BEST PEOPLE ORIENTATION
2008

Mercy Hospitals of Bakersfield
- Mercy Hospital
  - Founded 1910
  - 184 Licensed Beds
  - 2213 Truxtun Avenue
- Mercy Southwestern Hospital
  - Founded 1992
  - 75 Licensed Beds
  - Old River/Stockdale Hwy

Our Strategy
Embody how we extend our mission, live out our values and realize our vision:

- GROWTH
- QUALITY
- INNOVATION
- expanded
- ACCESS
- LEADERSHIP
Mission Statement

- Our Mission
  Catholic Healthcare West and our sponsoring Congregations are committed to furthering the healing ministry of Jesus. We dedicated our resources to:
  - delivering compassionate, high quality, affordable health services;
  - serving and advocating for our sisters and brothers who are poor and disenfranchised; and
  - partnering with others in the community to improve the quality of life.

Vision Statement

- Our Vision
  Catholic Healthcare West, serving the western United States, strives to be a spiritually oriented and community focused health care system passionate about improving patient care, enhancing work life quality and collaborating with others to create a just health system.

Core Values

- Reflect the Philosophy and Mission of the sponsoring religious communities; and
- Are the beliefs that determine how we behave in certain situations

- Dignity
  - Respecting the inherent values and worth of each person
- Justice
  - Advocating for social change and acting in ways that promote respect for all persons and demonstrate compassion for our sisters and brothers who are powerless
- Collaboration
  - Working together with people who support common values and vision to achieve goals.
- Stewardship
  - Cultivating the resources entrusted to us to promote healing and wholeness
- Excellence
  - Exceeding expectations through teamwork and innovation

Quality and Customer Service

Begins With YOU & AIDET

- Acknowledge
- Introduce
- Duration
- Explanation
- Thank you

Make It An AIDET Day, Today & Every Day.
Answering Telephone Calls

AIDET Reminders

- Acknowledge the Patient, Family & Co-Workers.
- Introduce yourself to the customer.
  "Welcome to Mercy Hospitals, I am, ___________.”
- Discuss the duration of whatever you are doing for the customer.
- Explain what you are doing for the customer.
- Thank the customer. Ask if there is anything else you can do for them.

Abuse

- Abuse/neglect may be defined as follows:
  - Physical abuse: Assault, battery, unreasonable physical restraint, or prolonged or continual deprivation of food or water, sexual assault.
  - Neglect: The negligent failure of any person having the care or custody of another to exercise that degree of care which a reasonable person in a like position would exercise. Neglect includes but is not limited to all of the following:

Mandated Reporter

- Law requires mandated reporters to report suspected abuse. Law encourages mandated reporter to voluntarily report know suspected types of abuse, including neglect, mental abuse, financial, isolation and abandonment. The staff member with direct knowledge of the suspected about and/or neglect is responsible to make the report within 2 days/48 hrs.

- SOC 341 form- must be filled out, location of form: Social Services, Skilled Nursing Facility lounge, Ombudsman.
- Local Ombudsman: if victim is a resident of LTC facility.
- DHS: if victim is a resident of LTC facility
- APS notified
- Law Enforcement notification
- Refer to policy SS: 302
Social Services

Responsible for Assisting Patients, Family and Staff in Adapting to Life Changes Brought About by a Patient’s Illness, Hospitalization or Psychosocial Factors that Place a Person at Risk.

Scope of Services

- Crisis Intervention
- Supportive Counseling
- Grief / Trauma Support
- Community Information / Referrals
- Assess Abuse / Neglect or Risk Thereof
- Staff Resource for Support / Information

Mandated Service Areas

<table>
<thead>
<tr>
<th></th>
<th>NICU</th>
<th>Cancer Center</th>
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<tr>
<td>Birthing Center</td>
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<tr>
<td>Emergency Department</td>
<td>ICU</td>
<td>Skilled Nursing</td>
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<tr>
<td>Any Children in Hospital</td>
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Social Services

Should be Notified of the Following:

Children

- Any Threat or Serious Abuse
- Physical Abuse
- Neglect
- Emotional Abuse
- Sexual Abuse
- Death of a Child
- Mental Health Issues Related to Abusive or Current Well-being

- Suicidal/Overdose
- Overdose
- Drug or Alcohol Abuse
- Battery
- Assault
- Fetal Damage

Why is Patient Safety Important?

