

**HCA North Texas Division  
Medical City Alliance  
FACILITY ORIENTATION GUIDE 2018**



# Medical City Alliance Checklist

I have read the attached orientation packet and understand the requirements I must follow when working at Medical City Alliance.

- Excellence Always Standards of Behavior
- Provider Letter
- Kiosk sign-in and badge process
- Mission, Vision and Communication
- HIPAA
- Key Hospital Contacts
- General hospital information and standards
- Emergency codes and safety
- Fire safety and prevention
- Fall prevention

\_\_\_\_\_  
Name (printed)

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Name (signature)

\_\_\_\_\_  
Date

Submit completed form and I Am HCA Excellence Always document to:  
Facility HR

# I am Medical City Healthcare

I am committed to *Excellence Always.*

## **A**-Accountability *I will:*

- Adhere to the mission, vision and values of the organization.
- Align my words, performance and appearance with the policies of the organization.
- Be responsible for my attitude and actions.

## **L**-Leadership *I will:*

- Promote an environment of excellence, innovation and servant leadership.
- Inspire and motivate others by demonstrating exemplary behavior.
- Communicate effectively and recognize the contributions of others.

## **W**-Willing *I will:*

- Maintain a high level of competency and the credentials required to provide the highest level of care possible.
- Exceed the expectations of everyone I encounter.
- Be flexible in regard to the challenges and changes that we face in healthcare every day.

## **A**-Attitude *I will:*

- Bring a positive and enthusiastic attitude to work every day.
- Show compassion toward our patients and co-workers.
- Approach problems with a solution.

## **Y**-“You First” *I will:*

- Place the needs of others first by striving to provide the best care possible.
- Honor the value of diversity and treat everyone with dignity and respect.
- Acknowledge your presence, introduce myself and explain in a timely manner aspects related to your care.

## **S**-Safety *I will:*

- Demonstrate my commitment to patient safety by adhering to all facility policies and procedures.
- Keep my workplace and surrounding environment clean and safe.
- Hold in confidence all private information and interactions.

Signed \_\_\_\_\_ Date \_\_\_\_\_

**Medical City Healthcare**



Facility Specific:

## General Orientation Packet

### INTRODUCTION

Medical City Healthcare is one of the region's largest, most comprehensive health care providers and includes 14 hospitals, 7 off-campus emergency rooms, more than 50 ambulatory sites, more than 7,000 active physicians and 15,000 employees in the Dallas-Fort Worth area.

## About Medical City Healthcare

Medical City Healthcare is one of the region's largest, most comprehensive health care providers in the Dallas-Fort Worth area comprised of:

- 14 North Texas hospitals
- 11 ambulatory surgery centers
- 30 CareNow Urgent Care centers
- 5,000+ nurses
- 121,000 patient admissions
- 500,000 ER visits
- 16,000 babies delivered
- 5 Magnet® hospitals recognized for nursing excellence
- 6 trauma centers
- 1 burn center
- 7 off-campus emergency rooms
- 6 pediatric urgent care centers
- 4,400+ physicians
- 1,200+ volunteers
- 1.2 million outpatient visits
- 149,000 surgeries
- \$200 million - charity & unreimbursed care
- 3 accredited comprehensive stroke centers
- Only Level I Trauma Center in Collin County

Primary Languages of Populations Served:

- English
- Spanish

*Translation Services provided by Cyracom (blue phone)*



\*\*\*\*\*PLEASE READ COMPLETE DOCUMENT\*\*\*\*\*

Dear Provider,

In keeping with requirements of The Joint Commission, the Centers for Medicare and Medicaid Services (CMS), and State regulatory agencies, we require each person requesting permission to provide services at Medical City Alliance to have credentials and qualifications verified prior to arrival for work. Since October 2011, HealthTrust Workforce Management Solutions, formerly Parallon, has extended their services to all HCA facilities to include tracking and monitoring of all Dependent Health Professionals (DHP) credentials. ***The DHP status includes all non-employees who are not privileged through Medical Staff Services (Medical Staff Services privileges all advanced practice nurses and physician's assistants).*** Every DHP must complete the credentialing process through HealthTrust Workforce Management Solutions. Once completed, the DHP's file will be verified for completion and subsequent approval. Please note that there is a fee associated with the credentialing process.

DHPs MUST sign in at the HealthTrust kiosk located in the main lobby *each time* they visit the hospital. If the DHP is compliant with all credentialing requirements, the kiosk will print a paper badge. This badge should be worn at all times. If the DHP is not compliant in one or more requirements, the kiosk will not allow a badge to be printed. In this instance, the DHP should access his/her eDHP on-line profile to determine what is needed. At no time should the DHP commence work at the facility without a current printed badge from the kiosk. Staff will be monitoring for compliance.

