UNIVERSITY
MEDICAL CENTER
OF EL PASO

To **Heal,** to **Serve** and to **Educate.**

Student Orientation

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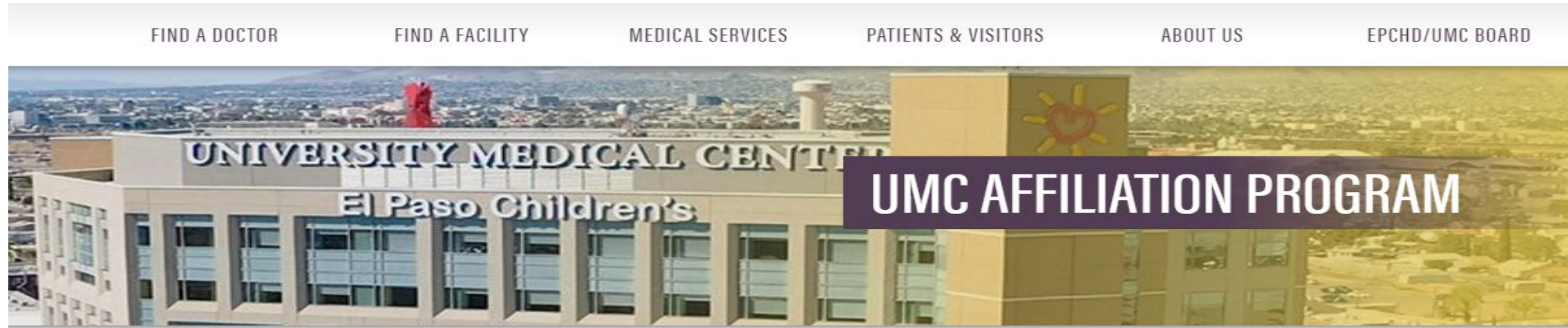**veronica.valenzuela@umcelpaso.org**

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UMC Map

On-Line UMC Student Orientation

www.umcelpaso.org/ReturningStudents

Vitals
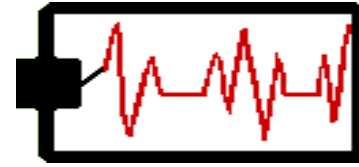
- Joint Commission Accredited
- 354 licensed beds
- 479 licensed physicians
- 3,990 Associates
- 118,802 ER visits
- 20,254 admissions
- Level I Trauma
  - 3,994 Trauma Cases
- 1.7 million lab test
- 55,577 rehab visits
- 200,313 imaging procedures
- 2,849 births

- 13,629 surgeries
- 657,176 Outpatient Prescriptions
- *3.2 million inpatient RX doses*
- *Outpatient Clinics*
  - 1,030,174 Outpatient Visits
    - **UMC – East**
      1521 Joe Battle Blvd.
    - **UMC – West**
      6600 North Desert Blvd.
    - **UMC- Surgical Hospital**
      1416 George Dieter Dr.

- 1,300 students

El Paso County Hospital District (EPCHD)
Code of Conduct

- https://www.umcelpaso.org/files/CODE_OF_CONDUCT_BOOK_Update_04_11_23.pdf

- The *Code of Conduct* has been adopted by the El Paso County Hospital District.

- Any references to the hospital district, it's policies and procedures, or it's Associates include those of all entities:

    - UMC Hospital
    - UMC Neighborhood Clinics
    - El Paso Health
    - University Medical Center Foundation
    - Surgical Hospital

El Paso County Hospital District (EPCHD)
Code of Conduct

- The *Code of Conduct* applies to all Associates, Contract Personnel, **Affiliated Students**, **Clinical Faculty**, Volunteers, Medical Staff, Residents, and the Board of Managers.

- It is your job to report an incident if you feel the code has been violated.

- EPCHD will not allow retaliation for good faith reporting.

Mission

UMC's mission is to heal, to serve, and to educate.

Vision

UMC's Vision is to be the first choice for healthcare in the Southwest.

Values

Our values are our guide to how we will always act as we carry out our day-to-day responsibilities. Our values spell out C.A.R.E.S. which is what we do:

- **C**ommunity – Pursue access to healthcare for all members of our community.
- **A**ccountability – Embrace responsibility for the outcomes resulting from our choices and actions.
- **R**espect – Treat everyone with dignity and compassion.
- **E**xcellence – Provide the highest quality of care.
- **S**ervice – Exceed customer's expectations every time.

Quality of Care and Improvement Reporting

- We promote quality improvement activities throughout the hospital to ensure that high quality care is delivered.

- We will work as a team to meet the physical, psychosocial and cultural needs of our patients.

- We will protect the integrity of clinical decision-making without regard to financial matters.

- We will provide patients with the information they need to make knowledgeable decisions.

