

Recognition & Reputation



Your Role In Quality Care



Human Resources



Human Resources

Arrest Reporting

Appearance

Discrimination

Sexual Harassment

Social Media

Bullying

Code of Conduct

Drug Free Workplace

- Report all arrests within 48 hours
- Failure to report results in disciplinary action up to and including termination

Human Resources

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Code of Conduct

Drug Free Workplace



Inspires Confidence



Not So Much

Patient Rights

Dignity	Information	Refusal
Financial Counseling	Access to Healthcare	Know Their Rights

TGH in the Baker Act Process



Involuntary Examination

I have personally examined (printed name of person) _____ must be completed and legible (please print)
 within the preceding 48 hours) on ____/____/20____ in _____ at time _____ am pm (time must be
 _____ County and that person appears to

meet criteria for involuntary examination OR I am a physician who has determined that (printed name of person) _____
 has failed or has refused to comply with the treatment ordered by the court, and, in my clinical judgment, efforts were made to solicit compliance and the
 person appears to meet the criteria for involuntary examination. Section IV of this form is completed to document the requirements of the law.

This is to certify that my professional license number is: _____ and I am a (check one box)

- Psychiatrist
 - Physician (non-psychiatric)
 - Clinical Psychologist
 - Psychiatric Nurse
 - Clinical Social Worker
 - Mental Health Counselor
 - Marriage and Family Therapist
- Each as defined in s.394.455, F.S.

Section I: CRITERIA

There is reason to believe person has a mental illness as defined in Section 394.455(18), Florida Statutes (excludes retardation or developmental disabilities, intoxication, or conditions manifested only by antisocial behavior or substance abuse impairment).

Diagnosis of Mental Illness is:
 List all mental health diagnoses applicable to this person

DSM Code(s)
 (if known)

AND BECAUSE OF MENTAL ILLNESS

A. Person has refused voluntary examination after conscientious explanation of disclosure of the purpose of examination

OR
 Statute requires that at least one be checked, but both may be checked if both apply

B. Person is unable to determine for himself/herself whether examination is necessary

A. Without care and treatment the person is likely to suffer from neglect or refuse to care for himself/herself, and such neglect or refusal poses a real and present threat of substantial harm to his or her well-being and it is not apparent that such harm may be avoided through the help of willing family members or friends or the provision of other services

AND EITHER
 (A and/or B)

B. There is substantial likelihood that without care or treatment the person will cause serious bodily harm to (check one or both):

- self
- others

in the near future, as evidenced by recent behaviors (describe)

Section II: SUPPORTING EVIDENCE

A. My observations supporting the...

law and rules at any time. A copy of this form was provided to you. Your rights explained and that a copy of this form was provided to you. The federal Americans with Disabilities Act

Individual Dignity

You have the right to individual dignity and access to all constitutional rights. The federal Americans with Disabilities Act (ADA) applies to persons in this facility.

Right to Request Discharge by Persons on Voluntary Status

If you request discharge, your doctor will be notified and you will be discharged within 24 hours from a designated community facility and within 3 working days from a state hospital, unless you withdraw your request or you meet the criteria for involuntary placement. If you meet the criteria for involuntary inpatient placement or involuntary outpatient placement, the hospital administrator must file a petition with the Court for your continued stay within two (2) working days of your request for discharge.

Designation of Representative

You will be asked to identify a person to be notified in case of an emergency. Further, if you are at this facility for involuntary examination and do not have a guardian appointed by the court, you will be asked to designate a person of your choice to receive notification of your presence in this facility, unless you request that no notification be made. If you do not or cannot designate a representative, a representative will be selected for you by the facility from a prioritized list of persons. You have the right to be consulted about the person selected by the facility and you can request that such a representative be replaced.

Communication

You have the right to communicate openly and privately by phone, mail, or visitation with persons of your choice during your stay at this facility. You have the right to make free local calls and will be given access to a long distance service for collect calls. If communication is restricted, you will be given a written notice including the reasons for the restrictions. This facility is required to develop reasonable rules governing visitors, visiting hours, and the use of telephones but you cannot be limited in your access to your attorney, to a phone for the purpose of reporting abuse, in contacting the Florida Local Advocacy Council or the Advocacy Center for Persons with Disabilities. Several toll-free telephone numbers you may wish to keep are:

Florida Abuse Registry	1 800 96-ABUSE or (800) 962-2873
Florida Local Advocacy Council.....	1 800 342-0825
Advocacy Center for Persons with Disabilities.....	1 800 342-0823

Confidentiality of Information and Records

Information about your stay in this facility is confidential and may not be released, except under special circumstances, without your consent (or the consent of your guardian or guardian advocate or health care surrogate/proxy if you have one). Special circumstances include release of information to your attorney, in response to a court order, to an aftercare treatment provider, or after a threat of harm to another person. You have the right of reasonable access to your clinical record unless such access is determined to be harmful to you by your physician.

Treatment

You have the right to receive the least restrictive, available, appropriate treatment in this facility. You will get a physical examination within 24 hours of arrival and you will be asked to help develop a treatment plan to meet your individual needs. The criteria, procedures, and required staff training used by this facility for restraints, seclusion, isolation, emergency treatment orders, close levels of supervision, or physical management are available for your review. Such interventions may never be used for punishment, convenience of staff, or to compensate for inadequate staffing.

that specifies the mental health care you want. The facility is

Our Role: EPIC Order Panel

Baker Act

Baker Act - Complete Baker Act

*IF the Baker Act form is not already complete, follow this handy-dandy hyperlink to print the form.

NOTE: The physician's order and completion of the Baker Act form are both required to initiate the Baker Act proces.

Close/Video Observation

UNTIL DISCONTINUED

Elopement Risk

CONTINUOUS, starting today

Suicide Precautions

CONTINUOUS, starting today

NSG Comm: Please contact Security to collect all patient belongings

UNTIL DISCONTINUED, starting today

Diet Notes - SAFETY/Baker Act - No metal silverware. Plastic utensils only - fork and spoon only (exclude knife). No metal (aluminum) soda cans on meal tray. Beverage to be poured in styrofoam cup with lid.

