

# Student Orientation

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## St. Mary's Hospital

### Our History

It was during a smallpox epidemic in 1872 that Mother Mary Odilia Berger and four companion sisters arrived in St. Louis. Their mission was clear—to serve God by tending to the poor and sick. The day after they arrived from their native Germany, the sisters began nursing to St. Louis' smallpox victims.

Forty years later, eight more sisters followed Mother Odilia's mission when they arrived in Wisconsin at the request of several Madison physicians and local clergy to establish a "Sisters' Hospital" for the city of Madison. Through the vision and hard work of the sisters, four physicians and four lay nurses, St. Mary's Hospital opened its doors and its 70 beds on September 22, 1912.

To this day, St. Mary's Hospital remains faithful to the original mission of the Franciscan Sisters of Mary—to provide compassionate and expert health care to every patient who enters its doors.



*Founding sisters of the St. Louis-Missouri based Sisters of St. Mary: (clockwise, starting in lower left) Sr. M. Elizabeth Becker, Sr. M. Francis Reuter, Mother Odilia Berger, Sr. M. Magdalen Fuerst, Sr. M. Odilia Schneider. (Photos courtesy of the Franciscan Sisters of Mary. All rights reserved.)*

### Our Mission

Through our exceptional health care services, we reveal the healing presence of God.

## Our Philosophy

St. Mary's Hospital is committed to the philosophy of the Franciscan Sisters of Mary and SSM Health Care. St. Mary's Hospital recognizes the sacredness of life and promotes the dignity and freedom of each person. Our philosophy is further defined by the following principles.

As representatives of St. Mary's Hospital, we strive to:

- Show respect and compassion to all persons who come in contact with the hospital and treat them in a just manner.
- Provide competent, caring, and personalized service to patients and their family members.
- Provide services that recognize and utilize the latest knowledge and technology.
- Meet the changing needs of those we serve.
- Acknowledge an individual's total health to include body, mind and spirit, and provide an environment that strives for well-being in each of these dimensions.
- Foster internal and external community understanding and support.
- Be active in development of public policy which defines the health care rights of all segments of the population.
- Balance economic considerations with our commitment to provide services to those in need, regardless of their ability to pay.
- Carry out our responsibility to SSM Health Care as an integral part of that system.
- Provide for employees' well-being, and opportunities for personal and professional growth.

## Our Vision & Values

### Our Vision

Through our participation in the healing ministry of Jesus Christ, communities, especially those who are economically, physically and socially marginalized, will experience improved health in mind, body, spirit and environment within the financial limits of the system.

### Our Values

In accordance with the philosophy of the Franciscan Sisters of Mary, we value the sacredness and dignity of each person. Therefore, we find these five values consistent with both our heritage and ministerial priorities:

- **Compassion**  
We reach out with openness, kindness, and concern.
- **Respect**  
We honor the wonder of the human spirit.
- **Excellence**  
We expect the best of ourselves and one another.
- **Stewardship**  
We use our resources responsibly.
- **Community**  
We cultivate relationships that inspire us to serve.

## **Diversity**

Our sponsors, the Franciscan Sisters of Mary, opened the first Catholic hospital for African Americans in the nation in 1933. Not only did the hospital welcome African-American patients, it offered African American physicians and nurses the opportunity to practice their profession.

Diversity in all areas of SSM Health Care is not only part of our past; it is key to our success in the future. At SSM, we realize that workplace diversity is essential to be competitive. We seek to foster awareness and appreciation of diversity among our employees, patients and customers. We work with diverse organizations to broaden our reach into the communities we serve to support and promote an inclusive society. We seek to attract and support people and suppliers from diverse backgrounds and cultures.

## **Code of Ethics**

All employees are committed to supporting the mission and values of SSM Health Care and to protect and advocate for the values of human life and dignity in its services to patients and families consistent with the ethical values and social justice teachings of the Catholic Church.

All employees are obligated to act in ways that merit trust and confidence of their professional peers and the customers/patients served.

## **Accountable Care Organization – Better Service, Better Care**

Dean Clinic and St. Mary's Hospital have chosen to participate in a Medicare Accountable Care Organization (ACO) Program. This means that our providers are working together with Medicare to give you better service and care.

As an ACO, Dean Clinic and St. Mary's Hospital uses advanced systems that let us more carefully track your care and make sure your doctor has the most up-to-date information about your health. The goal of the ACO is to support your doctor in caring for you. ACOs help your primary care provider and all others work together more closely, by making sure they have the most up-to-date information about your health and your care.