*Prior to entering a patients room, please knock, greet, introduce yourself to the patient, let them know you are a student and ask if it is okay that you provide care.

Quality of Care and Improvement Reporting

- We will treat patients in a manner that preserves their dignity, autonomy, self-esteem and civil rights, and that promotes involvement in their own care.

- If there is a language barrier, please ask for a Qualified Medical Interpreter. Medical Interpreters are Associates who have received medical interpreter training.

- Anyone who is not a Qualified Medical Interpreter is not allow to do medical interpretations.

If you need interpreter services please notify the HUC or unit receptionist.

Quality of Care and Improvement Reporting

- Patient Finances will inform patients about the Hospital District's charges and services.

- We expect **all** to maintain integrity and quality in their job performance.

Example of Integrity in Action

Are you supposed to accept any type of gift from a patient and/or family member?

- Two Nursing students received a $100.00 monetary gift from a patient as a display of gratitude.

- Both students made a "Choice" to maintain their integrity and reported receiving the monetary gift to faculty. Money was return to the patient.

No, you cannot accept any type of gift!

Standards of Care

- We will provide patient care that meets or exceeds acceptable clinical, patient care and safety standards.

- We will maintain complete records of patient information to ensure continuity of care and to meet the requirements stated in policies, regulatory standards and applicable laws and regulations.

Standards of Care

- We will monitor the quality of care provided to ensure that clinical standards are being met and policies and procedures are being followed.

- We expect all students to report problems (deficiencies or errors) to those who can properly assess and resolve the issues.
  - *We encourage students to ask questions to avoid deficiency or error.

Abuse and Neglect

Abuse on EPCHD Grounds

- Any professional or individual with knowledge of abuse occurring on EPCHD grounds shall report the case to the Texas Department of Family and Protective Services (as appropriate) and to:
  - Preceptor
  - Care Management Department
  - Risk Management Department
  - Guest Services Department
  - Human Resources
- Any professional or individual with knowledge of abuse occurring in a state-licensed facility shall report the case to the Texas Department of Aging and Disability Services (DADS) at   1-800-458-9858
  - Examples of state licensed facilities: hospitals, nursing homes, foster homes, psychiatric centers, adult day care centers, state mental health facilities, independent living facilities, and Texas Youth Commission

Legal and Regulatory Authority

- We are committed to an environment in which compliance with rules, regulations, and sound business practices is woven into the corporate culture.

- We accept the responsibility to aggressively self-govern and monitor adherence to the requirements of law and to our *Code of Conduct*.

Reimbursement for Services Performed
(Charges, Coding, Documentation, and Billing)

- We will ensure that documentation, charging, coding and billing are performed accurately.

- We will also ensure that there is documentation to support the services performed and the amounts billed.

- Communication among University Medical Center clinicians, coders and billers is necessary to ensure accurate and correct information, billing and reimbursement.

Accreditation and Surveys

- We are committed to being in full compliance with the standards established by The Joint Commission and all regulatory and accreditation agencies.

- Survey Readiness – Tracer Methodology
  - What is the orientation process for instructors and students?
  - Hospital National Patient Safety Goals
  - Where are policies located?

Policies and Procedures

■ Policies and procedures can be found on the University Medical Center Intranet site Homepage

   ■ From any in-house computer, click on the Microsoft Edge

   ■ Click on Policies & Procedures; then begin your search

Hospital District Environment

Safe and Healthy Work Environment

- The Hospital District employs qualified, reliable, honest, trustworthy and non-violent individuals. Background screening must be performed and in accordance with our rules for disqualifying offenses under Hospital District policy.

- The Hospital District is committed to providing an environment that is free from alcohol and illegal drugs, and to taking reasonable measures to ensure that alcohol and drug use does not jeopardize the safety and health of our patients, visitors, Associates, contract personnel, volunteers, affiliated students or the public.

Hospital District Environment

Safe and Healthy Work Environment

- Providing a healthy and smoke free atmosphere.

- **Housekeeping is everyone's responsibility**.
  - Drinks and food are not allowed in the units/departments or hallways.

Hospital District Environment

<u>Workplace Conduct</u>

- We are committed to treating each other with respect, dignity and courtesy.

- We will not tolerate any type of workplace violence. That includes verbal, non verbal, written, or physical aggression; threatening, intimidating, harassing, or humiliating words or actions; bullying; sabotage; sexual harassment; physical assaults; or other behaviors of concern.

- Violent act or threats of violence are strictly prohibited by Hospital District Associates and it's affiliates. We model a **ZERO** tolerance for workplace violence.

Disorganized backpacks- trip & electrical hazard

Do not misuse Hospital District equipment or property and take all necessary precautions to safeguard it.