CONTINUOUS, starting today

Staff member to circle Y (Yes) / N (No)	Y	N
Immediately upon initiating the Suicide Prevention Protocol:	Y	N
Patient assigned to a video safety room and/or with a sitter	Y	N
Patient provided a gown and searched on arrival to unit or when initiating Suicide Prevention Protocol	Y	N
All patient's belongings have been sent to Security or Pharmacy as appropriate	Y	N
Suicide assessment completed on Admission Database	Y	N
Social Service Consult entered in Precise.	Y	N
Consult Pastoral Care (if needed) or requested	Y	N
Education provided to patient and family (if applicable) on safety restrictions	Y	N
Diet order entered in Precise with instructions for no sharps on tray and no plastic containers.	Y	N
Foam containers to be used by dietary.	7am-7pm	7pm-7am
Assess and verify every 12 hours until discontinued by an MD order	Y	N
Patient exhibiting suicidal behaviors or expressing suicidal thoughts	Y	N
Does patient have a plan? If yes, what is plan	Y	N
Does the patient have access to means?	Y	N
If yes, was access to means removed? If no, document in notes	Y	N
Is the patient having command hallucinations?(hearing voices telling them to kill themselves)	Y	N
Is the patient exhibiting an escalation in anxiety or agitation?	Y	N
Update daily plan of care	Y	N
Room searched for items that patient can use to harm self or others, for example: belts, shoelaces, mirrors, lighters, spiral notebooks, plastic bags, drawstrings, safety pins, nail files, electrical devices, medications, and any glass or sharp items	Y	N
Packages brought in by visitors was searched for harmful items	Y	N
Extra linens and laundry hamper removed from room	Y	N
All extra equipment and supplies removed from room	Y	N
Patient remained under staff observation whenever he/she left the video safety room or direct camera field	Y	N
Staff provided direct supervision when patient was in the rest room	Y	N
Plasticware removed after meals	Y	N
Patient assessed during medication administration for hiding pills in mouth, under tongue or in cheeks (cheeking)	Y	N
Bed alarm is activated while the patient is in a hospital bed	Y	N
On discharge: (The Suicide Prevention Teaching Sheet is available on the Employee Portal and the Community Resource List is available through Social Services On Discharge)	Y	N
Suicide Prevention Teaching sheet reviewed with patient and family, if applicable	Y	N
Patient provided a copy of the Community Resources List with the crisis hotline number	Initials	Initials
7am-7pm Signature	7pm-7am Signature	Initials

removed from the room:

IV poles if in use, IV tubing.

On Admission

Patient assigned to a video observation room and/or with a sitter



Patient provided a gown and searched on arrival to unit or when

All patient's belongings have been sent to Security or Pharmacy as

Suicide assessment completed on Admission

Social Service consult entered

Consult Pastoral Care (if needed) or requested

Education provided to patient and family on safe restrictions

Diet order entered with instructions for no sharps on tray and no

Assess and verify every 12 hours

Is patient exhibiting suicidal behaviors or expressing suicidal

Does patient have a plan

If yes, what is the plan

Does the patient have access to means

If yes, was access to means removed?

Is the patient having command hallucinations

Is the patient exhibiting an escalation in anxiety or agitation

Update daily plan of care

Room searched for items that patient can use to harm self or others

Packages brought in were searched for harmful items

Extra linens removed and laundry hamper removed from room

All extra equipment and supplies removed from room

Patient remained under staff supervision whenever he/she left the

Staff provided direct supervision when patient was in the rest room

Plasticware removed after meals

Patient assessed during med administration for hiding pills in

Bed alarm activated while the patient is in a hospital bed

On discharge

Suicide Prevention Teaching sheet reviewed with patient and family,

Patient provided a copy of the Community Resources List with the

Bariatric Sensitivity

Obesity (Definition, Causes, Effects)

Weight-based Bias and Stigma

Understanding Bariatric Patient Anxiety

Improving the Bariatric Patient Experience



Weight loss based solely on lifestyle changes are very difficult to achieve and even more difficult to maintain.

Obesity.org

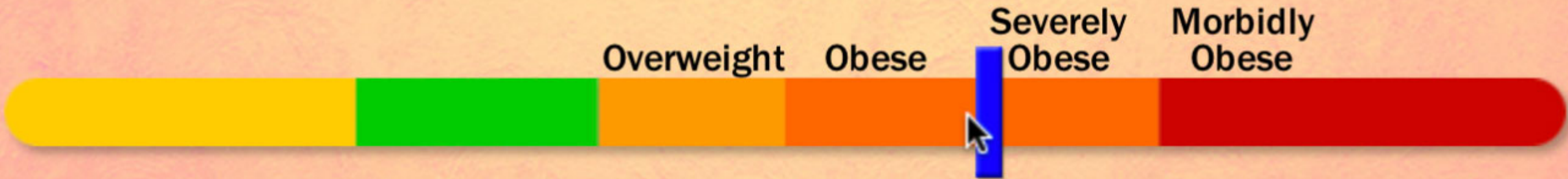
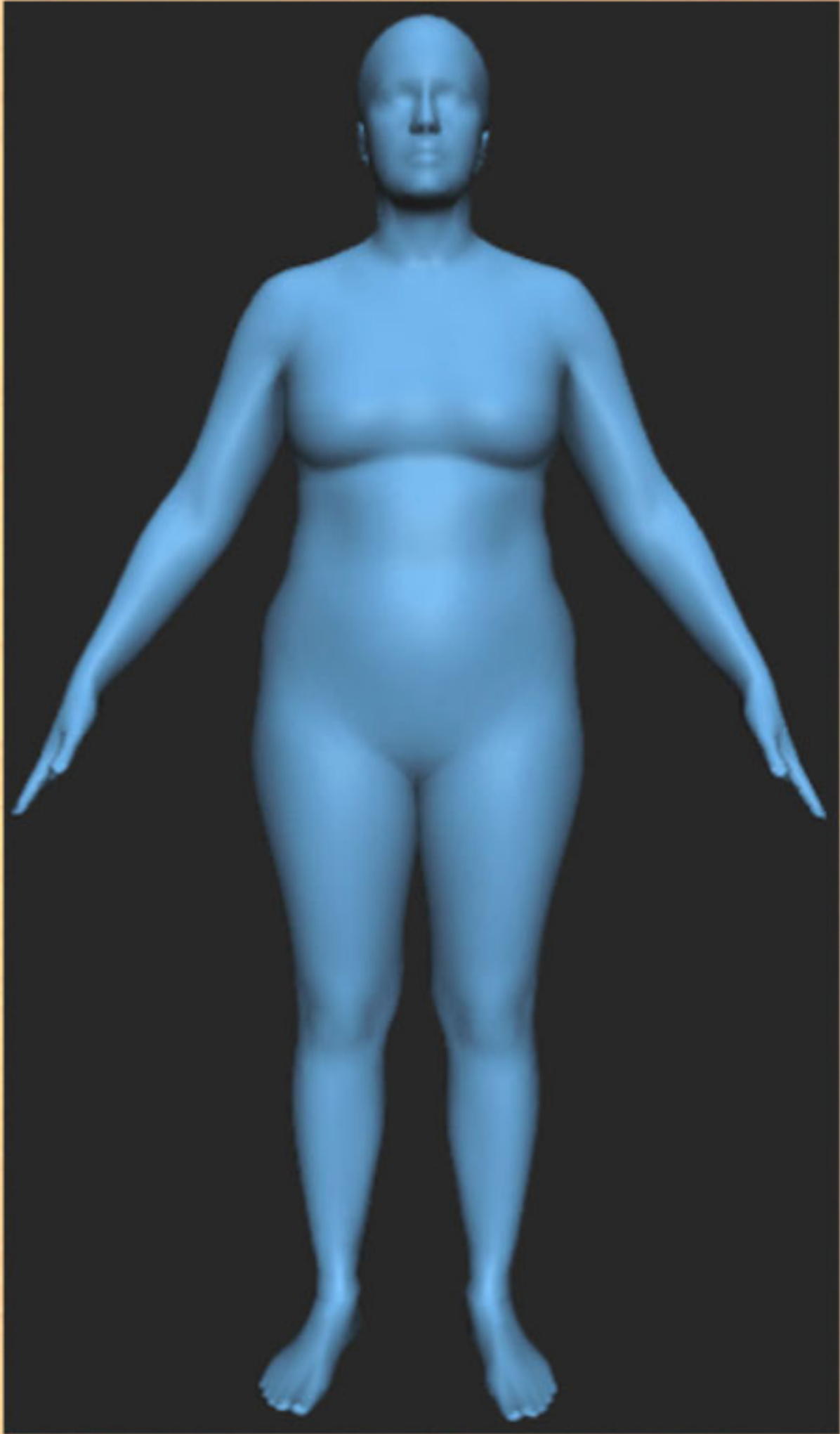