For you, this means your doctors communicate better with each other, and you may avoid having duplicate tests or answering the same questions over and over. Working together, your doctors can do more to follow your health, make sure you get the best possible care and consult you on what works best for you. Doctors and other healthcare providers choose to participate in an ACO because they're committed to providing you with a better care experience.

## **Workplace Violence**

St. Mary's is committed to providing a safe and secure environment for all patients, visitors and staff. Acts of physical violence will not be tolerated. Anyone who experiences or witnesses such an act is asked to report it immediately to a hospital security officer and/or a member of the management staff.

## **Tobacco-Free Facilities**

It is the policy of the organization to provide a tobacco-free environment.

## **Parking**

**Instructors** and **students** having clinical at St. Mary's cannot use the parking ramp on Mills Street. There is a shuttle lot located on Fish Hatchery Road and Appleton Street (near Dean

Clinic). Shuttle service is available Monday through Friday from 6:00am-6:00pm. All affiliates parking in the off-site lots are required to have an orange St. Mary's shuttle lot parking card displayed in their front window. **The orange card may be obtained through Security or the shuttle drivers.**

## **Meeting Rooms**

Meeting rooms can be reserved if needed. Contact Mary Lynn Dombrowski at 258-6738 or [marylynn\\_dombrowski@ssmhc.com](mailto:marylynn_dombrowski@ssmhc.com).

## **Lockers**

St. Mary's provides lockers and combination locks for student and instructor use. A master list of assigned lockers will be given to the instructor. It will be the responsibility of the instructor to assign individual student lockers and maintain the listing. If a student forgets lock combination, the contact person will be the clinical instructor.

**ENCOURAGE STUDENTS TO USE THESE LOCKERS IN ALUMNI HALL AND NOT THE NURSING UNIT LOCKER ROOM. LOCKERS NEED TO BE USED FOR MORE THAN ONE CLINICAL ROTATION DURING THE SEMESTER. EMPTY LOCKER EACH DAY.**

## **Name Tags**

The approved school identification badge is acceptable to wear during the clinical experience.

## **Advanced Directives**

All patients admitted in a SSM Healthcare Facility have the rights to express their desires in initiating, continuing, and/or discontinuing certain forms of medical treatment in the event of incapacitation and/or if they are unable to make decisions for themselves.

## **Patient Rights and Responsibilities**

Our values are integral to the healing ministry of St. Mary's Hospital and are reflected in our affirmation of Patient Rights and Responsibilities. The patient is an important part of the health care team working to provide the best care. All patients, families, and/or their designated decision-makers will be aware of their Rights and Responsibilities. All staff and physicians will also be aware of Rights and Responsibilities.

## **Patient Confidentiality and Right to Privacy**

St. Mary's patients have a right to expect that the information they share or the care they receive remains strictly within the knowledge of the health professionals attending them and is only available to those health professionals legally entitled to receive information.

All St. Mary's employees are ethically and legally bound to protect patients' right to privacy of all medical and personal information--including medical records, mental health records, and photographs or videotapes obtained for educational or promotional purposes.

## **Medication Administration**

Medications will be administered based on physician orders and after review by a pharmacist (see Order Review Policy). The person administering the medication must know:

- The indications
- Adverse reactions

- Contraindications
- Other basic information about the medication before administering or have the prescriber, trainer or other knowledgeable professional present
- Allergies

Safe medication administration practices include:

- The “5 Rights” check prior to administration
  - Right patient (using two different identifiers)
  - Right drug/feeding
  - Right dose or IV rate
  - Right route/tubing/connector
  - Right time
- Verify the patient specific label with the product label.
- Verify the medication has not expired.
- Visual examination of sterile products to ensure that there are no particulates or discoloration.
- Unresolved, significant concerns about the medication is discussed with the prescriber or other qualified staff and resolved before the medication is administered.
- Verify no contraindications exist.
- Basic information on the purpose of the drug, potential clinically significant adverse reactions or other concerns should be provided to the patient and/or caregiver when a new medication is prescribed.
- All IV medications (IV push, infusions, piggybacks) must be administered and documented one at a time.
- Verify correct equipment and safety features used to manage medication administration (IV pumps, syringe pumps, etc.)

The bar code medication administration system provides an additional safeguard that complements the “5 Rights” of medication administration. All departments will scan all medications containing a bar code prior to administration for the appropriate checks. (Except Anesthesia, Sleep Center and Outpatient Dialysis.)

### **Fall Risk Prevention**

A fall risk assessment is completed and documented on at admission, when a patient’s condition changes and daily. Patients and significant others receive education regarding fall prevention upon admission.