Each non-employee DHP member of our workforce will be subjected to an annual performance and safety evaluation completed by hospital staff in December of each year. Failure to complete the evaluation by the deadline will result in termination of privileges at the facility.

Any questions or concerns about this process may be submitted to Human Resources at 817-639-1750. Thank you in advance for your continued support.

Sincerely,

Human Resources

## **eDHP Badge Kiosk Troubleshooting and Support**

### **Who uses this kiosk?**

The eDHP system ensures Dependent Health Professionals (DHPs) credentialed through HealthTrust are fully compliant and approved to work in this HCA affiliated Facility.

**All DHPs credentialed via HealthTrust should check in using the kiosk in the front lobby and must wear the printed paper badge at all times. Once a printed badge is obtained, if needed, an access badge may be checked out from the House Supervisors office. This badge will be returned at the end of the DHPs shift.**

1. I forgot or don't know my username or password.
  - a. Use the "I forgot my password" routine in eDHP to try to recover your password.
  - b. Call HealthTrust IT&S Support Desk to obtain username information or reset password and/or unlock account. (see phone # at bottom of document)
2. My account is disabled.
  - a. Six (6) incorrect password attempts will disable an account.
  - b. Call HealthTrust IT&S Support Desk to unlock account.
3. The system indicates that I am not compliant.
  - a. Missing/Expired credentials can be both viewed and submitted via eDHP from a computer not designated as a Kiosk, but it can take up to 2 business days to be processed.
  - b. If DHP has never been in contact with HealthTrust, the DHP will need to reach out to Medical City Alliance Human Resources at 817-639-1750 and provide them with Name, Address, Contact # & Email, Vendor Name and vendor type. HR will then advise HealthTrust to start the credentialing process. HealthTrust does provide a one-time only credentialing form in case of an emergency and the DHP is not credentialed.
  - c. If already credentialed through HealthTrust but then becomes non-compliant the DHP will need to get in touch with HealthTrust and provide required missing/expired documentation.
4. The system indicates that I do not have a photo on file or it is not approved
  - a. If you have never uploaded a photo in eDHP or provided one to HealthTrust, log into eDHP from a computer not designated as a Kiosk and upload a photo for your badge.
  - b. Contact the House Supervisors office to have your photo approved.
5. The system indicates that I have not been approved by this facility
  - a. Contact the Director of the department where the DHP is providing the service, then if needed the Director will reach out to HR to obtain Facility approval.
6. I have not started the credentialing process with HealthTrust at all yet.
  - a. Contact the Human Resources department at Medical City Alliance 817-639-1750.
  - b. Contact HealthTrust Credentialing Customer Service.
7. There is a problem with the Kiosk PC or label printer.
  - a. Contact the facility IT&S Help Desk at 940-384-3330

**HealthTrust Support Desk**  
855-727-2967

**HealthTrust Credentialing  
Customer Service**  
954-514-1440

## Mission Statements

### **Medical City Mission Statement**

Above all else, we are committed to the care and improvement of human life; in recognition of this commitment, we strive to deliver high quality, cost effective health care in the communities we serve.

### **Nursing Mission Statement**

Above all else, through innovative and compassionate care, nursing is committed to producing exceptional outcomes for patients and families with Excellence Always.

## Values

### **Excellence:**

We strive to achieve excellence in everything we do and seek to continuously improve the services we provide.

### **Compassion:**

We treat each individual with the highest degree of professionalism and dignity

### **Integrity:**

We communicate open and candidly, build trust and conduct ourselves according to the highest ethical standards.

### **Accountability:**

We follow through and are answerable for our performance and actions.

### **Balance:**

We commit to balancing our professional lives with our personal lives.

## Communications

At Medical City we use the **AIDET** model as our communications standard. While at this facility, it is the expectation that these standards be maintained in all communications, including staff, visitor and patients.

### **Acknowledgement**

Whether you acknowledge the patient by name or with a friendly smile, the patient knows that you have connected with them. Acknowledgement includes putting down paperwork and making the patient your focus. Eye contact, a pat on the shoulder and a smile are all non-verbal ways of acknowledging a patient or family member.

### **Introduction**

Introduce yourself by name, state the department you work in and what you are going to do.

### **Duration/Time Frame**

Give an estimate of the time it will take to complete the procedure/ assessment.

### **Explanation**

Give an explanation of what you are going to do to or for the patient. Explain as needed throughout the procedure.

### **Thank You**

Thank the patient for choosing Medical City Healthcare. Ask "Is there anything else I can do for you" or, "Do you have any questions that I can answer for you?" followed by, "I have the time."

## HIPAA INFORMATION & REQUIREMENTS

HIPAA stands for the Health Insurance Portability and Accountability Act. The main purpose of this law is to protect the privacy and security of patient information.