Sensitivity & Neutral Language



← Back to Slide

Weight	239.8
BMI	35.5
Body Description	Severely Obese
Health Risk	Moderate





Back to Slide

Height feet inches

Weight pounds

Calculate

BMI

27

Body Description

Overweight

1. Click in each field (pressing tab doesn't work in this player) to enter your height and weight. Make sure to delete the placeholder "0."
2. Click the **Calculate** button.

Questions to Ask Yourself

- How do you react to people of different body sizes?
- What assumptions do you make?
- Do you ever feel judged or feel badly about yourself based on what you see and hear around you?
- Do you make assumptions based only on weight regarding a person's character, intelligence, professional success, health status, or lifestyle behaviors?



Low Self-Esteem

Anxiety

Suicide

Isolation

DEPRESSION



TGHI Tampa General Hospital



Team Member Health Services

Acute Illness Clinic

Work-Related Injuries

Communicable Diseases

Work Clearance

Immunizations

EHS Medical Records

Immediate Action

- Inform Your Supervisor
- Complete Team Member Accident Report on portal

Report for Evaluation

During Office Hours

- Team Member Health

After Office Hours

- Team Member Health the next day
- Emergency Department if it is an emergency (follow up at Team Member Health within three days)
- Contact Clinical Administrative Supervisor for blood and body fluid exposures

Family Medical Leave Act

FMLA Eligibility

Requesting FMLA

Intermittent FMLA



Family Medical Leave Act

FMLA Eligibility

Requesting FMLA

Intermittent FMLA

Requesting FMLA

On the TGH portal

Team Member Health > Leave Office > New
Leave Case Request

FMLA Source

fmlasource.tgh.org

1-866-TGH-FMLA

1-866-844-3652

Questions?

813-844-3459

leavefmla@tgh.org

Other Leaves of Absence

Medical

Maternity

Personal

Domestic Violence

Military

Up to six months unpaid, job-protected leave in a rolling five-year period for:

- Family emergencies
- Educational reasons
- Extension of maternity leave

Personal leave is granted at the discretion of the manager and is not approved for:

- Outside employment
- Independent business ventures



CORRECT SITTING POSITION



Back Pain & Injury

Causes of Back Pain

- Poor posture
- Neglecting proper body mechanics
- Lifting heavy items
- Repetitive bending and twisting
- Prolonged standing

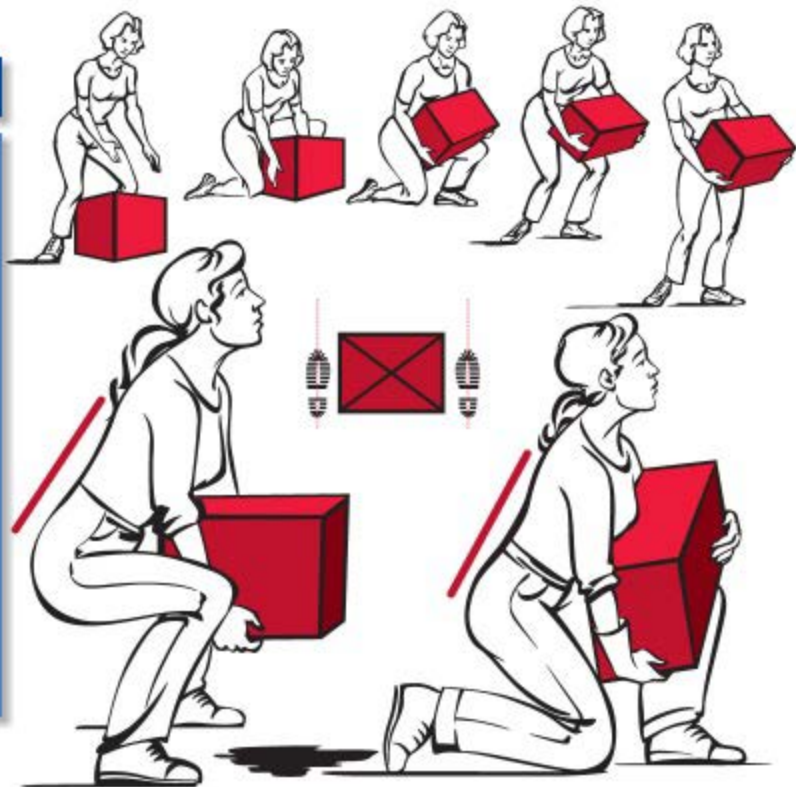


Injury Prevention

Body Mechanics

For ease and safety

- Keep spine straight
- Maintain lumbar lordosis
- Use wide base of support
- Bend your knees—not your back
- Keep load close to you
- Keep elbows in
- Test the load—tighten abdominals



Bariatric Beds

ONLY for patients:

- BMI > 45
- Weight greater than 228 kg (500 pounds)
- Difficulty mobilizing patient in standard bed

MOVING

- **NEVER** manually push these beds - it causes serious injury and is not permitted.
- **ALWAYS** move them by engaging the ball drive and using the motorized function.