Water bottles on desk & feet on the desk not permitted

Help provide a safe environment

Sitting on the counters not appropriate
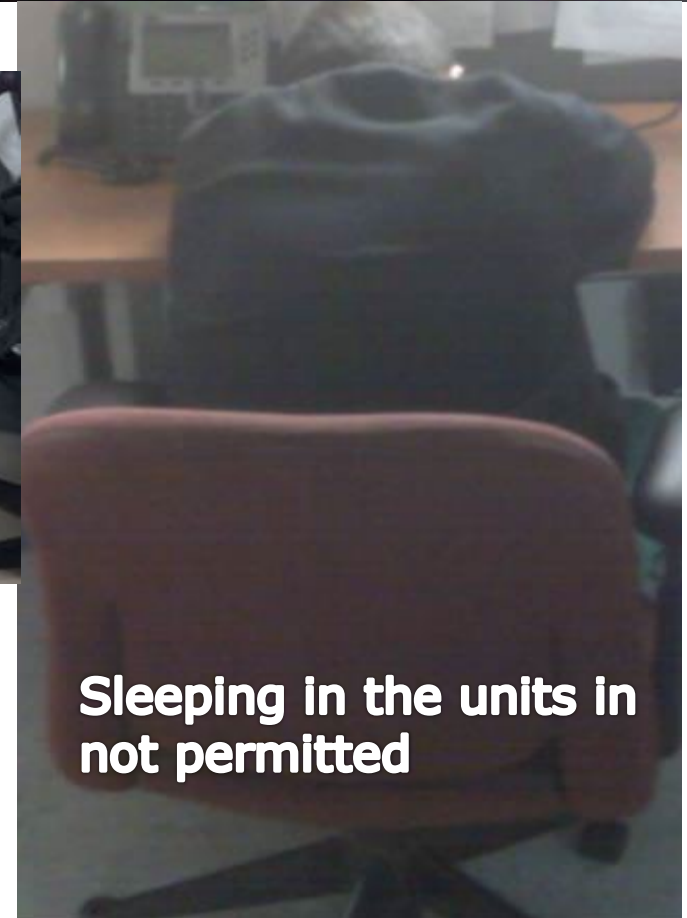
Sleeping in the units in not permitted

Inappropriate use of chair

Compliance Program and Code of Conduct Purpose

■ The Hospital District has implemented a formal Compliance Program designed to prevent and detect violations of federal or State law in the conduct of the Hospital operations by Associate, physicians and agents.

■ The effectiveness of the Compliance Program depends on each Individual's willingness to bring issues to the attention of his or her supervisor or the Compliance Officer.

Compliance Program and Code of Conduct Purpose

- All actual or suspected compliance issues must be reported.

- We encourage good faith reporting and understand that there are times when you may want to be anonymous.

- The Compliance Anonymous Hotline is available 24-hours-a-day, seven-days-a-week for phone calls.

- UMC INTRANET SITE "24-hour compliance"

Compliance Hotline 1.888.310.3434

Code of Conduct

Process to Notify the Federal or State Government

Regarding Reporting Fraudulent Activity:

Office of Inspector General (OIG)

Hotline Reporting

1.800.436.6184

[**www.hhs.state.tx.us/**](http://www.hhs.state.tx.us/)

If you have questions about how to file a complaint, you may contact

The Joint Commission at

(800) 994-6610

Confidentiality of Patient Information
(Code of Conduct)

- Health Insurance Portability and Accountability Act is a federal law that passed in 1996 and required the creation of national standards to protect sensitive patient health information (PHI) from being disclosed without the patient's consent or knowledge.

- The HIPAA Privacy Rule refers to protection of an individual's health care data and the safeguards that must be implemented.

- Contact the Compliance Hotline for any Patient Right/Privacy concerns.

Confidentiality of Patient Information *(Code of Conduct)*

<u>Reminders:</u>

- You cannot access your own medical record or the medical record of a family member.

- Students and Associates do not have the right to any patient information other than is necessary to perform your job.

- Verbal consent from a family member to access their medical record is not allowed.

To access your own medical information, follow EPCHD's established hospital process:

1. Sign/Log in to patient portal: CLICK HERE

2. Fill out the Medical Records request form for a copy of your medical information: CLICK HERE

Confidentiality of Patient Information
(Code of Conduct)

■ Healthcare providers' obligation to protect patient health information includes all formats: **written, electronic and oral communication**. PHI may not be discussed in front of a patient's family, friends and/or visitors without the patient's permission. You should ask individuals to momentarily leave a patient's room while you discuss the patient's health information/condition with the patient.

■ All information regarding patient is privileged, whether spoken, written, or electronically. We ask that you be cautious where and to who you speak. When discussing patients you must be in a secure area (conference room, staff lounge, etc.) and not in a public area (do not discuss: hallways, elevators, cafeteria, social media i.e. Facebook, twitter etc.). Treat all information as private and confidential. Only share information with those involved in the care of the patient.

