons, walls, etc.) to minimize exposure.
- Do not eat, drink, smoke, or apply cosmetics in any radiation area. This will reduce the possibility of accidental ingestion, inhalation, or application of radioactive materials.

How Do I Recognize Radiation Areas?

The Standard Radiation Symbol is illustrated at right. This symbol and accompanying text is printed in the colors magenta, purple, or black on a yellow background. The Symbol may be combined with the words:

Caution, Radioactive Materials

Caution, Radiation Area

Caution, Airborne Radiation Area

Danger, High Radiation Area

Grave Danger, Very High Radiation Area

These signs identify restricted, controlled areas. These are areas whose access is controlled for radiation protection purposes. **The following are examples of signs to identify restricted and/or controlled areas:**



BHS Corporate Compliance: A Team Approach

The following information was used with the permission from Cromwell Communications:

Healthcare has become a complex, billion-dollar industry. A high percentage of healthcare costs are being paid for by government sponsored programs such as Medicare and Medicaid. There are many federal and state laws governing healthcare and the reimbursement of that care. These laws are numerous, complex and frequently change. As the healthcare industry continues to grow, so does the potential for unintentional and intentional violations of state and federal laws.

In 1996, the federal government estimated there was 23 billion dollars' worth of fraudulent claims. Congress, the Department of Justice, the Department of Health and Human Services, as well as the American public are concerned about potential abuse and fraud. In response to this growing concern, the Office of the Inspector General of the Department of Health and Human Services issued Compliance Program Guidance for Hospitals. These guidelines clearly outline a way for healthcare facilities to "develop effective internal controls that promote (compliance with) applicable federal and state law, and the program requirements of federal, state and private health (insurance) plans.

The Inspector General's guidelines are intended to assist healthcare facilities operate their business efficiently, effectively, and in compliance with all applicable laws and regulations. Implementing a corporate compliance program is a proactive way to prevent violations of the law. It makes good business sense in that it helps a hospital fulfill its fundamental care-giving mission. More importantly, corporate compliance demonstrates an institution's commitment to uphold high ethical and legal standards for the benefit of its patients and the community.

The Inspector General's Compliance Program Guidance outlines seven essential elements of an effective corporate compliance plan:

- 1. Written Standards of Conduct:**
- 2. Designation of a Chief Compliance Officer:**
- 3. Employee Education and Training:**
- 4. Internal Methods of Reporting Noncompliance:**
- 5. Internal Auditing to Monitor Noncompliance:**
- 6. Responding to Reports of Noncompliance and 7. Investigation and Correction of Identified Problems:**

Organizing these elements in a structured corporate compliance program is the first step in assuring consistent compliance with laws relating to healthcare business activities. Each employee will be informed about the laws that affect their specific job activities. However, there are some high priority compliance concerns that affect many departments within a facility:

Back Safety / Body Mechanics

Back injuries are still the number one workplace safety hazard, according to OSHA. Back injuries are not confined to those who perform physical labor; low back pain is reported with almost equal frequency among people with sedentary occupations. This section of your safety manual will discuss proper body mechanics and lifting techniques, correct posture, and flexibility exercises.

Posture:

Maintain your body's three natural curves. Your ear, shoulder and hips should line up straight. When sitting, don't bend your neck or slouch over your work. Keep your feet on the floor and use chair or rolls that support the curves in your back and neck. **Take frequent breaks from sitting.** When standing, rest one foot on a stool from time to time. Bend from your knees and wear shoes that are kind to your back. When sleeping, use a firm mattress that conforms to the shape of your body. Sleep on your back, not on your stomach, and use pillows or rolls for support under your neck, lower back, and knees. (It is appropriate to sleep on your side.)

Any time you have to remain in one position for an extended period, take frequent breaks, change positions, and do flexibility exercises.

Lifting:

These nine principles of lifting and moving should be applied to every situation you encounter:

1. Get a firm footing
2. Bend at your hips and knees
3. Tighten your stomach muscles
4. Lift with your legs
5. Keep the load close to you
6. Keep your back upright
7. Avoid twisting at the spine
8. Use a stool to reach anything above shoulder height
9. PUSH heavy objects, do not pull

Get help when needed for objects that are too big or awkward in shape.