So, how do we do that? We acknowledge and realize that access to patient information is on a “NEED TO KNOW” basis. If the information is necessary for us to properly care for the patients and to do our jobs, then we can access the information. We will also take steps to safeguard the information from others who do not have a “NEED TO KNOW”.

1. Not discussing PHI (Protected Health Information) in public areas.
2. Asking patients if they want family or guests to leave the room prior to treatments or discussions.
3. Securing patient charts on the units
4. Situating computer screens where the public cannot view them.
5. Situating printers & fax machines where the public cannot view the printouts.

Taking steps to safeguard the information from others who do not have a “NEED TO

KNOW:”

1. Logging out of the computer, or using a password protected screen saver, each and every time we step away from the computer.
2. Using the proper verification procedures and cover sheet if information is faxed.
3. Use of strong passwords will improve patient safety, confidentiality, reduce liability and protect you. A strong password must include the following: at least 7 characters, a combination of letters, numbers, and characters (such as !,\$,%,&,\* ) and upper and lower case letters whenever possible.
4. Do not open email attachments from an unknown source. This is the most common way to introduce viruses into the computer network.
5. Be cautious of sharing information regarding patients or computer system. Social engineering is becoming a common practice to gain information about yourself or others and use this information in a destructive manner.
6. Use proper verification procedures and cover sheets if information is faxed.
7. PHI is never placed in the regular trash bins; it should be placed in containers for shredding.
8. Any questions about the validity of a request for PHI should be referred to HIM/Medical Records or your supervisor.

**All potential/actual privacy issues should be reported immediately to the Facility Privacy Official at .**



## GENERAL INFORMATION

### CRITERIA

Location of parking facilities	Parking is available in lots in the _____ area of the campus
Smoking Policy: Medical City Healthcare is a tobacco free campus.	Tobacco free means no cigarettes, eCigarettes or chewing tobacco allowed on Medical City facility premises.
You are required to present a clean, neat, professional appearance. Your name badge is required.	Clean, neat scrubs and jacket (if desired) and appropriate nursing shoes or tennis shoes. No sweats, sweatshirts, t-shirts or sweaters are permitted.
Policies & Procedures	<ul style="list-style-type: none"><li>• Policies can be accessed via Compliance 360 from the resources tab on the facility Intranet page.</li><li>• Nursing Skills and Procedures are found on Lippincott via the facility intranet page.</li></ul>
Infection Prevention:	<ul style="list-style-type: none"><li>• <u>Standard Precautions</u> are used for all patients</li><li>• Refer to <u>Infection Control Manual</u> for specific procedures of various ordered isolations</li><li>• Utilize personal protective equipment where there is potential for exposure to blood or body fluids</li><li>• Scrupulous hand washing techniques</li><li>• Utilize designated containers for disposal of sharps and bio- hazardous waste.</li></ul>
Conflict Resolution	<ul style="list-style-type: none"><li>• Patient problems should be resolved as quickly as possible.</li><li>• During week-days, day time hours, please page the department director or you may contact the Nursing Supervisor after hours.</li></ul>
Occurrence Reporting	<ul style="list-style-type: none"><li>• Injury to patient, visitor or employee</li><li>• Patient falls</li><li>• Errors in medication administration, treatments, tests etc.</li><li>• Patient signing out Against Medical Advice</li><li>• Theft, loss or damage to property or equipment belonging to any patient, visitor, employee or facility.</li></ul>
Occurrence Reporting Procedure	<ul style="list-style-type: none"><li>• Occurrence Reporting is an electronic form located in Meditech.</li><li>• Follow the chain of command to notify the charge nurse, department director/manager, Nursing Supervisor and/or physician of an incident.</li></ul>
Performance Evaluation	<ul style="list-style-type: none"><li>• Evaluations will be done on each DHP annually</li></ul>
Injury Reporting	<ul style="list-style-type: none"><li>• Notify the Department Director for your area.</li><li>• You will then be directed to Employee Health or the Nursing Supervisor for evaluation or treatment if indicated.</li><li>• Complete an Occurrence Report prior to leaving the hospital.</li></ul>