TikTok Trend

- [4 Atlanta nurses fired over disrespectful tiktok post (youtube.com)](youtube.com)

Social Media and PHI

Social Media: Never share PHI on any form of social media (Facebook, YouTube, Instagram, Twitter, Snapchat, etc.)

News Media: Never share PHI with any member of the news media. These requests should always be referred directly to **Public Affairs Department.**

Protect Written Personal Health Information

■ PHI should be disposed of properly in the confidential trash bins and not in open trash cans.

- **Medical records**
- **Wristbands**
- **Prescription bottles and medications**
- **Lab report**
- **List of patients being treated**
- **Billing statements**

Code of Conduct

- In keeping with the commitment to provide the highest quality care to the El Paso Community, it is **your** responsibility to know and follow the Hospital District's *Code of Conduct.*

- Failure to comply, may **disqualify** you from participating in clinical rotations.

- *Code of Conduct* Manual is posted on the website www.umcelpaso.org

  Concludes Code Of Conduct

Code of Conduct Manual website: *www.umcelpaso.org*

Go to: www.umcelpaso.org   About Us   Code of Conduct

HCAHPS SURVEY
CUSTOMER SERVICE GOALS

- Communication with Nurses and Doctors,
- Responsiveness of Hospital Staff
  - During this hospital stay how often did the staff respond in a timely manner when you used your call bell?
  - During your Hospital stay how often did the staff assist you with your bedpan/bathroom as soon as you wanted?

    Response options are Always, Sometimes, Rarely or Never
  - **Goal: the reply to be <u>ALWAYS</u>.**
- Communication about medicines
- Pain Management
- Cleanliness and Quietness
- Discharge Management
- Overall Rating of the Hospital
  - (Scale from 0-10; **Goal 9 and 10**)
- Likelihood of Recommending

  "The Patient Experience starts with You!" Students please provide <u>exceptional customers service</u> while providing a safe and secure environment.

- Thank you!

NO PASS ZONE

The care of our patients is everyone's responsibility.

We are all expected to respond to our patient call bells when walking through the hallways.

Answer call bells within 3 rings

No Pass Zone

The Path to Patient Satisfaction

Call bell is Ringing → **Look up to see where it is ringing**

↓

Go to the patient room

↓

Knock before entering. Introduce yourself with name and department. Ask, "How may I help you?"

← **Is it something you CAN assist with?**

→ **Is it something you CANNOT assist with?**

Is it something you CAN assist with?

↓

Assist the patient with their need

↓

Turn off the call light. Place call bell and bedside table within patient reach. Ask if there is anything else you can do before you leave.

Is it something you CANNOT assist with?

↓

Let the patient know you are unable to assist with that request, but you will find someone who can help.

↓

Go to the nurses station and notify the unit clerk. Or notify the nurse or nursing assistant.

← **Return to patient room and let them know you notified someone who can assist them. Ask if there is anything else you can do before you leave.**

The Path to Patient Satisfaction

- Student when answering a call bell stay within your scope of practice.

Culture of Safety

BECAUSE WE CARE, DO NO HARM

What is Culture of Safety?

Although culture of safety has no universal definition, perhaps the best description is this:

"A safety culture exists within an organization when each individual, regardless of their position, assumes an active role in error prevention and that role is supported by the organization."

Joint Commission Zero Harm

- Zero Harm IS Achievable - YouTube

Culture of Safety

- Focus on prevention, not blame or punishment
- Focus on system vulnerabilities
- Follow rules/policies/procedures
- Training
- Preparation and planning
- Build "checks" into your routine
- Learn from errors

Report . . . Report . . . Report . . .

2025 National Patient Safety Goals

The Joint Commission

2025 Hospital National Patient Safety Goals

(Easy-To-Read)

Identify patients correctly

NPSG.01.01.01 — Use at least two ways to identify patients. For example, use the patient's name *and* date of birth. This is done to make sure that each patient gets the correct medicine and treatment.

Improve staff communication

NPSG.02.03.01 — Get important test results to the right staff person on time.

Use medicines safely

NPSG.03.04.01 — Before a procedure, label medicines that are not labeled. For example, medicines in syringes, cups and basins. Do this in the area where medicines and supplies are set up.

NPSG.03.05.01 — Take extra care with patients who take medicines to thin their blood.

NPSG.03.06.01 — Record and pass along correct information about a patient's medicines. Find out what medicines the patient is taking. Compare those medicines to new medicines given to the patient. Give the patient written information about the medicines they need to take. Tell the patient it is important to bring their up-to-date list of medicines every time they visit a doctor.