- Patients expect to receive excellent and safe care.
- It’s why we are in business. It’s the RIGHT thing to do.
- Regulatory agencies require excellent, safe care to be provided.
Patient Safety

- Why is Patient Safety Important?
  - Improve the accuracy of patient identification.
  - Improve the effectiveness of communication among caregivers.
  - Improve the safety of using high risk medications.
  - Eliminate wrong-site, wrong patient, and wrong procedure surgery.
  - Reduce the risk of health care-associated infections.
  - Accurately and completely reconcile medications across the continuum of care.
  - Reduce the risk of patient harm resulting from falls.
  - Encourage patient’s active involvement in their own care as a patient safety strategy.
  - Organization identifies safety risks inherent in its patient population.

HIPPA-CHW Employees

- Patient rights extend to employee’s friends and family members as soon as they begin receiving services from one of our facilities.
- Only access the information you need to complete your job. If you are aware of a patient that you know, you may not access information on that patient if you are not providing services to that patient.
- Do not share your password with anyone.
- Memorize your password.

Data Security Procedures

- PHI is any information that may be used to uniquely identify the patient:
  - Name, Birth Date, SSN, Medical Record #
- Examples of Sensitive Information:
  - Employee #, Home Address, Vehicle Identifiers, Religious Affiliation, CHW Financial Information
- Security Procedures & Password Management:
  - You may not use words, but should use combination of letters, numbers, and characters

Data Security Procedures

- Encrypt PHI and Sensitive Information.
- Properly Store Portable / Removable Media and Portable Devices.
- Never Save PHI or PI to Unencrypted Hard Drive or Electronic Storage Device.
- Control Distribution of Data to Only Those Individuals Authorized to Receive Data.
- All faxed PHI (to other departments within the facility and to outside facility) MUST include a CHW approved cover sheet!
- All fax numbers MUST be confirmed before sending data!!

Family & Friends

- Always confirm the identity and an authorization for unidentified individuals before allowing access into a secured area.
- Escort the individuals to ensure safeguarding PHI such as medical records and limits inappropriate access to other patients.
- When you are not present and PHI is maintained in your work station, you must always secure, lock your office, workstation and PC to ensure safeguarding of PHI and other Sensitive Information

Family & Friends

- Always follow CHW Family & Friends Policy before giving information to anyone:
  - Know if the patient has restriction on the disclosure of care information to family and/or friends.
  - If restrictions, know the CODE that the patient has designated.
  - Facility Directory:
    - Know if the patient opted-out (Doesn’t want anyone to know that they are here).
  - All patients have the right to restrict visitors
Data & Identity Theft

- Notification requirements for lost or stolen data.
- How can you greatly reduce the risk of unauthorized access in the case of identity theft?
  - Properly store or encrypt data.
- What is the procedure for properly storing or encrypting data?
  - Each facility may be slightly different. Check with your local IT Site Manager for more information.

Incident Reporting

- What is an Incident?
  - An incident consists of the use or disclosure of PHI/SI to an entity or individual not authorized to have or use that information.
- CHW is required to document, investigate and act on all reported incidents.
- Continuously protect PHI and SI. When in doubt, don't release the information; call someone (the FPO or your Manager).

Incident Reporting

- The telephone numbers for the Privacy Line and the Hotline are located on the CHW Website or with your Manager.
  - Mercy Hospitals Privacy Line: 632-5535
  - CHW Hotline: 1-800-938-0031
- It is everyone's responsibility to report suspicious behavior immediately

HARRASSMENT
An Issue of Respect

- Harassment means to trouble, worry or torment someone on a persistent basis. The important phrase here is “on a persistent basis.” Usually a one-time offense is not considered harassment in the eyes of the law.

Types of Harassment

- Verbal – Includes things said, written or inappropriate sounds.
- Physical – Includes hitting, pushing, blocking someone's way, inappropriate touching.
- Visual – Includes calendars, pictures, and any inappropriate object that can be clearly seen.
- Sexual – Promotions / assignments based on sexual favors or hostile work environment.
Types of Harassment

- Discrimination occurs when a person or group of people are treated differently from another person or group of people.
- Discriminatory harassment is harassing and/or discriminating behavior that is severe or pervasive enough to create a hostile working environment and/or results in a tangible employment action.