Flexibility Exercises

Spinal Molding: Spinal molding is a relaxing way to start and end your day, as it reshapes your spine into its natural curves. Simply lie on the floor or firm mattress with rolled up towels under your neck and lower back. Lie in this position for 10-15 minutes.

Extension And Flexion: Particularly helpful when you feel your neck and back stiffen. While seated, place your hands on your knees and push down. Slowly arch your back and bend your neck backward. Then slowly slump forward. Repeat this exercise ten times.

Side Bend: These increase your side-to-side flexibility. Lift your arms over your head; lace your fingers together and point your elbows outward. Bend at the waist, tilting your body to one side as far as you can. Then bend your head and neck in the same direction. Repeat on your other side. Repeat this exercise ten times.

Sit And Twist: To increase the flexibility of your entire spine, lace your fingers together and point your elbows outward. Slowly twist at the waist, rotating your head and neck to the same side. Repeat toward the other side. Repeat this exercise ten times.

Disruptive and Violent Behavior in the Workplace

What is disruptive behavior?

Bullying: habitually experiencing intimidation by another employee, medical staff member or volunteer that can be described as overbearing, inappropriately badgering or intimidating.

Disruptive: conduct that disrupts the operation of the organization. i.e. verbal outbursts or physical confrontation; refusal to participate or accept assignments; uncooperative attitude; condescending language or voice intonations; criticism that intimidates. Undermines confidence, belittles, or implies stupidity; behavior inconsistent with the Mission, Vision, and Values.

Three Types of Violence:

1. **Assault:** to put in fear of being physically struck, either by a menacing gesture or sudden movement, alone, or accompanied by a verbal threat.
2. **Battery:** actual physical contact from another (whether or not a physical injury occurred)
3. **Threats:** verbal and non-verbal.

Addressing Disruptive Behavior

- Discuss the behavior with the individual as a proactive way to address ongoing conflict
- Move forward with improved collaboration and communication
- Bring the interaction to the director/designee's attention even if satisfied with the outcome
- If there is not a positive outcome, or you do not feel comfortable addressing, you should report the incident as soon as possible to the director/designee or to Human Resources

Zero Tolerance:

- There will be no tolerance for violence, threats, harassment, intimidating behavior or bullying
- Violations will lead to disciplinary action and possibly discharge as outlined in Corrective Action Policy BHSP104, BHSP205 Violence Threats and Disruptive Behavior in the Workplace

Tools and Techniques to Keep You Safe:

- Closed circuit video cameras
- Security patrol in risk areas
- Security escorts for evening and night shifts
- Buddy system encouraged
- Picture ID badges required at all times
- Curved mirrors at hallway intersections
- Locks on all unused doors is advised
- Security systems to enter facility
- Employees are encouraged to be aware of their surroundings at all times
- Employee education and training specific to violence in the workplace

10 Steps To Diffuse Violence:

- Make eye contact
- Stop what you are doing and give your full attention
- Create a relaxed atmosphere, speak calmly
- Build trust and strengthen the relationship
- Be open and honest
- Let the person have his/her say
- Listen attentively
- Ask for specific examples
- Carefully define the problem
- Explore the issue with open ended questions

Sexual Harassment in the Workplace

What is sexual harassment in the workplace?

Sexual Harassment is not only a violation of BHS policy but it also violates the law. It is an unwelcome conduct of a sexual nature that is a term or condition of employment.

There are two types of sexual harassment in the workplace:

- “quid pro quo” harassment
- “hostile work environment” harassment

“quid pro quo” as defined by Mass General Laws is:

“Sexual harassment for sexual favors, and other verbal or physical conduct of a sexual nature when submission to or rejection of such advances, requests, or conduct is made either explicitly or implicitly a term or condition of employment or as a basis for employment decisions”

Example of “quid pro quo”

An employee was moved to a less desirable job in a department after a complaint was made about the leader’s inappropriate and unwelcome sexual comments

Hostile work environment as defined the Equal Employment Opportunity Commission:

“Sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when such advances, requests, or conduct have the purpose or effect of unreasonably interfering with an individual’s work performance by creating an intimidating, hostile, or sexually offensive work environment”

Example of a hostile work environment

Every day when an employee comes into work she/he is exposed to ongoing jokes of a sexual nature. The employee is uncomfortable with this, and the jokes are not welcome. The employee makes a complaint and it appears that there is no change in the atmosphere, in fact it gets worse.