Use alarms safely

NPSG.06.01.01 — Make improvements to ensure that alarms on medical equipment are heard and responded to on time.

Prevent infection

NPSG.07.01.01 — Use the hand cleaning guidelines from the Centers for Disease Control and Prevention or the World Health Organization. Set goals for improving hand cleaning.

Identify patient safety risks

NPSG.15.01.01 — Reduce the risk for suicide.

Improve health care equity

NPSG.16.01.01 — Improving health care equity is a quality and patient safety priority. For example, health care disparities in the patient population are identified and a written plan describes ways to improve health care equity.

Prevent mistakes in surgery

UP.01.01.01 — Make sure that the correct surgery is done on the correct patient and at the correct place on the patient's body.

UP.01.02.01 — Mark the correct place on the patient's body where the surgery is to be done.

UP.01.03.01 — Pause before the surgery to make sure that a mistake is not being made.

Emergency CODES-Plain Language

Emergency Code number

5555

- PBX Operator will answer:

  "State Your Emergency Code/Alert Type"

- State the Event Type Clearly (Security, Medical, Facility)

- Give the operator the Exact Location of the emergency

- Stay on the line until the operator hangs up. This assures accuracy on the required information.

UNIVERSITY MEDICAL CENTER OF EL PASO — El Paso Children's

To report an emergency, dial **5555**:
State the **Alert Type, Event and Location**

Code Red	Fire / Visible Smoke
Code Blue	Cardiac Arrest

Security, Medical or Facility "Alert"

Alert type - Event - Location

Security Alert - Missing Infant/Child

Security Alert - Security Emergency

Security Alert - Active Threat

Facility Alert - Event Type

Facility Alert - HICS has been activated

SECURITY Assistance X44397 or 521-7672

PRIMARY EVACUATION	LATERAL TO A SAFE COMPARTMENT
Fire Response R. A.C.E.	Fire Extinguisher P.A.S.S.
Rescue	Pull the pin
Activate the alarm	Aim at base of fire
Contain the fire	Squeeze the handle
Evacuate/Extinguish	Sweep side to side

Emergency, OFF-SITE Locations

Emergency number

911

- For a medical or security emergency, call 911

- For a facility emergency, notify clinic management

Fire Alarm Activation

You will hear:

"Attention, attention, attention! Facility Alert, **CODE RED**, ...*location*... Remain where you are unless directed by staff."

FIRE ALARM ACTIVATION

Abduction / Missing

What you will hear:

"Attention, attention, attention! Security Alert: Missing *(infant/child/adult and description of age/gender, from location)*. Please notify the nearest employee if located."

ACTIVE THREAT

What you will hear:

"Attention, attention, attention! Security Alert, Active Threat *(description of person)* at *(location)*. Please remain clear from this area and seek an employee for instructions."

The Joint Commission or State Surveyor At Hospital

Welcome Announcement

You will hear:

Please Help us welcome: (Name of Surveyor at Hospital)

Disaster Plan

HICS Activation
Hospital Incident Command System

You will hear:

"Attention, attention, attention! Facility Alert, HICS has been activated."

Patient Flow

Operations Dashboard

Real Time Communications

Acuity

Scheduling

Departure Management

Emergency Team Responses

Medical Emergency Team (MET)

- MET responds to medical emergencies for anyone who is a NON-PATIENT on hospital property other than the ED or L&D.

- Report to PBX X5555- **When calling, specify if it is an adult or pediatric emergency and the location.**

- PBX pages out team

Maternal Response Team

- Maternal Response Team responds to a maternal event that occurs outside of L&D, OB Triage and Mother Baby Unit with the high likelihood of immediate deliver or risk to mother or fetus.

- Report to PBX X5555 Location and need for Maternal Response Team

- PBX pages out team

All hospital codes can be initiated by dialing X5555 from any hospital phone. Provide exact location and brief description of event. (915-544-1200 X5555 from a non-hospital phone) Code Blue can be initiated using the "Code Blue Button" in patient room.

Emergency Team Responses
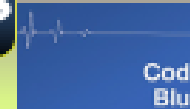
Rapid Response Team

- Immediate acute care expertise for PATIENTS who require immediate critical care in adult inpatient units.

- Any staff or family member or visitor can activate the RRT.

- Report to PBX-call X5555 Location and need for Rapid Response team

- PBX pages out team

Code Blue Team

- Resuscitation efforts for PATIENTS demonstrating evidence of cardiac and/or respiratory arrest.

- Any staff members can activate the Code Blue Team.

- Report to PBX-use "Code Blue" Button in patient room or call X5555 Location and report Code Blue

- PBX pages out team

All hospital codes can be initiated by dialing X5555 from any hospital phone. Provide exact location and brief description of event. (915-544-1200 X5555 from a non-hospital phone)
Code Blue can be initiated using the "Code Blue Button" in patient room.