### **EPIC Training**

1. Go to <http://www.deancare.com/train-at-home/>
2. Enter:  
User name: DeanEmployee  
Password: Train@Home1 (case sensitive)
3. Type in your Full (Given) Name. *(This name will be used to track the student assessment score and provide the security to access EPIC. If there are nicknames or other names you go by, please include them as well.)*

4. View the 11 required online eLearning modules (*This does not have to be done in one sitting*) and take the assessment. If you receive an 80% or higher, print the results page.
5. If you do not successfully pass the assessment you will need to review the eLearning modules and take the assessment again.
6. Add your name to the results page and give to your instructor. You will then be given your EPIC security envelope or be directed to pick it up at SMH in Room 1208.

## Hand Washing

Use alcohol-based or soap and water:

- Before having direct contact with patients.
- Before donning sterile gloves to insert central venous catheters.
- Before inserting indwelling urinary catheters, peripheral vascular catheters, or other invasive devices that do not require a surgical procedure.
- After direct contact with patient's intact skin.
- After contact with body fluids, mucous membranes, or non-intact skin.
- If moving from a contaminated body site to a clean body site.
- After contact with inanimate objects in the immediate vicinity of the patient.
- After removing gloves.

## Safety Training Information

### Infection Control

1. All personnel are expected to comply with hospital infection control policies. (Reference is the Infection Control Manual – SSM Intranet.) Personnel should understand their role in the Infection Control Program.
2. Hand Hygiene is the single most important means to prevent the spread of infection. The hospital environment can serve as a source to pick up germs, especially on your hands. Frequent good hand hygiene assists in the removal of these germs. Hand hygiene is recommended in the following situations:
  - a. When there is contact with a patient
  - b. After using the restroom
  - c. Before eating
  - d. Before leaving the hospital
  - e. After coughing, sneezing, or blowing your nose

### What is hand hygiene?

- It's a hand wash with regular soap & water.
- It's hand antisepsis with an antimicrobial soap & water or alcohol-based waterless solution.
- In the surgical setting such as the OR, it's a surgical hand scrub with an antimicrobial soap and water or an alcohol-based waterless solution.

*The alcohol-based hand sanitizer is an acceptable and recommended alternative to a soap and water hand wash, except when hands are visibly soiled.*

3. Cough Etiquette
  - Cover your mouth and nose with a tissue, when you cough or sneeze
  - Disinfect your hands with soap and water or clean them with an alcohol-based hand sanitizer after you cough or sneeze
4. Finger Nails: The following staff will have short, well-groomed fingernails and will not wear artificial fingernails, acrylic overlays, or other nail extensions:
  - a. Those who provide or assist with hands-on patient care.
  - b. Those with occupational risk for hand contact with blood, tissue, or other body fluids.
  - c. Those who handle sterile equipment/products.
  - d. Those who prepare or serve food and handle clean dishes.

Fingernail polish on natural nails is acceptable providing it is well maintained without chips or cracks. Exception: The Federal Food Code prohibits food service workers (who prepare or serve food or handle clean dishes) from wearing fingernail polish.

5. All personnel are expected to be aware of, utilize, and follow hospital isolation policies:
  - Transmission Based Precautions -- Airborne, Airborne N95, Droplet, and Contact
6. Know the safe and proper methods for disposal of contaminated sharps.
  - All disposable contaminated sharps are to be placed in the red sharps containers.
7. Personnel should be aware of respiratory protective measures when caring for patients with suspect/known TB (CDC Guidelines/OSHA Standard).
  - Patients with suspect/known TB will be placed in Airborne N95 isolation.
  - All staff caring for patients with suspect/known TB must wear a N95 respirator.
  - Fit testing, with a respirator medical clearance, is required prior to wearing N95 respirators (Nursing units have authorized fit-testers).
  - For persons who have not been fit tested, ask Nursing staff about the availability of a PAPR (positive air purifying respirator).
8. Use Personal Protective Equipment (PPE) for all procedures when risk of exposure to blood/body fluids may be anticipated.
  - Know which PPE would be appropriate to prevent an anticipated exposure (gloves, gowns or masks).
  - Know location of PPE (ask hospital personnel if unsure).
  - Consider all blood and body fluids as potentially infectious (use Standard Precautions).
  - Use appropriate barrier precautions routinely.
9. Appropriate use of hospital-owned scrubs.
  - Hospital-owned scrubs must be worn in the surgical areas (semi/restricted areas of the OS).
  - Scrubs do not provide any additional personal protection -- if contamination is expected, cover gowns should be worn.
  - Contaminated scrubs should never be worn outside of the departments.

- Scrubs **must** be removed prior to leaving the hospital.