It is against the law to:

- **Engage in sexual harassment in the workplace**
- **To retaliate against employees who file a complaint of sexual harassment**

Steps to take if you feel you have been sexually harassed:

- If you feel comfortable doing so, tell the person to stop
- If it continues, report it

Report the incident to one of the following:

- **Your supervisor**
- **Human Resources**
- **Senior Manager**

All complaints of sexual harassment should be investigated in conjunction with Human Resources. Complaints must be handled confidentially, fairly, and in a timely fashion.

American Disabilities Act (ADA)

Berkshire Health Systems follows the guidelines set forth by the American Disabilities Act and will not discriminate against an employee, prospective employee or patient based on disabilities.

BHS also will make reasonable accommodation including but not limited to assistive devices and/or alternate means of communication to employees, prospective employees or patients who require such devices and accommodations to perform their job duties or to take advantage of any service offered at BHS.

Reasonable accommodation may be requested by contacting the ADA Coordinator: the Vice President of Human Resources.

With respect to employment, an individual must be capable of performing the essential functions of the position with or without accommodation. Where accommodation is needed, a determination of what may be reasonable, or what is not will be made after a thorough review by the ADA Coordinator in conjunction with other interested parties.

Any employee, prospective employee, or patient who feels they have been denied reasonable accommodation should bring their concerns to the attention of the Berkshire Health Systems ADA Coordinator.

The complaint should be submitted in writing and should include:

- name of the person filing the complaint
- description of the alleged discriminatory incident or action
- place and date of occurrence
- name of individual involved

The ADA Coordinator for Berkshire Health Systems is:

Arthur Milano

Vice President of Human Resources

amilano@bhs1.org

(413) 447-2784

725 North Street •Pittsfield, MA 01201

Appendix A

Patient Population Considerations

We provide services to all age groups and recognize the need for all staff to promote health and meet the needs of individuals according to who they are as an individual. As we continue to build a multi-disciplinary patient care service, an increased awareness of the individual's age-specific needs will assist in meeting the outcome goals of patients and their families. significant others. Our patients and their families will benefit by staff better responding to their needs by utilizing the most appropriate tools, resources, and information that are available to us in the era of new technology and research.

When considering the multifaceted needs and characteristics of each age group, it is especially important to consider aspects of safety and communication. The age-specific populations that are served by BHS will benefit from your ability to interact, communicate, support patient relationships with significant others and maintain the safety of the patient.

Neonatal 0-6 months	
SAFETY CONCERNS	COMMUNICATION
<ul style="list-style-type: none"> ● Keep side rails up. ● Provide age appropriate toys ● Do not leave small or sharp objects within reach. ● Transport in size-appropriate means (bassinet, crib). ● Discuss use of car seat with caregiver when traveling. 	<ul style="list-style-type: none"> ● Introduce yourself and explain procedures to parent or responsible person. ● Attend to needs promptly to develop a sense of trust. ● Allow favorite toy or item of security during stressful periods. ● Allow familiar parent or responsible person to be present to calm the infant. ● Allow freedom of expression (crying) to reduce tension. ● Identify infant's established daily routine and try to follow. ● Providing emotional support for parents or responsible persons will help them give support to the infant. ● Provide cuddling and support to enhance a sense of trust.

Infant 6 months to 1 year	
SAFETY CONCERNS	COMMUNICATION
<ul style="list-style-type: none"> ● Infant has stranger anxiety: do not separate from caregiver unless necessary. <ul style="list-style-type: none"> ● Transport in size appropriate means. <ul style="list-style-type: none"> ● Keep side rails up. ● Provide age appropriate toys ● Avoid leaving small objects within reach to prevent choking. ● Discuss use of car seat with caregiver when traveling. 	<ul style="list-style-type: none"> ● Introduce yourself and explain procedures to caregiver. <ul style="list-style-type: none"> ● Talk slowly and calmly to infant. ● Try to initiate eye contact. ● Allow favorite toy or item of security during stressful periods. Allow familiar caregivers to be present. <ul style="list-style-type: none"> ● Allow freedom of expression (crying) to reduce tension. ● Identify infant's established daily routine and try to follow. ● Providing emotional support for parents or responsible persons will help them give support to the infant.