Standardized Wristband Colors "Alert"

Remember to ask questions

Standardized Wristband Colors "Alert"

Mandated by State of Texas

Allergy (RED) – Information obtained upon assessment which communicates abnormal response of immune system upon intake of certain foods or medications.

DNR (Purple) – Do-Not-Resuscitate, formerly identified as CMO, Comfort-Measures-Only, communicates to all healthcare providers that a decision has been made that therapeutic measures will be directed towards a Category 3 as per Resuscitative Status Orders.

Fall Risk (Yellow) – Upon assessment and reassessment, the nurse will determine the patient's fall risk using the Fall Risk Assessment.

Recommended by the State of Texas

Limb Alert (Pink) – Some patients have past or current medical conditions that would prohibit the use of a certain extremity for various reasons. The "Pink" wristband will alert Hospital Associates to avoid this extremity for blood draws, intravenous insertion or other medical procedures. The restricted extremity wristband will be placed on the extremity that will not be used.

Latex Allery (Green) – Many products used in hospitals are made from latex and contact with these items can cause an allergic reaction. Other non-latex products will be substituted when a patient has a latex allergy.

Fall Prevention

Morse Fall Scale

Green Socks

< 25 = Low Risk

- Patient may ambulate independently
- Patient may leave unit
- Maintain Universal Fall Precautions

Yellow Socks

25 - 45 = Moderate Risk

- Patient may ambulate independently depending on the nurse's assessment
- Patient must stay on unit
- Maintain Universal Fall Precautions plus yellow fall risk band and falling star sign

Red Socks

> 45 = High Risk

- Patient needs assistance at all times when getting out of bed/chair
- Bed/Chair alarms required
- Patient should not be left unattended when out of bed or in the bathroom
- Maintain Universal Fall Precautions plus yellow fall risk band, falling star sign, and consider PSAAT evaluation as appropriate

Revised 9-2022

Dress Code

- School and UMC Dress Code is to be enforced by Clinical Faculty
  - Uniforms – clean, pressed, scrubs that are low, need to have undershirt, Socks are required at all times.
  - Comfortable, clean shoes will be worn while on duty. No open toes, canvas or shoes with unnecessary skin exposure (clogs, thongs, crocs and croc like) will be worn.
  - Denim or leggings are not permitted
  - Hair – pulled up and above shoulders, natural color
  - Makeup- should be modest and minimal

Dress Code

- Nails – Absolutely NO artificial nails, nail tips, silk wraps, acrylic overlays, gel or shellac nails are to be worn if performing patient care of any kind. Natural nails should be no longer than ¼ inch. If nail polish is worn, it should be clear or light in color without evidence of cracking, peeling or chipping. **(No nail polish to be worn in Dietary or Perioperative Area)**

- Body piercing – 1 pair of studs in earlobes (nothing dangly) **(Jewelry not allowed in the Dietary or Perioperative Area)**

- Tattoos are acceptable provided they are not racial, sexual and do not promote hate, speech, violence or depict attributes of a sensitive, offensive or legally protected nature. **Tattoos on the face or neck are prohibited.**

- Good hygiene

Surgical Attire for the Operating Rooms Policy K-53

Cover apparel such as a lab coat, cover gown, or other appropriate clothing will be worn when exiting the surgery department while in OR scrubs

Surgical Scrubs colors are misty green & burgundy

Surgical Scrubs should not be taken home

Identification Badge

UMC Extenders

- For Safety and Security reasons, all students and instructors must wear the School ID badge and UMC STUDENT/INSTRUCTOR extender at all times during clinical rotations.

- ID badge must be visible to all staff, patients and visitors. Students must wear the ID badge on the chest area in a manner in which the picture, name and title are visible at all times.

- UMC "STUDENT" ID badges <u>extender</u> (as example) will be issued by faculty and must be turned in to faculty at the end of rotation.

- Report lost ID badges and UMC extenders **immediately.**

- Required to obtain 20% discount in the UMC cafeteria only.

In Case of Fire:
R - Rescue
A - Activation Alarm
C - Contain/Close Doors
E - Extinguish/Evacuate

To Extinguish:
P - Pull the pin
A - Aim at the base
S - Squeeze the handle
S - Sweep side to side

"CODE" Emergencies Dial 5555
Code Blue - Cardiac Arrest
Code Red - Fire

In Case of Fire:
R - Rescue
A - Activation Alarm
C - Contain/Close Doors
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To Extinguish:
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S - Sweep side to side