### **Blood and Bodily Fluids Exposures**

1. Definition of a significant exposure:
  - a. Transmission into a body orifice or onto mucous membrane of blood; semen; vaginal secretions; cerebrospinal, synovial, pleural, peritoneal, pericardial or amniotic fluid; or other body fluid that is visibly contaminated with blood.
  - b. Exchange during the accidental or intentional infliction of a penetrating wound, including a needle puncture, of blood; semen; vaginal secretions; cerebrospinal synovial, pleural, peritoneal, pericardial or amniotic fluid; or other body fluid that is visibly contaminated with blood.
  - c. Exchange, into an eye, open wound, an oozing lesion, or where a significant breakdown in the epidermal barrier has occurred, of blood; semen; vaginal secretions; cerebrospinal synovial, pleural, peritoneal, pericardial or amniotic fluid; or other body fluid that is visibly contaminated with blood.
2. Render first aid immediately:
  - a. For puncture injury or skin exposure: wash with soap and water and then rinse thoroughly with water
  - b. For mucous membrane exposure rinse with copious amounts of water, saline or sterile irrigants.
3. Report all injuries, including injuries from contaminated sharps injuries or blood/body fluid splashes.
  - a. Immediately notify Nursing Supervisor.
  - b. Report to: Employee Health Services Monday through Friday 7:00 AM- 4:30 PM or Emergency Department whenever Employee Health Services is not open.
  - c. Document injury/splash via the on-line occurrence/event reporting process (on St. Mary's intranet home page.)
  - d. St. Mary's Employee Health and/or the Emergency Department will initiate follow up and treatment.

### **Chemical Safety**

1. Material Safety Data Sheets (MSDS) are available on the St. Mary's intranet under "MSDS Online."
2. MSDA are available for all hazardous chemicals used in the department or area.
3. Each unit/department has associated personal protective equipment (PPE) necessary to handle hazardous chemicals in that area.

### **Tornado Warning**

1. Staff and visitors should move away from the windows.
2. In patient rooms the shades or curtains should be pulled. Patients should be covered with a blanket and they will generally not be moved out of rooms.
3. All surgeries in progress will be completed; no new surgeries will be started until an "All Clear" is called.

### **Missing Person Alert: Infant/Child Abduction**

1. Announced if there is suspected or confirmed infant/child abduction from the hospital. It could be announced if:
  - a. An infant is missing from the Nursery/mother's room.
  - b. A child is missing from Pediatrics.

2. Missing Person Alert: Infant/child abduction only applies to infant and pediatric patients in the hospital.
3. If a visitor has a lost child, staff should immediately report it to switchboard. Switchboard will make an overhead announcement giving a description and last location.
  - a. Respond immediately.
  - b. Inspect and monitor your department/area including exterior doors, exits and bathrooms for anyone with a baby, small child, duffle bag or luggage.
4. Remember: Clothing may have been changed, hair cut, hair color changed (from the original description).
5. If someone fits this description you should calmly approach the suspect and explain that we are in the middle of a Missing Person Alert: Infant/child abduction and that we must verify that the infant/child they have is not the infant/child in question.
6. If you suspect that you have found the missing infant/child, immediately call Security (call 7777).

### **Fire Alarm Activation/Fire Safety**

1. St. Mary's Fire Alarm Activation Plan defines hospital policy utilized if a fire should occur on the premises. It's purpose of the Plan to inform employees and physicians of their responsibilities and to provide clear instructions to be followed in the event of fire.
2. The Fire Activation is indicated by strobe lights flashing and an overhead announcement of "Attention all Personnel: Fire Alarm activation and Location."
3. Fire Alarm Activation Plan ends with an announcement of "Attention all Personnel: Fire Alarm activation, All Clear".
4. If you discover a fire:
  - Remove person(s) from danger out of room, close door, and leave door closed.
  - Activate fire alarm pull station and dial "7777" giving Switchboard exact location of fire.
  - Close all doors and windows to contain smoke and flames.
  - Evacuate patients, if directed.
5. If you hear the Fire Plan activated (strobe lights flash and Fire Plan page):
  - Listen to audio page to learn location of fire.
  - Close all doors, including fire doors, and keep closed.
  - Proceed slowly through a smoke/fire door if it is necessary to leave your area. Note: All smoke/fire doors are marked with red reflective tape around the doorframe.
  - Do not use elevators in fire.
6. Smoke Smell
  - Report all smoke smells to Switchboard (dial (229) "7777") Fire Out

### **Fire Prevention/Utility Systems Management**

1. Evacuation Routes are posted throughout the hospital.
2. If your elevator stalls between floors, use the phone in the elevator and dial "0" or (229) "7777" and report the number of the elevator.
3. If there is a power outage, emergency power is available through any red outlet, regardless of the color of the cover plate.