Envella “Sand” Beds

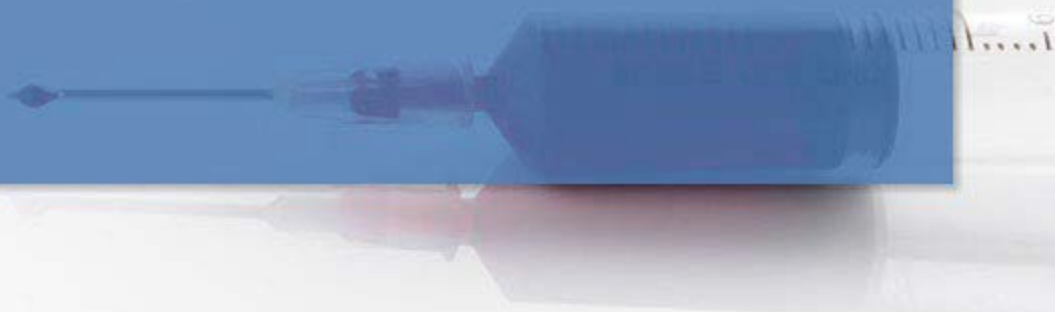
- Per manufacturer, patients should **NEVER** be transported in these beds. Always use a stretcher to transfer or transport patients.
- **NEVER** manually push these beds – it causes serious injury and is not permitted.
- Use four people even for an UNoccupied bed



Bloodborne Pathogens

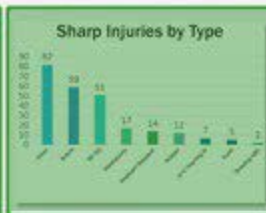
Source Patient Testing

- As of July 2015, Florida HIV Testing Statute no longer requires informed consent from the source patient for HIV testing following exposure of a healthcare worker.
- Only EHS, Clinical Administrative Supervisor, or the Infectious Disease physician can order lab testing of the source patient.
- **IMPORTANT REMINDER** - Per Florida State law, no documentation pertaining to BBP exposures is allowed on a source patient's medical record.

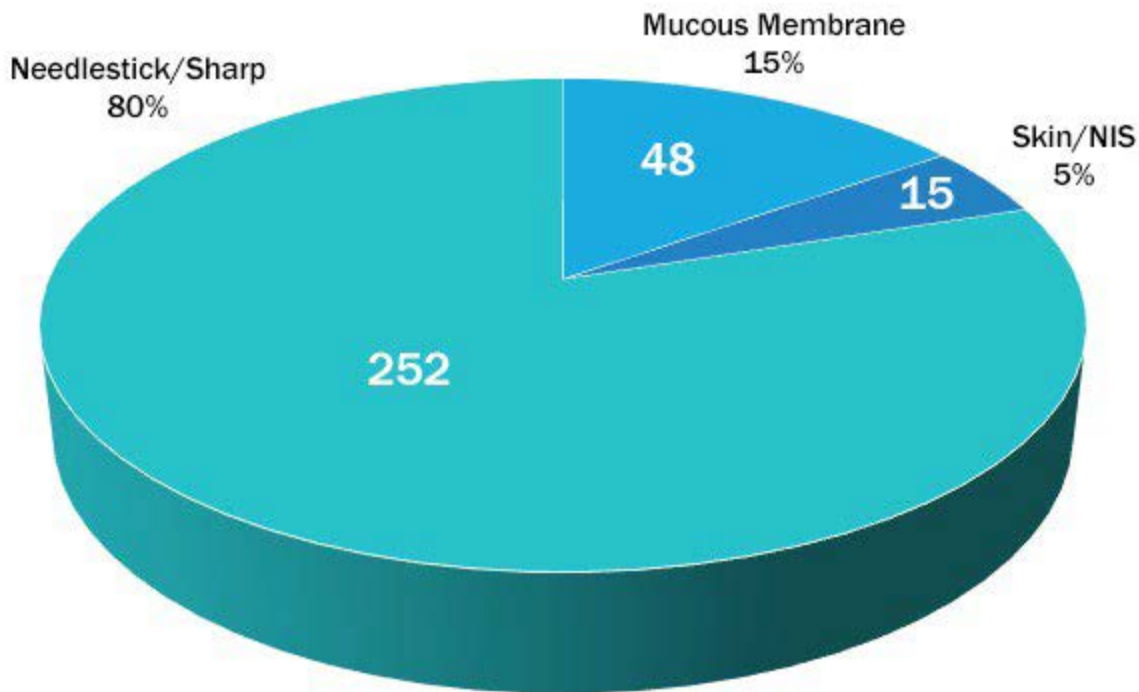


Statistics

Click each thumbnail to view each chart.