2006 Statistics

- Harassment Cases Reported
- Seven (7) Cases of Harassment were Reported in 2006
- Two (2) of These Cases Involved Physicians

Hospital E.O.C. / Safety Orientation

7 Environment of Care Management Plans
- 1. Safety Management Plan
- 2. Fire Safety Management Plan
- 3. Medical Equipment Management Plan
- 4. Utilities Management Plan
- 5. Disaster Preparedness Management Plan
- 7. Security Management Plan

Hospital Emergency Codes

- Code RED: Fire Emergency
- Code BLUE: Medical Emergency / Arrest
- Code GREEN: Workplace Violence Response
- Code SILVER: Weapon in the Workplace
- Code PINK: Infant / Child Abduction
- Code WHITE: Chemical Spill / Hazmat Alert
- Code TRIAGE EXTERNAL: Bomb Threat Alert
- Code TRIAGE INTERNAL: Community - Based Disaster
- Code TRIAGE INTERNAL: Structural Damage

Emergency Phone Numbers

- Mercy Hospital & Mercy Southwest Hospital
  ALL CODES DIAL 7777
- Outside of the Facilities.......................................Dial 9-1-1
Plan 1  Safety Management

- **Safety Committee**
  - Holds regular safety meetings
  - Recommends and enforces safety policies and procedures
  - Conducts safety inspections
  - Recommends and enforces corrective actions
  - Investigates accidents
  - Director of Safety / Security: Joe Lalonde

- **Safety Officers**
  - Mercy Hospital & Mercy Vincennes Hospital (Public Safety & Security)
  - Joe Lalonde
  - Mercy Hospital (Safety Officer)
  - Various departments
  - Michelle Chilton (Safety Officer)
  - Various departments

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**Reporting Safety Hazards**

- Contact your manager, supervisor, or security personnel immediately.
- Review the emergency plan.
- Get a detailed description of the hazardous situation and notify your manager, supervisor, or security personnel.
- If there is an immediate threat to life or health, immediately evacuate all personnel involved or affected, and immediately call 911.

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Plan 2  Fire Safety Management

**Fire Safety**

- **Code RED**
- **R.A.C.E.**
- **P.A.S.S.**
- Fire Extinguishers
- Drills
- Evacuation Plans
- Fire Alarms

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**Code RED Actions**

- **Learn to RACE in an Emergency**

  - **Rescue**
    - Get everyone away from immediate danger.
  - **Alarm**
    - Pull fire alarm station and call PBX with notification.
  - **Confine**
    - Close doors and windows to help keep fire and smoke from spreading.
  - **Extinguish / Evacuate**
    - Use fire extinguisher to extinguish fire and evacuate, if fire is out of control.

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**The Fire Extinguisher**

- **The Fire Extinguisher**

  - **Pull**
    - Pull the pin.
  - **Aim**
    - Aim the nozzle at the base of the fire.
  - **Squeeze**
    - Squeeze the operating handle to release the extinguishing agent.
  - **Sweep**
    - Sweep from side to side at the base of the fire until the fire goes out.

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**General Evacuation Rules**

- Sr. Management or Designee On Call will make the decision for a full evacuation. Remember these rules:
  - Know the locations of the nearest fire doors.
  - The levels of evacuation are:
    - First level to Relocate patients horizontally (other side of nearest fire door);
    - Second level to Relocate vertically; and
    - Third level to relocate to an out of building location as determined by the Incident Command Center process.
  - Account for all patients and visitors.
  - Never leave a group of patients unattended.
  - Bring patient records with you.
  - Direct firefighters to the fire and to any patients remaining in the unit.

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**Smoking Policy**

- This facility endeavors to promote health and wellness among patients, visitors and staff; therefore has developed a policy of a non-smoking facility.
Plan 3
Utilities Management
- The Utility Systems Management Program addresses processes that provide for emergency procedures to be activated in the event of utility system failure including:
  - Specific procedures in the event of utility systems malfunction;
  - Identification of an alternative source of essential utilities;
  - Shut-off malfunctioning systems and notification of staff in affected areas;
  - Obtaining repair services; and
  - How and when to perform emergency clinical interventions when utility systems fail.

Plan 4
Medical Equipment Management
- Reporting medical device events involves everyone. Immediately report the event to your supervisor who shall contact the appropriate person(s) or department.
- Any equipment that an employee feels is unsafe shall be taken out of service immediately with a written tag to indicate the problem.
- Equipment has been place on a preventative maintenance program. PM Tags are found on medical equipment which identifies date and by when equipment is due for maintenance.

Plan 5
Disaster Preparedness Management
- The Hospital Incident Command System (HICS) can be found in your departmental Red Safety Folder.
- Each employee should know the location of his or her hospital H. I. C. S. storage center. Each center is set up to provide the necessary supplies to implement the system.
- Code Titan Internal and Code Titan External will be used to alert staff to a disaster situation.
- Each CMH facility conducts two disaster drills per year and every employee will participate when called upon.