Toddler 1-3 years	
SAFETY CONCERNS	COMMUNICATION
<ul style="list-style-type: none"> ● Can tolerate short separation from parent. ● Do not leave unsupervised, especially during bath time. ● Provide age appropriate toys. ● Do not leave small or sharp objects within reach. ● Avoid foods that can cause choking. ● Do not leave poisonous supplies within reach. ● Transport in size-appropriate device (wagon, crib). ● Discuss use of car seat with parents or responsible persons when traveling. ● Fit the environment to the child's needs and abilities. ● "Child proof" environment. Provide safe toys. ● Assure safety of child during temper tantrums. 	<ul style="list-style-type: none"> ● Introduce yourself. ● Self-centered thinking. Can understand simple commands & may choose to cooperate. ● Do not rush child. Needs time to think about what has been asked. ● Allow to touch equipment. ● Ask parents or responsible persons to explain directions in familiar terms. ● Trial and error method of learning. Experiments to see what happens. ● Says at least three words. Uses expressive "jargon". ● Temper tantrums may begin. ● Give advance notice of a change in activity such as lunch or nap time. ● Use simple games as transition from one activity to another. ● Make positive suggestions rather than giving commands. ● Give two safe and acceptable choices when possible. ● Allow "no" in play situations. ● Set and enforce consistent limits. ● Praise toddler's skills and abilities.
Pre-school 3-6 years	
SAFETY CONCERNS	COMMUNICATION
<ul style="list-style-type: none"> ● Can tolerate some separation from parents or responsible persons. ● Transport in size appropriate means. ● Keep side rails up. ● Provide age appropriate toys. ● Avoid leaving small or sharp objects within reach. ● Supervise play areas. ● Provide safety instructions for scissors, poisons, crossing streets, bicycle helmets. ● Discuss use of car seat with parents or responsible persons when traveling. ● Provide safe space for child to run, jump and climb. ● Encourage consistency in setting limits. ● Give two safe and acceptable choices when possible. 	<ul style="list-style-type: none"> ● Introduce yourself ● Talk in simple language. Let child touch and explore equipment. ● Use familiar characters in communication and explanations. (Disney, Barney, Sesame Street.) ● May use Teddy Bear or doll to simulate procedures. ● Include parents or responsible persons in care. ● Encourage consistency in setting limits. ● Expect resistance to authority. ● Answer questions promptly. ● Praise child's story telling. ● Play games that are language focused (naming of colors, kinds of flowers). ● May have fear of strangers.

School-Age 6-12 years	
SAFETY CONCERNS	COMMUNICATION
<ul style="list-style-type: none"> ● Do not leave items unattended (medication, cleaning supplies, various equipment). ● Provide age appropriate activities. ● Transport in wheelchair or cart with side rails. ● Side rails up as indicated. ● Discuss use of seat belt with child and parents or responsible persons when traveling. ● Discuss use of helmet for bicycle, skiing, skateboarding, in-line skates. ● Discuss not leaving firearms unattended at home. ● Teach about drugs, alcohol and tobacco use. ● Teach about strangers and sexual abuse. 	<ul style="list-style-type: none"> ● Introduce yourself. ● Talk to child directly. Allow time for questions. ● Allow to touch equipment. ● Allow involvement in decision-making. ● Focus on learning new skills. ● Provide encouragement to build self-esteem and help to focus on areas of success. Give positive feedback. ● Provide child with realistic options that provide a sense of accomplishment. ● Structure the environment to provide child with a sense of control.