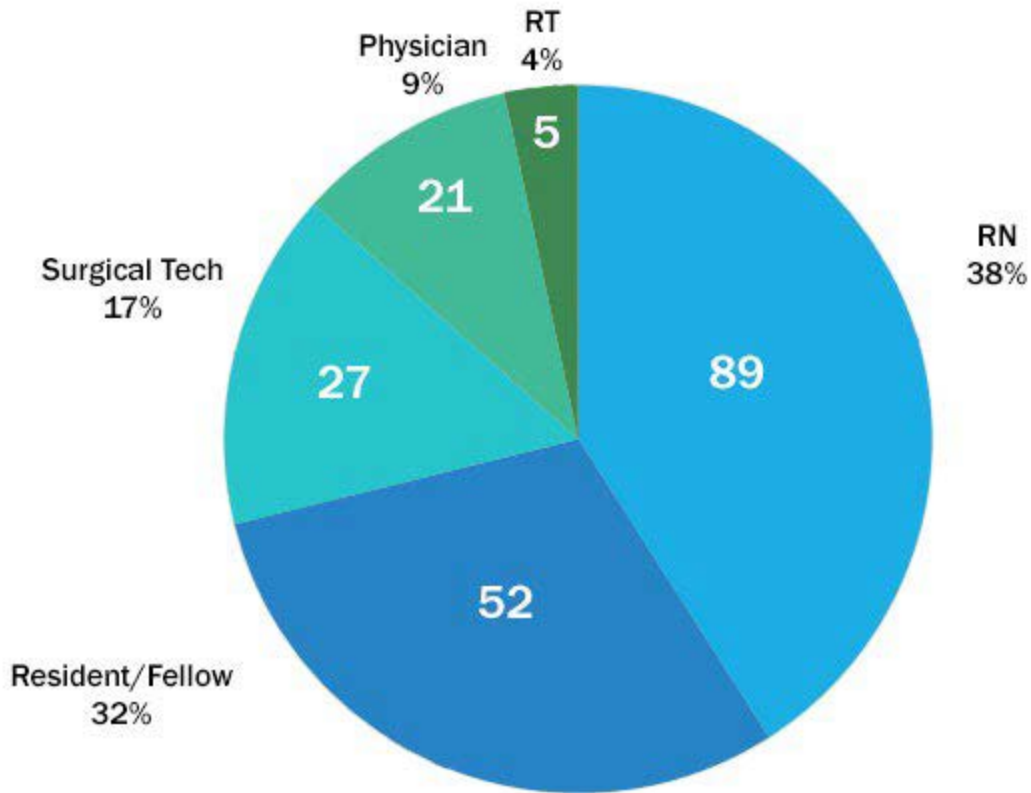


Total = 315



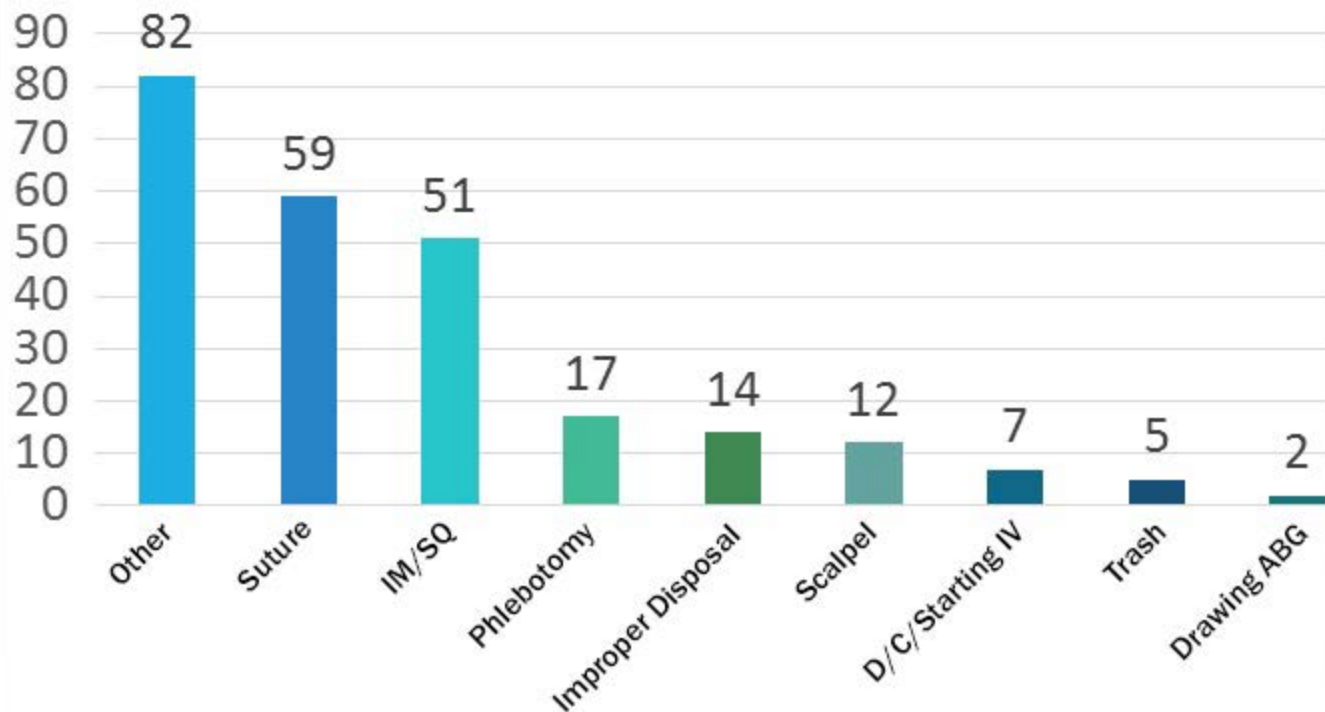
Source: TGH Team Member Health

Sharp Injuries by Occupation



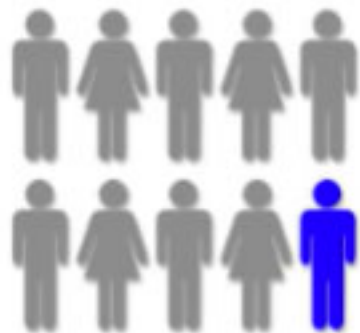
Source: TGH Team Member Health

Sharp Injuries by Type



Source: TGH Team Member Health

1 in 10



wash their hands
after using the toilet



1 in 4



have fecal matter
on their hands



Hand Hygiene



Palm to Palm



Fingers Interlaced



Between Fingers



Back of Hands



Base of Thumbs



Back of Fingers

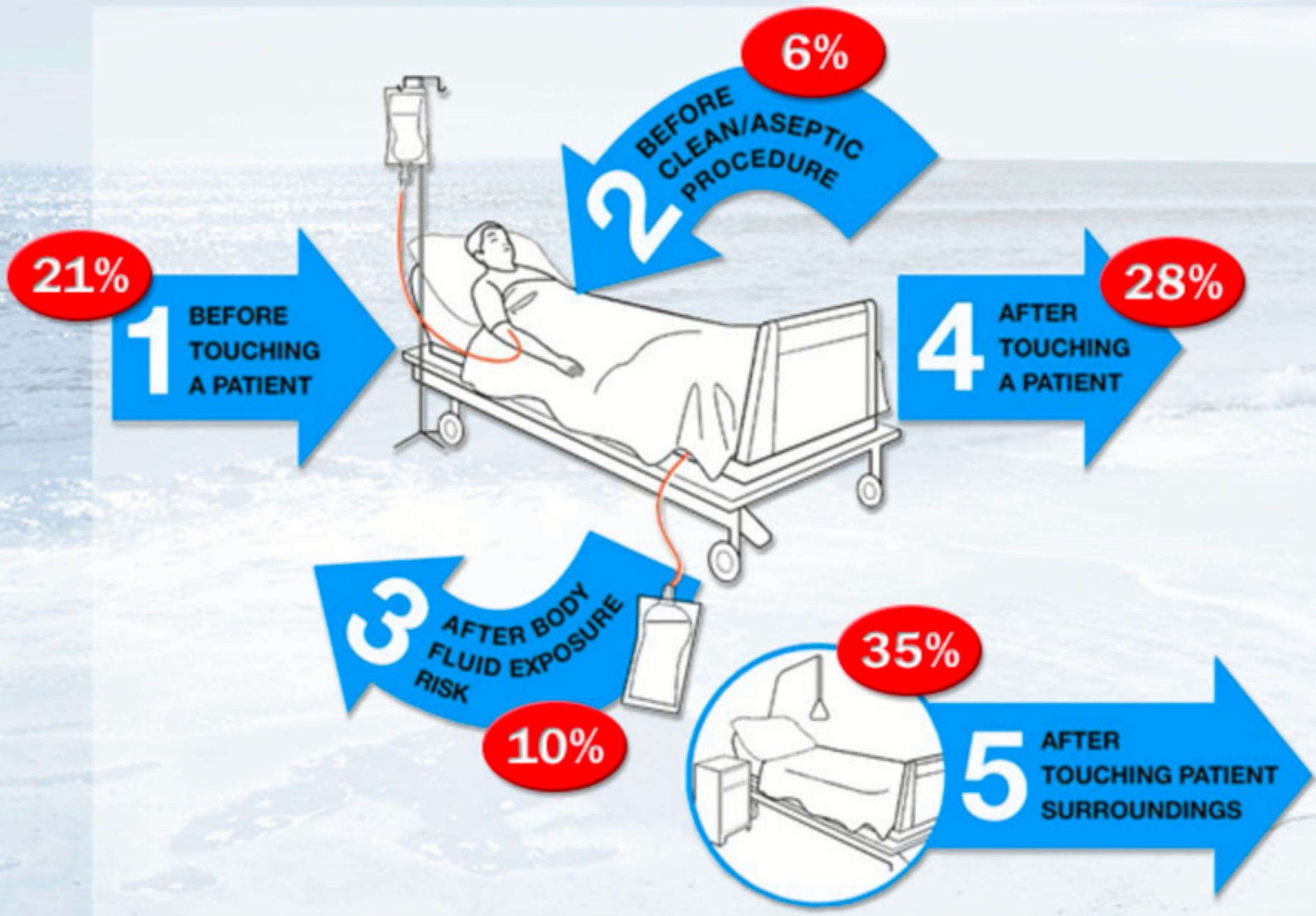


Fingernails

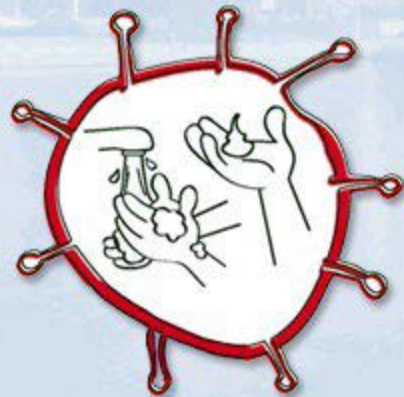
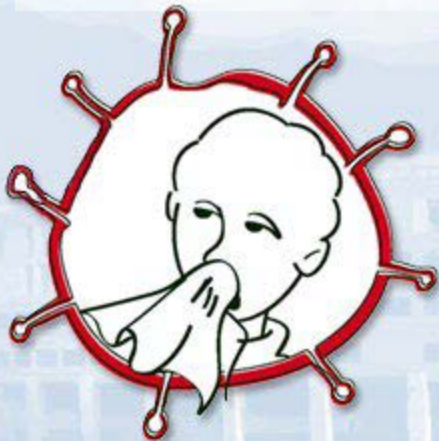


Wrists

Hand Hygiene



Respiratory Etiquette



Influenza

Signs & Symptoms

- Fever or chills
- Fatigue
- Muscles ache
- Cough, sore throat

Risk Factors

Transmission

Prevention

- Vaccination
- Respiratory etiquette

Tuberculosis

Latent

Infection

- *Can not* infect others
- Does not look or feel sick
- May develop active TB

Risk Factors

- Weakened immune systems (e.g. HIV)
- Close living conditions (e.g. jails, homeless shelters)

Transmission

- Airborne Droplets

Prevention

- Isolation – Airborne precautions

Active

Disease

- *Can* infect others
- Symptoms usually present

Waste Disposal

Red Biohazard Bags

Sharps Container

Clear Bags

Soiled Utility Rooms

Linen

Biomedical Waste (BMW)

Pharmaceutical Waste

- All syringes, needles, and scalpels, except irrigation syringes
- Plastic Angiocath-IV catheters and glass manometers
- Guidewires and any items with liquid that cannot be solidified go in leak-proof containers



Pharmaceutical Waste Disposal

X

Syringes containing partially administered non-controlled medication such as IV bag & tubing, pills, ointments/creams, capsules

Discard in **BLACK** (Universal Pharmaceutical Waste UPW) container. Use black sharps bin if applicable.

Partially used medication labeled "Special Disposal Required: Return to Pharmacy"

Place in plastic bag and put in designated return bin or tube to pharmacy. These medications require a special disposal bin.

Maintenance fluids and empty containers (eg saline, dextrose, dialysis solutions, electrolytes solutions, TPN)

Discard fluid in sink and place non-sharps containers in regular trash. **Place empty sharps in RED bins.**

Controlled substances

Discard waste in white, secure, controlled substance container. Place empty sharps in red bins.

Chemotherapy

Discard trace (less than 3%) in yellow (Hazardous) container. Discard bulk volumes in black bin.