Incident Command Locations
- Mercy Hospital
- Clerou Lecture Center
- Mercy Southwest Hospital
- Doctors Lounge in Cafeteria

Plan 6
Hazardous Waste & Materials Management
- Learn to recycle!
- Proper bags for proper use. RED, WHITE, BLUE, and CLEAR.
- Proposition 65 - Safe Drinking Water & Toxic Enforcement Act. The list of chemicals that substances known to cause cancer or reproductive harm.
- Chemical Safety - Your Right to Know Chemicals In the Workplace.
- Asbestos notification requirements when asbestos is present.
- How Do I Report a Chemical Spill / Hazmat - Code
- MSDS on Demand Program.
- NFPA / MMSIS Labels (next slide).

NFPA Label
The National Fire Protection Association (NFPA) 704 labeling system is sometimes used for secondary containers.

MSDA On Demand
Hazardous Material Spill Actions
1. Call PBX Operator.
2. Clear Area Where Spill is Located.
3. Locate Material Safety Data Sheet / MSDS on Demand.

CALL IMMEDIATELY!
(800) 451-8346
**Plan 7 Security Management**

- Public Safety
  - Provide protection to staff, patients and visitors of Crisis Services.
  - Ensure workplace safety.
  - Oversee Workplace Violence Training.
  - Offer employee and visitor escort services.
  - Handle Lost and Found items.
- Investigate security and safety issues.
- Respond to Emergency Calls.

- Minimize Violence in the Workplace
  - Learn and use security procedures.
  - Take advantage training offered.
  - Violence in the Workplace.
  - Take quick action and stay calm when dealing with a violent or volatile situation.
- Make sure all emergency exits are properly marked.
- Make sure all security personnel are aware of the conditions in the workplace.
- Minimize thefts
  - Immediately report any suspicious activity.
  - Secure your personal belongings out of sight (includes your vehicle).

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**Safe Oxygen Handling and Storage**

- Oxygen tanks should be stored in a rack or cart in an upright position. If no rack or cart is available, the oxygen tanks may be secured to the wall in an upright position by a chain or strap.
- Oxygen tanks should never be stored lying down.
- If a tank is stored with the regulator and flow meter attached, make sure both the regulator and flow meter are turned OFF.
- **OXYGEN TANK MUST BE STORED WITH THE VALVE CLOSED**

- Tanks should be stored in such a way as to prevent falls. A falling 30 lb. tank can cause injury. If the valve of an oxygen tank breaks due to a fall, the oxygen tank can become a 30 lb. missile which can cause grave danger to people, and loss of, and/or expensive repairs to equipment and the structure.

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**Hospital Infection Control Education**

**Stephanie Eyherabide, RN**

**Infection Control Coordinator**

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**Standard (Universal) Precautions**

- Consider all patients potentially infectious.
- Use appropriate barrier precautions at all times.

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**Hand Washing**

- The most important measure you can use to prevent the spread of infection.
Many Personnel Don’t Realize When They Have Germs on Their Hands

- Nurses, doctors and other healthcare workers can get 100's or 1000's of bacteria on their hands by doing simple tasks, like:
  - pulling patients up in bed;
  - taking a blood pressure or pulse;
  - touching a patient’s hand;
  - rolling patients over in bed;
  - touching the patient’s gown or bed sheets; and
  - touching equipment like bedside rails, IV pumps.

Are Alcohol – Based Handrubs Really Effective?

- More than 20 published studies have shown that alcohol-based handrubs are more effective than either plain soap or antibacterial soaps in reducing the number of live bacteria on the hands.
  - But wash hands if soiled with blood, secretions or dirt.

Wear Gloves

- When touching blood, body fluids, mucous membranes or non-intact skin of all patients.
- When handling items or touching surfaces contaminated with blood or body fluids.
- Wash hands after removing gloves.
- Change gloves between patient

Wear Masks & Protective Eye Wear

- During procedures that are likely to cause splashes of blood or other body fluids (to protect the mucous membranes of the eyes, nose, and mouth).

Wear Gowns

- During procedures that are likely to generate splashes of blood or other body fluids.