Adolescent 12-18 years	
SAFETY CONCERNS	COMMUNICATION
<ul style="list-style-type: none"> ● Starting to be independent. ● Recognizes danger. ● Able to accept limits. ● Transport as an adult. ● Side rails up as indicated. ● Discuss use of seat belt when traveling. ● Discuss use of helmet for bicycle, skiing, skateboarding, in-line skates. ● Discuss not leaving firearms unattended in home environment with parent and youth. ● Teach about drugs, alcohol and tobacco use. ● Teach about strangers. ● Teach about sexually transmitted diseases, pregnancy. 	<ul style="list-style-type: none"> ● Introduce yourself. Talk to youth directly ● Use adult vocabulary. Do not "talk down" to youth. ● Allow involvement in decision-making. ● Allow time for questions. ● Able to think in abstract. Can analyze and utilize scientific reasoning. ● Set clear limits to keep channels of communication open. ● Offer realistic choices/options. ● Allow responsibility for self-care. ● Allow friends to accompany patient. ● Discuss consequences of "risk-taking" behavior (drugs, alcohol, sex). ● Assist in maintaining as much control as possible. ● Provide support for fearful situations. ● Use correct anatomic terms and descriptions for tests. ● Provide age appropriate activities. ● Avoid stereotyping because of dress or behavior. ● Answer questions fully and honestly. Listen to concerns. ● Ask direct questions, even about sensitive topics.
ADULT 19 years of age and over	
SAFETY CONCERNS	COMMUNICATION
<ul style="list-style-type: none"> ● Condition may put patient at risk for fall. Use fall precautions as indicated. ● Side rails up as indicated. ● Discuss use of seat belt with patient when traveling. ● Discuss use of helmet for bicycle, skiing, skating. ● Discuss healthy life-style. Avoid use of alcohol, drugs; encourage safe sex. ● Avoid highly waxed floors, poor lighting, high beds, and bath tubs without non-slip bottoms. ● Keep equipment, chairs, etc., out of walkways. ● Use caution with water temperature, food and fluids especially with the elderly ● If confused, use alarm on patient ● Frequent monitoring. ● Instruct to utilize handrails and other safety devices especially with patients identified as a fall risk. ● Provide adequate lighting for all activities, including reading and writing; night light as indicated. 	<ul style="list-style-type: none"> ● Introduce yourself ● Ask patient how they wish to be addressed, (first name, Mr., Mrs.). ● Explain procedures to patient. ● Allow time for questions. ● Be respectful. ● May have hearing or vision difficulties. Speak slowly and directly to patient. ● Listen to concerns regarding how hospitalization impacts family, social life and career. ● May need hearing aid or glasses. Ensure use of both. ● Give step by step instructions to patient regarding procedures, care or testing. ● Encourage patient to verbalize fears and concerns regarding health status.

At FVH, the Age Specific Knowledge (ASK) manual is located in every department.

Appendix B

BHSP 101 Confidentiality

POLICY SUMMARY

Confidentiality in any health care setting is of the utmost importance. Our patients and staff need to be assured that everything possible is done to protect information that is confidential or sensitive. Employees will have access to information at the Health System on a "need to know" basis only. Berkshire Health Systems considers a breach of confidentiality to be a very serious event which places the mission of the institution at risk.

Information protected under this policy includes, but is not limited to, patient health information including test result data and, employee health records, as well as personnel records, salary data, computerized information and general information about patients or staff. Please refer to Health Insurance Portability and Accountability act of 1996 (HIPAA) Corporate Policies for more information regarding confidentiality of patient health information (PHI).

PURPOSE

To establish uniform understanding of the importance surrounding confidential information whether it be patient, business or employee related.

APPLICABILITY

All current and former Berkshire Health Systems employees, contract and agency personnel, medical staff and volunteers.

PROCEDURES

A. All employees, at the time of their initial orientation, must sign a "Statement of Confidentiality", (See attachment) showing that they understand and agree with this organizational commitment to respect the confidentiality of information.

B. Those associated with BHS shall not seek, use nor disseminate information for which they do not have a need or right to know to perform their direct responsibilities.

Those who have access to patient and business information must protect and utilize this information with the greatest level of care. Failure to protect confidential information will result in disciplinary action.