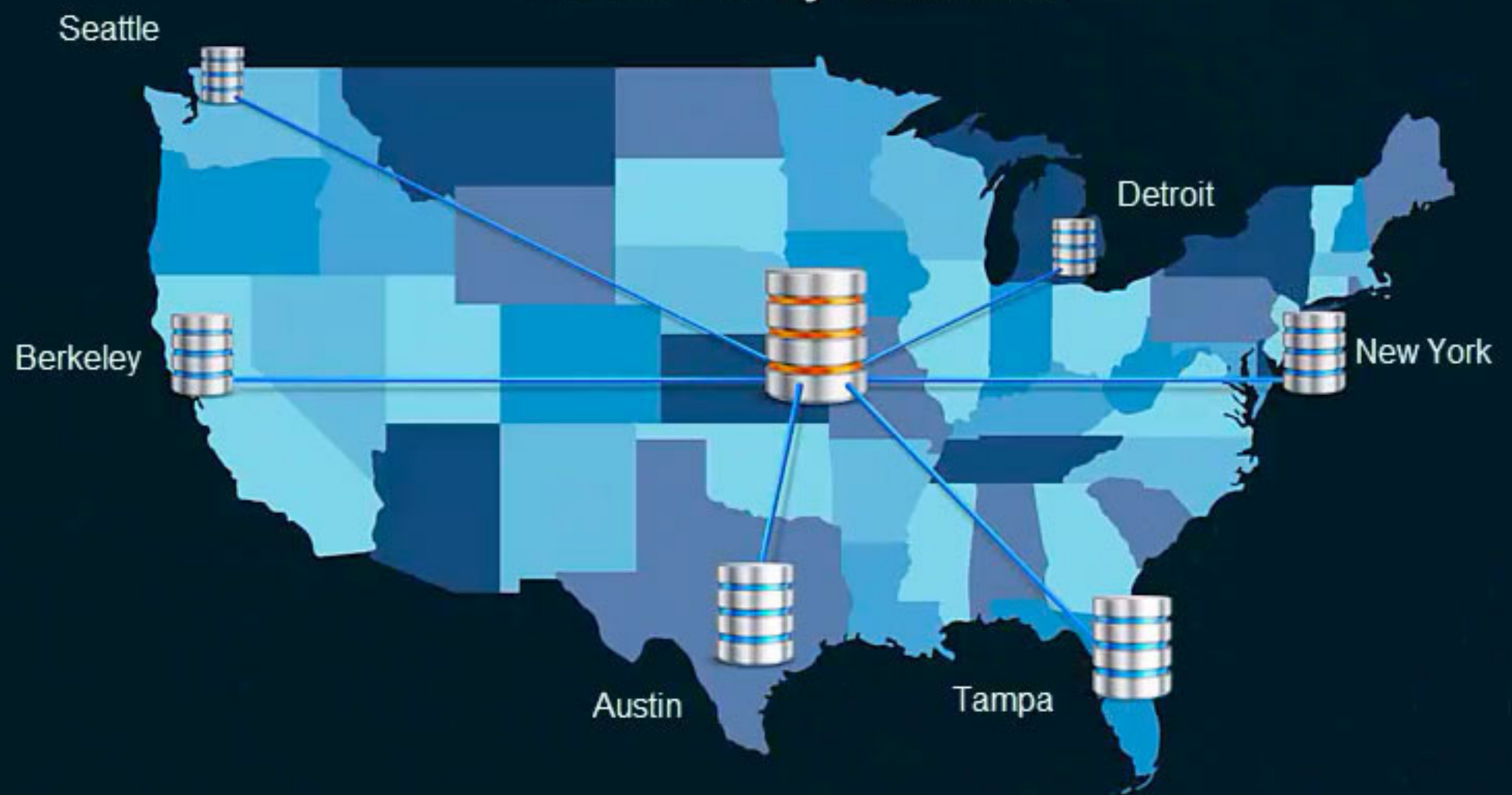
FOCUS PDCA



Patient Safety



Network of Patient Safety Databases



Roles of Patient Safety



PROACTIVE

Avoidance & Prevention

REACTIVE

Event Reporting

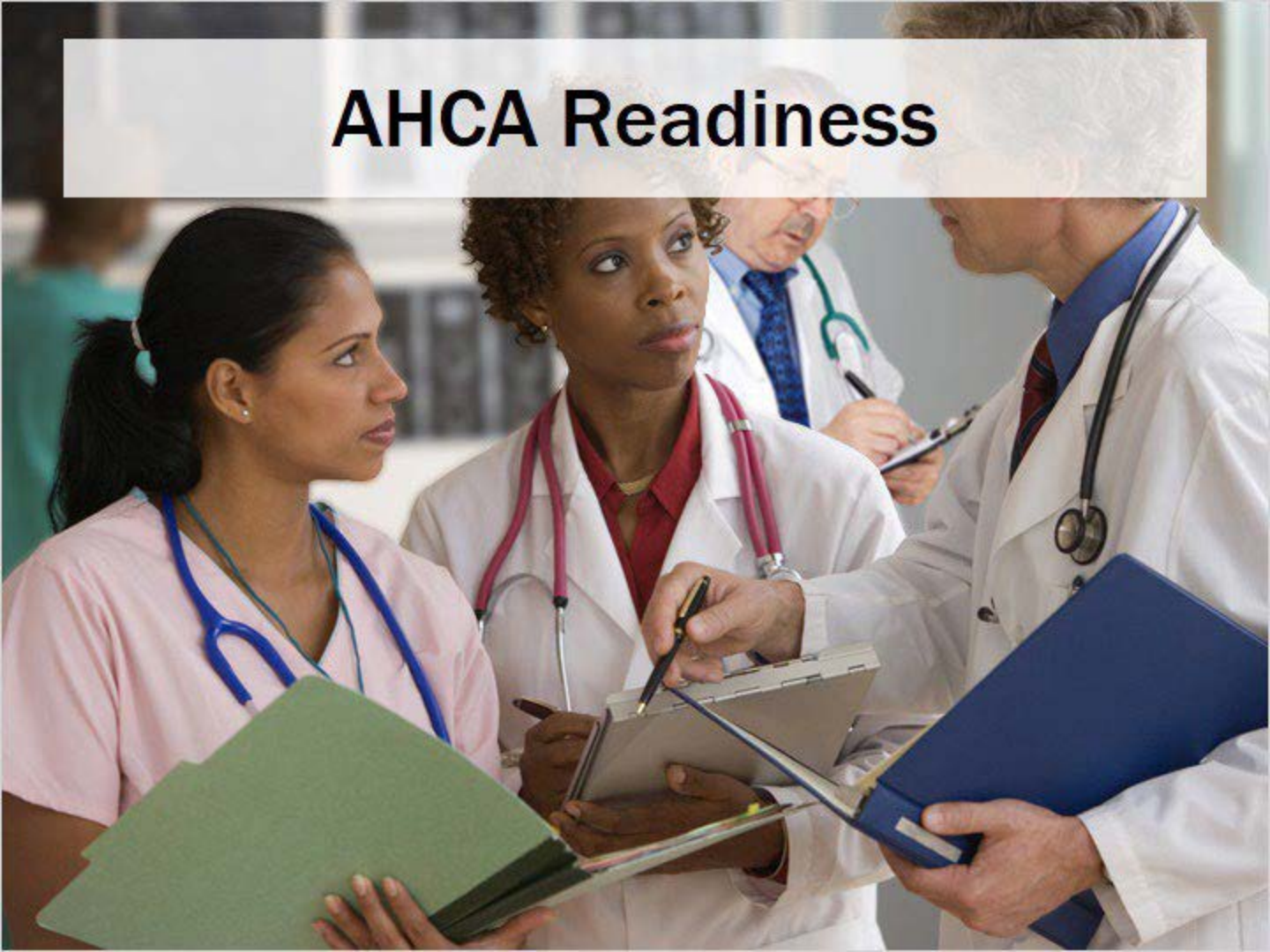
PROACTIVE

AHCA Readiness

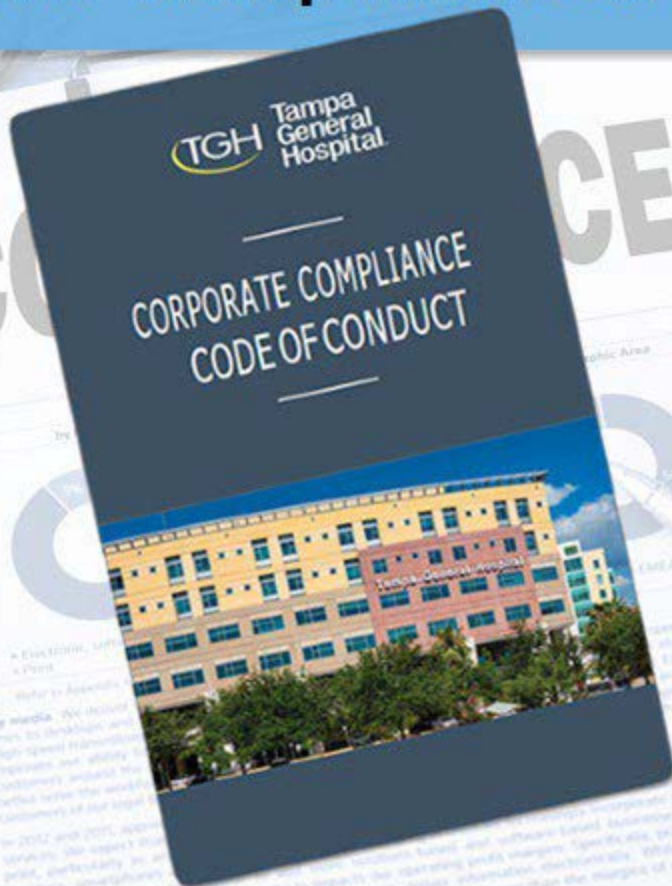
REACTIVE

Claims & Litigation

AHCA Readiness



Corporate Compliance & Privacy



577.9X	531.58
572.17	536.82
572.18	538.98
568.78	539.38
54.763	539.46
54.788	539.93
54.578	535.48
54.678	539.74
54.261	531
54.378	
51.907	
53.746	
51.882	
51.872	