Isolation Precautions

- Additional isolation measures are necessary to prevent transmission of:
  - Antibiotic-resistant bacteria.
  - Highly-contagious microorganisms.
Isolation Precautions

- **Strict Contact Isolation**
  - MRSA, VRE, C. Difficile

- **Droplet Precautions**
  - Pertussis, Meningococcal Pneumonia / Meningitis

- **Airborne Precautions**
  - TB, Measles, Chickenpox

Bloodborne Pathogens

Healthcare workers have an occupational risk of exposure to Bloodborne Pathogens:
- HIV, Hepatitis B, Hepatitis C

Safe Handling of Needles & Sharps

- Use appropriate sharps containers.
- Discard used sharps immediately.
- Avoid recapping needles.

Blood / Body Fluid Exposures

- Apply First Aid.
- Report exposures immediately.
- Fill out incident report.
- Contact Employee Health.
  
  When Employee Health is closed contact Clinical Coordinator.

Medical Waste Disposal

- Place medical waste in red biohazard bags for disposal.
- Items which have liquid blood contamination must be placed in red bags.

Individual Employee Health

- Practice good personal hygiene.
- Keep current on immunizations.
- At least annual PPD screening.
- Report exposures to communicable diseases.
- Work restrictions for some infections.
- Other
CHW Integrity Program

What is the purpose of the Integrity Program?
- Reinforces commitment to being a values-based organization
- Demonstrates commitment to ethical conduct
- Provides us with guidelines
- Assists in identifying strengths and weaknesses in our systems
- Provides a structure through which CHW can identify and correct problems
- Decreases our risk of violations

7 Elements of CHW's Corporate Integrity Program
- Standards of Conduct and Policies / Procedures
- CHW Compliance Function / Management Accountability
- Education Opportunities for Employees and Affiliated Physicians

7 Elements of CHW's Corporate Integrity Program
- Auditing and Monitoring Processes
- Reporting Systems
- Corrective Action
- Exclusion Screening Process for Employees, Affiliated Physicians, and Vendors

Standards of Conduct
- The Standards of Conduct are the Foundation of the Integrity Program
- CHW requires all Employees and affiliated Physicians to follow the Standards of Conduct

Standards of Conduct
- Ethical Conduct
  - CHW is committed to the highest Standards of Business Ethics and Integrity
    - Honest Communication
    - Misappropriation of Proprietary Information
    - Confidential Information
    - Conflict of Interest
    - Gifts, Gratuities, Entertainment and Honoraria
    - Respect and Integrity
Standards of Conduct

- Laws and Regulations
  - All CHW Facilities and Entities will:
    - Maintain honest and accurate records concerning the provision of health care services
    - Submit accurate claims
    - Never offer, pay, solicit, or receive any money, gifts or services in return for the referral of patients or to induce the purchase of items or services
    - Document services provided accurately and completely

Reporting Systems

- Manager / Supervisor
- Human Resources
- Facility Compliance Liaison
- Compliance Hotline – (800) 938-0031

Reporting Systems

- Reviewed and investigated promptly
- Correct action, if necessary
- Anonymous reporting
- CHW will NOT permit retaliation against any employee who in good faith reports his or her concerns

CULTURAL DIVERSITY

Generational Flavors in Workplace

Right now is an exciting time. We have four (4) generational flavors in the workplace:

- Traditional Generation
  - Born before 1946
  - Raised in the Great Depression
- Baby Boomer
  - 1946 – 1964
  - Raised during Vietnam
  - Watched Ozark & Harriet
- Generation X
  - 1965 – 1976
  - Raised in single parent homes
  - Watching Murder She Wrote
  - Watching Ozark & Harriet
- New Millennium
  - After 1976
  - Raised on the internet
  - Living in Deathpark

Different Generations

- Each generation brings to the table their own set of expectations and hopes. With each generation, there is an opportunity to learn new perspectives and get fresh ideas. With each generation, there is an opportunity to grow frustrated, upset, angry and have a disaster on your hands.

Know Your Own Cultural Beliefs and Practices.

Think about how your culture and upbringing affect you. For example, you may have certain ideas about:
- How to show politeness when talking with someone.
- Acceptable ways to express pain.
- How often to seek medical care.
- Appropriate ways to treat children or older people.
Take Time to Learn About Your Patients.

- Ask questions to avoid cultural stereotypes. It's important to have general knowledge about a culture. But it's also important to assess each individual patient because:
  - Difference exist among members of the same cultural group.
  - Cultures change over time.
  - Climate, war, etc., in another country may have affected an immigrant's health.

Take the Time to Consider and Learn.