"CODE" Emergencies Dial 5555
Code Blue - Cardiac Arrest
Code Red - Fire

U2018- 0027
FACULTY

E2018- 0022
EMT-B
STUDENT

COVID-19

- Hand sanitize at every entrance
  - Masks are optional.
  - Masks remain mandatory for medical staff, Associates, students, and visitors when entering patient care rooms in critical care areas-specifically ICU, CVICU, IMCU and Neuro ICU.
  - Personal Protective Equipment (PPE) requirements
  - Symptoms – report to faculty prior to reporting to rotation

Body Fluid Exposure & Needle Stick Incident

- **Report immediately to:**
  - **Instructor (follow educational institution protocol)**
  - Charge Nurse
- Contaminated exposures protocol needs to be followed immediately. UMC will test patient.
- Treatment options
  - University Medical Center - Emergency Department or UMC Neighborhood Clinic
  - Your private physician
- The student is financially responsible for the treatment

Hand Washing

- Strict protocols in all areas of the hospital

- All individuals are constantly being observed and surveyed

- Infection Control is notified

- Protocol

  - **Enter Patient's room- *no contact***

    - **Gel/Foam**

  - **Enter patient's room *and contact***

    - **Wash Hands 30 Seconds**

Electronic Devices

- Resources tool, only

  - Do not install or synchronize electronic device on any UMC workstations

  - Do not store UMC PHI, confidential, and/or sensitive information on electronic devices

  - Do not Connect electronic device to the network

  - Do not install USB

  - Do not photograph or take videos

  - Audit

  - Cellular phones- **Not allowed for calls or texting**

Cell Phones and Photography

Patient Care Areas – Restriction of:

- Cell Phones
- Photography
- Video

Taking picture of a patient is never okay. Students refer any request for photography or video recording to Management to handle. *Do not take pictures.* **Even if it is taken with the patient's mobile device**.

Patient photos/videos may only be taken with a UMC-supplied camera and a Consent to Photograph has been obtained.

Picture imperfect?
Hospital workers fired over photos

ALBUQUERQUE — Two employees at University of New Mexico Hospital have been fired for taking photos with cell phone cameras of patients receiving treatment and posting them to a personal social networking Web site.

Director of Public Affairs Sam Giammo said Sunday the photos — mainly close-ups of injuries being treated in the Albuquerque hospital's emergency room over the past few months — were posted on an employee's private MySpace page.

Giammo said he's never heard of a similar incident happening at UNMH or any other hospital.

Three to four other hospital employees were disciplined and the investigation is ongoing, he said.

UNMH values patient privacy "very, very highly and we will do everything we can to protect them," Giammo said. "We just won't tolerate unprofessional actions by any of our staff. We just won't stand for that."

The photos were discovered after a hospital supervisor received an anonymous tip about them photos Tuesday and launched an investigation.

Hospital managers personally oversaw the removal of the photos from the Web site and from the employees' cell phones, Giammo said.

"We have to rely on the people telling us that they don't have any others," he said.

The patients in the photos could not be notified that their pictures had been taken because their faces and personal identifying features had been removed from the photos, Giammo said.

Giammo said the MySpace page could only be accessed by the employee's online friends, not the general public.

Giammo said the employees who were fired violated a hospital policy that bans the use of cell phone cameras in patient areas. The other employees were disciplined for not bringing the photos to the attention of managers, he said.

The hospital is treating the matter as an employment issue and law enforcement has not been involved, Giammo said.

The use of cell phone cameras in hospitals have caused breaches of patient privacy or concern about such violations in California, Arizona and South Dakota in recent years.

In California, cell phones and laptops were banned in March at the University of California-Los Angeles' neuropsychiatric hospital to prevent them being used in a way that would violate patient privacy. The ban came after a patient posted photos of adult patients voluntarily posing for a group picture on a social networking Web site.

A surgeon at Mayo Clinic Hospital in Phoenix was fired last December for taking photos with his cell phone of a patient's tattooed genitals and showing them to colleagues.

And in 2005, a prosecutor in South Dakota decided not to file criminal charges against a surgeon who took a photograph of another doctor holding a female patient's leg during surgery.

Computer Access
(If Applicable)

- **IM-2 Password and systems access**
  - Keep your login information (account/password) private; it's your identity and/or footprint in a system and provides an audit trail.
  - No one should know your password, not even your faculty.
  - If you suspect that your password is known by someone else report it to I.T. Help Desk.

    (ext. 521-7941) immediately.
  - If you call the I.T. Helpdesk for assistance, do not provide them your password, if requested. They do not need to know this to assist you.
- **IM-4 Workstation and computing devices**
  - Do not leave workstations logged in and unattended; your login could be compromised.