Those who gain access to patient information inadvertently, either within the organization or outside it, have a responsibility to protect the confidentiality of patient and business information and to take action to stop the further dissemination of confidential information.

Those who do not need access to patient and business information but gain access willfully, and as a result, breach either the integrity of patient care or the business operations of the organization, will be disciplined up to and including termination of employment, determined by the seriousness of the breach.

C. Employee Personnel Files

This policy covers all personnel files including the BVNA unless specifically stated to the contrary. All Personnel files are maintained in the Human Resources Department with the exception of the BVNA personnel files which are located on site at the BVNA. All files will include at least the following documents:

- a. Employment application, references, I-9 verification, resume and any other documents created within or necessary to the initial employment process.
- b. Performance evaluations and appropriate attachments
- c. Corrective Action documentation from oral counselings through termination.
- d. Letters of commendation
- e. Personnel Action forms, EForms (Term Request, Final Evaluation Summary, Leave of Absence, ET/LTIB).

- f. Information necessary to administration of benefit programs
- g. Any other documents normally related to the verification of an employee's work performance including transfer request forms, disciplinary action, or specifically relating to activities or events upon which employment decisions are made, and information necessary in administration of employer-sponsored benefit programs.

The Human Resources Department will periodically review materials submitted for inclusion in the employee personnel file to determine if they are appropriate.

An employee's file may be reviewed by:

- a. Members of the Health System's managerial/ supervisory staff (as deemed appropriate by Human Resources) and those government officials and agencies that legally have a right to such access.
- b. An employee making a request to Human Resources to review the content of their own personnel file. This must be done in the presence of a member of the Human Resource staff. Employees will be entitled to a copy of the information contained within the personnel file upon written request to Human Resources, within 5 business days of the receipt of the employee's written request.
- c. Employee will receive a copy of all negative information, within 10 days, that is placed in the personnel file.

In the event that the employee finds in his/her personnel file information with which he/she is in disagreement, the employee will have an opportunity to include in the record a written statement of his/her own position on the matter. The employee's statement will be retained in the employee's personnel record for as long as the record itself is maintained, and if the disputed information is transmitted to a third party, the employee's written statement(s) will also be transmitted.

Any inappropriate modification of documents or contents of the personnel file by any unauthorized BHS staff will be considered falsification of records and will result in disciplinary action per BHS Policy 104.

BVNA Specific Considerations:

BVNA personnel files are maintained off-site at the BVNA site. These files, while off-site, fall under the authority of the Human Resource Department. While the structure of the file may be different due to differing regulatory considerations, the content of the file and access to them as stated above are the same. The Vice President of Home Health along with that position's administrative assistant, have been authorized by Human Resources to maintain the security, integrity, and access to the personnel file under the same criteria as represented above.

D. Employee Medical Records

An employee's health service record shall be held in strict confidence and as such will be stored separately from his or her personnel record. Access to these files will be limited to BHS staff and outside personnel legally entitled to review these records.

APPROVED:

Chief Executive Officer

APPROVED:

Vice President for Human Resources

EFFECTIVE: May 1, 1995

REPLACES: BMCP 101, dated August 27, 2010

REVISED: March 30, 2012

**The following statement of confidentiality
will be acknowledged by all associated with
Berkshire Health Systems.**

STATEMENT OF CONFIDENTIALITY

I have read and I understand the Berkshire Health System policy on Confidentiality.

I understand that I must protect, and if necessary intervene to assure that others protect, the confidentiality of any personal, patient care or business information at BHS. Accessing or sharing such information except in the direct performance of my job duties is a violation of trust placed in me as a healthcare professional that jeopardizes the mission and survival of our organization.

Upon separation of employment, I understand that confidential information, including but not limited to PHI, is privileged information and may not be shared with anyone. Sharing such information is a violation of HIPAA laws.

I understand that inappropriate disclosure of information through manual or automated systems or the sharing and/or unauthorized use of passwords for automated information systems is a violation of this policy.

I have received a copy of the Confidentiality Policy and I agree to uphold and promote the provisions of the policy.

Signed: _____

Print Name: _____

Date _____

Employee ID Number: _____

Outside Affiliation: _____