- How a patient prefers to be addressed.
- Understand relationships.
- Consider privacy needs.
- Learn the patient's views about health.

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

Consider Other Factors That May Affect Care.

- Age - An older patient may assume certain problems are a normal part of aging and not mention them.
- Gender - A patient may prefer to receive care from someone of the same sex.
- Sexual Orientation - Asking questions that avoid assuming sexual orientation can help put him or her at ease.
- Socio - Economic Status - Financial hardship may keep a patient from seeking or following treatment.
- Presence of a Physical or Mental Disability - How disability a certain condition is.

INTERPRETER SERVICES
Interpreter Needed

Hearing Impaired Sign - Language

- Services are provided by LIFESIGNS, Incorporated, Interpreters. LIFESIGNS which provide services, Monday - Friday: 8:00am to 5:00pm (661) 327-3783 or after-hours (800) 633-8883.

Telephone Interpretation Access Instructions

- From Any Telephone Dial:
  > 1 - 800 - 481 - 3293
- At the Prompt, Enter Your 9 - Digit Account Number:
  > 501013278 (MH) / 501012992 (MSH)
- At the Prompt, Enter Your 4 - Digit Pin No.:
  > 5000 (MH) / 6000 (MSH)
  > When the System Accepts Your Account and Pin Number, It Will Say:
  > Press 1 to Select the Language By Its Language Code
Violence Awareness Education

- The purpose of this training is to increase employee awareness of the risk factors for violence in hospitals and to provide strategies for reducing exposure to these factors.

- California Assembly Bill No. 508: Requires that hospital employees regularly assigned to the ED and other high risk areas receive this training.

Introduction

- Today more than 6 million U.S. hospital workers from many occupations perform a wide variety of duties and who exposed to many safety and health hazards, including violence.
- Recent data indicate that hospital workers are at high risk for experiencing violence in the workplace.

The American crime clock ticks off one (1) murder every 23.8 minutes, one (1) assault every 83 seconds, one (1) burglary every 13 seconds, and one (1) sexual assault every 6 seconds.

Goals

- Know General Safety Measures
- Know Personal Safety Measures
- Understand the Crisis Cycle
- Four (4) Levels of Aggressive and Violent Behavior
- How to Obtain Patient History From Patient with Violent Behavior
- Characteristics of Aggressive and Violent Patients and Victims
- Strategies to Avoid Physical Harm
- Restraining Techniques Via Audio Demonstration
- Resources Available to Employees for Coping with Incident of Violence

Healthcare Violence Statistics

- The Department of Justice (DOJ) National Crime Victim Survey:
  - All Occupations 12.6 per 1,000
  - Physicians 16.2 per 1,000
  - Nurses 21.0 per 1,000
  - Mental Health Professionals 68.2 per 1,000
  - Mental Health Custody 69 per 1,000

NOTE: Under-Reporting Believed to Be High!

- Myth #1 "It Can't Happen Here!"
- Myth #2 "It Can't Be Prevented!"
Prevention Strategies for Employees

- Although risk factors for violence are specific for each hospital and its work scenarios, employees can follow general prevention strategies.
  - Treat Everyone with Respect
  - Use Warning Devices
  - Be Alert at All Times and REPORT Anything Unusual
  - Tone of Voice
  - Body Language
  - Be Sensitive to the Situation
  - Practice Chemistry
  - Be Willing to Compromise to Reach a Win / Win Situation

Domestic Issues

- Domestic violence is a fact of life in the workplace.
- Only 1 in 6 assaults are committed by strangers.
- 17% of homicides at work are committed by current/former husbands/boyfriends.
- 70% of women killed were employed.
- 96% reported work problems:
  - Missing work, stalking, incessant phone calls.
  - 50% lost salary and advancement opportunities.

Know the Crisis Cycle

- Activation - Triggering Event.
- Escalation - Find Out What's Upsetting the Person.
- Crisis - Person Acts Out.
- De-Escalation - Person Gets What They Need.
- Recovery - Return to Normal – Situation Should Get Better.

EXPECT THE UNEXPECTED!

When it's Time to Call a Code Green

- Dial "7777"
- You are unable to defuse the situation.
- The situation becomes more hostile.
- Threats are being made.
- Weapons are seen.

Summary

- All hospital workers should be:
  - Alert
  - Cautious when interacting with patients and visitors.
  - They should actively participate in safety training programs and be familiar with our hospital policies, procedures and materials on violence prevention.
- Defuse the Anger, Don’t Ignore It!