CO
CE

Electronics, Ltd.
* Print

By means of the...
high-speed...
improves the ability...
customers instead the...
benefit rather the world's...
Continuity of our legal...

in 2012 and 2011, approx...
services, also helps to...
print, particularly in a...
flexible, unambiguous...
the impact...

...software and...
...integrate...
...connected to...
...technology into their...
...customers to...
...products, generally...
...mechanically. While the solutions benefit...
...the margins of our price products and...
...recurring...

Fraud, Waste and Abuse Laws

False Claims

Self-Referral

Anti-Kickbacks

Civil Monetary Penalty



Electronic, Software & services
Print

Refer to Appendix A for additional
By month, the dollar value of our
lines, by service and number of
high-speed transactions tend to
improve our ability to supply
customers and the world in a
better way than the world needs it
Customers of our legal business.

In 2012 and 2011, approximately
services, our sales and growth of
print, particularly in an electric
devices, smartphones, and all
devices, we expect to 2012

Fraud, Waste and Abuse Laws

False Claims

Self-Referral

Anti-Kickbacks

Civil Monetary Penalty

Self-Referral Law (Stark Law)

Prohibits referrals by physicians or family members who have a financial relationship with the entity being referred to.

- Physical & Occupational Therapy
- Radiology
- Radiation Therapy
- Parenteral and enteral nutrients
- Prosthetics and orthotics
- Home health
- Out-patient prescription drugs

Conflict of Interest

A Conflict of Interest is ...

Any action, investment, interest or association that might interfere or be perceived to interfere with your independent exercise of judgment in the interest of your employer.

Exercising authority in any way that could benefit you, a relative or friend and not serve the best interest of your employer.

Safety & Security

Roles & Responsibilities

- Campus Dynamics
- Security Services
- Security by Design
- Self-Defense, De-escalation
- Department-specific training
- Disaster Training
- Domestic Violence Assistance

**For Security Escorts
Call 844-7363**



Anytime.



Black: Bomb Threat

Yellow: Missing Patient

Blue: Cardiac Arrest

Orange: Chemical Spill

Brown: Autopsy

Pink: Infant Abduction

Gold: Stroke Alert

Purple: Patient or Staff Injury

Gray: Unruly Person

Red: Fire

Green: Disaster

White: Utilities Outage

Missing Patient

A patient is missing that may harm themselves or others

- Dial 844-7777
- Give patient's initials, age, and unit
- Search all areas
- Send someone who can identify patient to watch main entrance of hospital
- Complete Event Report

Hurricane Planning



- Attendance Policy
- Hurricane Form
 - Team A – Response
 - Team B – Recover
 - Team C - Resource
- Response Team supplies include:
 - Clothing
 - Snacks
 - Sleeping bag
 - Bedding
 - Towels
 - Medications

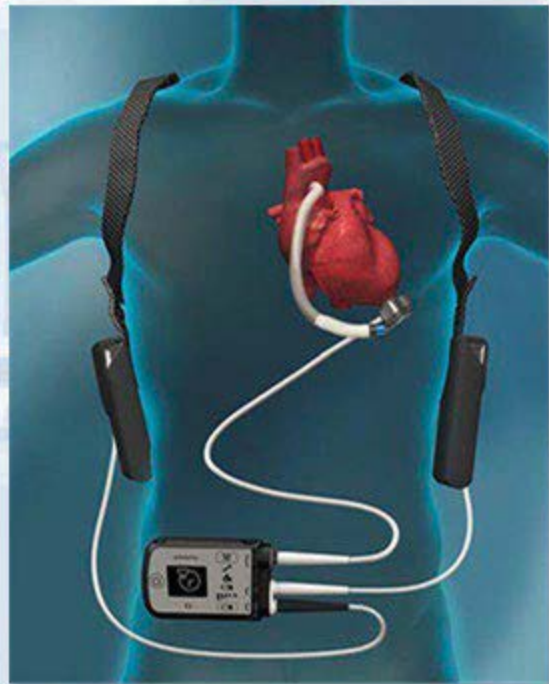
Ventricular Assist Device (VAD)

A VAD is a mechanical pump used for patients with advanced heart failure. The heart pumps are surgically placed with an external component worn on the outside, including batteries.

- Patients and caregivers have extensive training
- For further consultation, contact (24 hrs) the VAD Coordinator at 1-866-TGH-VADS

EMERGENCY SITUATIONS

- Do **NOT** perform chest compressions unless the VAD is not working.
- Always ask: "How can I help?"
- If moving patient, assure that all equipment *remains attached.*



Drafting





Oops!

**It looks like you
didn't choose a path.**

I don't know where to go!

Your path determines which slides you'll see and
which questions you'll be asked during the assessment.

Return to the path selection slides by clicking NEXT or [right here](#).



Your path doesn't require this section.

Click here to watch it for your personal edification and enjoyment.

Click **NEXT** to resume your track.

SHOW MENU



Introduction



The patient is an 87-year-old male admitted for a UTI. You have medically cleared him for discharge but the wife doesn't feel he's ready and wants him to stay.

Choose a response

"I've examined him, I've reviewed the test results, and, based on that, I've cleared him so, why do you feel he's not ready?"

"Based on my examination and the test results, I've cleared him. I've been doing this a long time and I've worked with many patients just like this. I assure you, he's fine."



A 23-year-old male patient you've noticed in the ED before repeatedly states he is still in pain despite multiple interventions, specifically requesting Dilaudid and only through an IV.

Choose a response

Given the interventions in place, he must be in severe pain and based on the specificity of the request, has likely received it in the past.

GRANT THE PATIENT'S REQUEST

Based on the specificity of the request, the patient might have specific reasons for it. It's possible he knows something you don't.

ASK THE PATIENT FOR REASON

Given the interventions in place, he should be fine and based on the specificity of the request, is likely a drug-seeker.

DENY THE PATIENT'S REQUEST