### EMERGENCY CODES AND OTHER SAFETY REMINDERS

<b>Code Red</b>	<b>Fire</b>	Use RACE and PASS (as follows). <ul style="list-style-type: none"> <li>• In general, all doors closed.</li> <li>• Report to central nursing station for further direction.</li> <li>• Fort Worth Fire Department will order and coordinate any facility evacuation.</li> </ul>
<b>Code Blue</b>	<b>Cardiopulmonary Arrest</b>	<ul style="list-style-type: none"> <li>• Dial “*55555” to notify PBX or Press CODE BLUE button in room.</li> <li>• Code Team available in facility</li> <li>• Begin CPR until CODE BLUE TEAM arrives</li> </ul>
<b>Code Adam</b>	<b>Pediatric Abduction Policy</b>	<ul style="list-style-type: none"> <li>• If after looking for the missing or abducted child he/she can't be found after searching the immediate area or unit, call security and report the child missing</li> </ul>
<b>Code White</b>	<b>Chemical Spill</b>	<ul style="list-style-type: none"> <li>• Dial “*55555” for operator.</li> <li>• State clearly “Code White” &amp; your location. Facility management will respond and notify the appropriate Fort Worth city department if necessary.</li> </ul>
<b>Code Orange</b>	<b>Radiation Exposure</b>	<ul style="list-style-type: none"> <li>• Dial “*55555” for operator</li> <li>• State clearly “Code Orange” and your location. Facility management will respond and notify the appropriate Fort Worth city department if necessary.</li> </ul>
<b>Code Yellow</b>	<b>Disaster</b>	<ul style="list-style-type: none"> <li>• May be internal or external disaster.</li> <li>• Refer to the Environment of Care Manual.</li> </ul>
<b>Code Purple</b>	<b>Combative Situation</b>	<ul style="list-style-type: none"> <li>• Dial “*55555” for operator and state clearly “Code Purple” &amp; your location</li> <li>• Personnel to remain in unit and continue normal activity and prevent danger to selves, patients, and visitors.</li> </ul>
<b>Code Brown</b>	<b>Bomb Threat</b>	<ul style="list-style-type: none"> <li>• Dial “*55555” for operator and state clearly “Code Brown” &amp; location if known.</li> <li>• Personnel to remain in unit and continue normal activity and prevent danger to selves, patients, and visitors.</li> </ul>
<b>Code Pink</b>	<b>Missing Infant/Child/Adult</b>	<ul style="list-style-type: none"> <li>• All hospital personnel will search their area for missing infant or child or adult.</li> <li>• If unit has door that opens to outside or stairwell, this door should be manned &amp; all visitors asked to remain in the building until Code Pink has been cleared.</li> </ul>
<b>Code Gray/Black</b>	<b>Severe Weather Watch/Warning</b>	<ul style="list-style-type: none"> <li>• Open doors &amp; windows</li> <li>• Close blinds &amp; drapes</li> <li>• Turn off all unnecessary equipment.</li> <li>• If clinically possible, assist patients to inside wall, cover head and chest with mattress and pillow.</li> <li>• Wait until “all clear” called by operator.</li> </ul>
<b>Code Silver</b>	<b>Active Shooter</b>	<ul style="list-style-type: none"> <li>• If there is an accessible escape path, attempt to evacuate the premises.</li> <li>• If evacuation is not possible, hide where the shooter is less likely to find you.</li> </ul>
<b>RRT</b>	<b>Patient Deterioration</b>	<ul style="list-style-type: none"> <li>• Dial “*55555” to notify PBX State room #.</li> <li>• RRT Team available in facility</li> <li>• Get crash cart and patients chart.</li> </ul>

## SAFETY REMINDERS

### WHEN YOU DISCOVER A FIRE



<b>R</b>	Rescue	Anyone in danger.
<b>A</b>	Alert	Activate Fire Alarm and dial extension *55555
<b>C</b>	Contain	The Fire, close doors
<b>E</b>	Extinguish	The fire if possible

### WHEN YOU FIGHT THE FIRE (using Fire Extinguisher)



<b>P</b>	Pull the Pin Out	Twist the Plastic Pin Holder
<b>A</b>	Aim	At the base of the Fire
<b>S</b>	Squeeze	The handle to discharge Agent
<b>S</b>	Sweep	From Side to Side

## Fall Prevention Program

- **All staff members** are accountable for practicing the behaviors outlined
- **Nurse and Tech** must write their name and Cisco Phone# on whiteboard (Or main nursing station number if Cisco phone is not available)
- **Ancillary Department's Responsibility**
  - This is applicable in all areas, including Emergency Department and outpatient areas
  - When **"Exiting"** the room or leaving the patient must ask **"Is there anything else I can do for you?"**
    - **If able to assist** (Ex. "Get my purse" or "Can you move the table over"), perform the task
    - **If requesting the nurse, nutrition or toileting**, phone nurse / charge nurse via Cisco phone or notify by call light and inform of patient's request.
    - **Must stay in room** If no response in 5 minutes – Pull emergency cord in bathroom
- **Nursing Department's Responsibility**
  - Hourly rounding by nursing staff
  - Let patient know that they will be checked hourly.
- **RRT is called for the following:**
  - **Falls:**
    - Suspected head injury
    - Unwitnessed fall
    - Suspected "Major" injury. Major injury is defined as:
      - Fractures
      - Injuries which require medical or surgical intervention
      - Injuries that increase the hospital stay
  - Required documentation completed
- **If a patient should fall, contact Charge Nurse and implement Falls Protocol including Post Fall Assessment and Post Fall Huddle Sheet**

Falls Protocol and forms are located in Forms Fast in Meditech