## Security Alert: Building Threat

- Security Alert: Building Threat may be activated when the hospital receives a bomb threat.
- When the plan is activated, the charge person coordinates a search of their unit/department.
- Threats may be received verbally (on the phone or in person) or in writing.
- If received verbally, obtain as much information as possible utilizing the “Bomb Threat Information Form” as a guideline. This can be found in the red emergency tri-fold binder.
- Notify Switchboard via the hospital emergency number ((229) (7777)). If you find any suspicious items, notify Security. And **do not touch the article**.

## Emergency Operations Plan

1. The Emergency Operations Plan is activated when the number of disaster victims is large enough to significantly alter normal hospital and emergency services operations or when normal hospital operations are significantly altered by unforeseen circumstances.
2. When the Emergency Operations Plan is activated you will hear this overhead page: "Attention all Personnel—Disaster Plan now activated.
3. Check with a hospital employee if your services are needed.
4. The Disaster Plan activation ends with an announcement of "Attention all Personnel: Disaster Plan, All Clear".

## Medical Emergency

1. The hospital's response to provide the necessary medical staff and medical equipment at the scene of a medical emergency.
  - a. The emergency could be a person who is not breathing and has no pulse - or -
  - b. It could be any medical emergency even if the person is breathing and has a pulse.
  - c. Person has airway obstruction from choking on food.
  - d. Person having a seizure.
  - e. Person having cardiopulmonary arrest resulting.
  - f. Person falls down the stairs.
  - g. Person involved in chemical spill, overcome by fumes, causes respiratory arrest.
  - h. Person having an allergic reaction to latex or other substance.
2. Dial “7777” and tell the Switchboard “Code Blue” - give exact location (i.e., full room number).
3. The Switchboard will page “Attention All Personnel, Code Blue in (the location)”.

## FDA: Safe Medical Devices Act

1. What constitutes a reportable incident? An injury or death that was caused by (or partly caused by) a medical device failure.
2. What constitutes a medical device? A medical device is any medically designed object that is used on a patient for the purpose of diagnosis, therapy, treatment, or healing. Medical devices include:
  - a. Equipment (hospital owned, physician owned, rented/leased equipment)
  - b. Equipment related supplies
  - c. Disposables

- d. Computer Hardware/Software
- 3. What constitutes an injury? An injury that requires medical or surgical intervention to reverse, or causes the patient to have a medical disability that did not exist before the incident, is considered to be an injury that must be reported.
- 4. How do you report a medical device incident or concern? Inform Clinical Engineering, by telephone (Ext. 6547) that the incident has occurred. Follow this telephone call with an HBOC message. This should occur within the same shift that the failure occurred.
- 5. What information must be provided to Clinical Engineering, by the individual responsible for the medical device, at the time of the incident?
  - a. Contact Person (Person using equipment during failure)
  - b. Equipment Location
  - c. Equipment Description
  - d. Equipment Serial # or Hospital Log #
- 6. What should be done with the failed medical device? The failed medical device must be removed from service, red tagged, and held until the Clinical Engineering Department can evaluate both the device and the incident involved with the failure. Under no circumstances should the medical device be put back into service until it has been repaired or the situation that caused the device failure has been resolved.

### Security Alert: Active Shooter

1. The Security Alert Active Shooter code will be announced by the switchboard if there is a person in St. Mary's Hospital brandishing a firearm with the intent to do harm.
2. What should you do if "Security Alert Active Shooter" is announced?
  - a. Get Out: If you can escape get out. Trust your instincts; leave your belongings behind.
  - b. Hide Out: Find a hidden location and find protection. Avoid places that trap or restrict movement. Spread out.
  - c. Call Out: Dial (229) 7777; tell the operator "active shooter". Don't assume that someone else is calling. Give the location and a description of the individual, weapon, and situation.
  - d. Keep Out: find a room that locks; blockade the door. Be silent. Turn off lights and turn off noise (cell phone, pagers, TV)
  - e. Help Out: (if possible): Help others stay calm, and help others escape. Warn others. Help injured.
  - f. Take Out: (only as a last resort): Make a plan. Act as a team. Do whatever is necessary to neutralize the situation.

### Waste Handling

1. All sharps should be disposed of in red sharps containers
2. Any waste that is "*drippable, pourable, squeezable, or flakeable*" with blood or body fluids must be red-bagged.
3. All paper waste should be placed in blue recyclables container.
4. Batteries with heavy metal must be treated as hazardous waste. Please contact the Facility Safety Officer for disposal.
5. For construction waste, please refer to onsite supervisor for direction.