Preceptor

- UMC Preceptor is defined as an Associate of UMC supervising a student
  - Two types of preceptors
    - General preceptor-supervises different students. On-site Clinical Faculty, Charge Nurse or Supervisor assigns preceptor
    - Designated preceptor - Supervises a designated student for a determined time and the student follows the preceptor's schedule (preceptor agreement is needed). Designated preceptor will be assigned through Clinical Faculty
  - Preceptors will provide direct supervision, instruction and feedback to students during their clinical rotation
  - On-site Clinical Faculty will assist
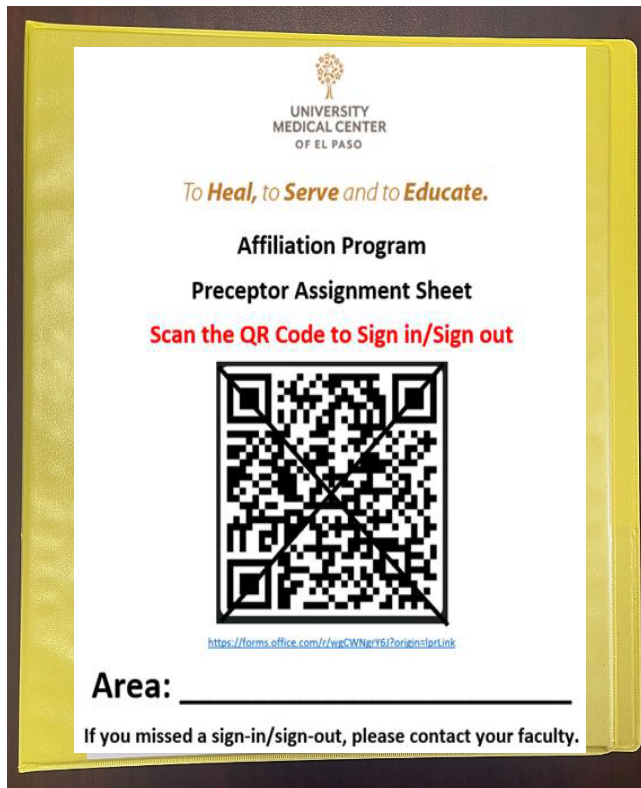
ARRIVING TO THE Unit-Department

- Notify the Charge Nurse/ Unit Supervisor or Shift Leader of your arrival
  - Introduce yourself as a **student** to Associates and Physicians
  - Comply with UMC dress code
  - Selecting patients (comply with dress code)
  - Sign in the "PRECEPTOR ASSIGNMENT SHEET"

PRECEPTOR ASSIGNMENT SHEET
is to be completed every rotation for students that do not have a designated preceptor.

■ The Preceptor Assignment Sheet is located in every Unit/Department and must be maintained in the unit/department. Please ask the Charge Nurse, Manager or your Clinical Faculty for the location

■ Scan the QR Code to Sign in/Sign out

■ Complete all required fields

■ If you miss a sign-in/sign-out, please contact your faculty

■ Only if you do not have a device, complete the preceptor assignment sheet inside the binder.

Family Emergency

- Please provide your family members **your instructor's** cell number, and/or your assigned Department Manager's contact information.

Parking for UMC

- Students/Faculty are to park at the **County Coliseum** if scheduled at UMC/EPCH from the hours of 5:30am to 11:00pm, Monday through Friday.
- UMC Shuttle Services:
  - Monday – Friday **5:30am-10:45pm** (allow 5-7 minutes for shuttles to arrive to pick up and drop off points). Shuttle services may be called at (915)521-7666 for questions or concerns.
  - Security will provide services from 10pm-6am by calling Security at 915-521-7672, 44397, or 1052.
- Students/Faculty are to park at the Associates garage 5th Floor:
  - Monday – Friday 6pm – 6am
  - Weekends – 24 hours
  - Holidays – 24 hours
  - Push the intercom button at the Associates garage on Alberta St. to gain entry.
  - Security provides an escort service 24/7 for all who do not feel comfortable walking alone. (Limited to areas within hospital grounds and parking garages.)
- Provide Security your name and school name.
- A placard will be issued and placed on the rear view mirror.
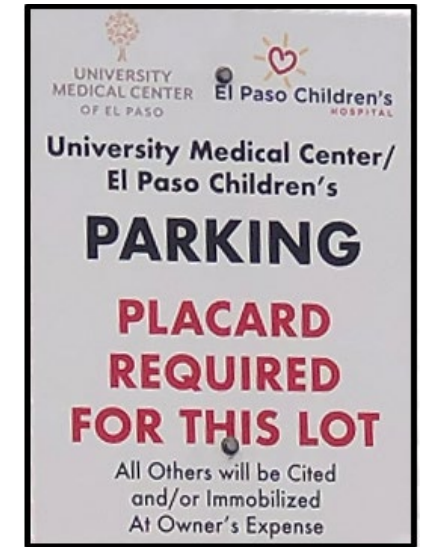
El Paso County Coliseum
4100 E. Paisano Dr. El Paso, TX 79905
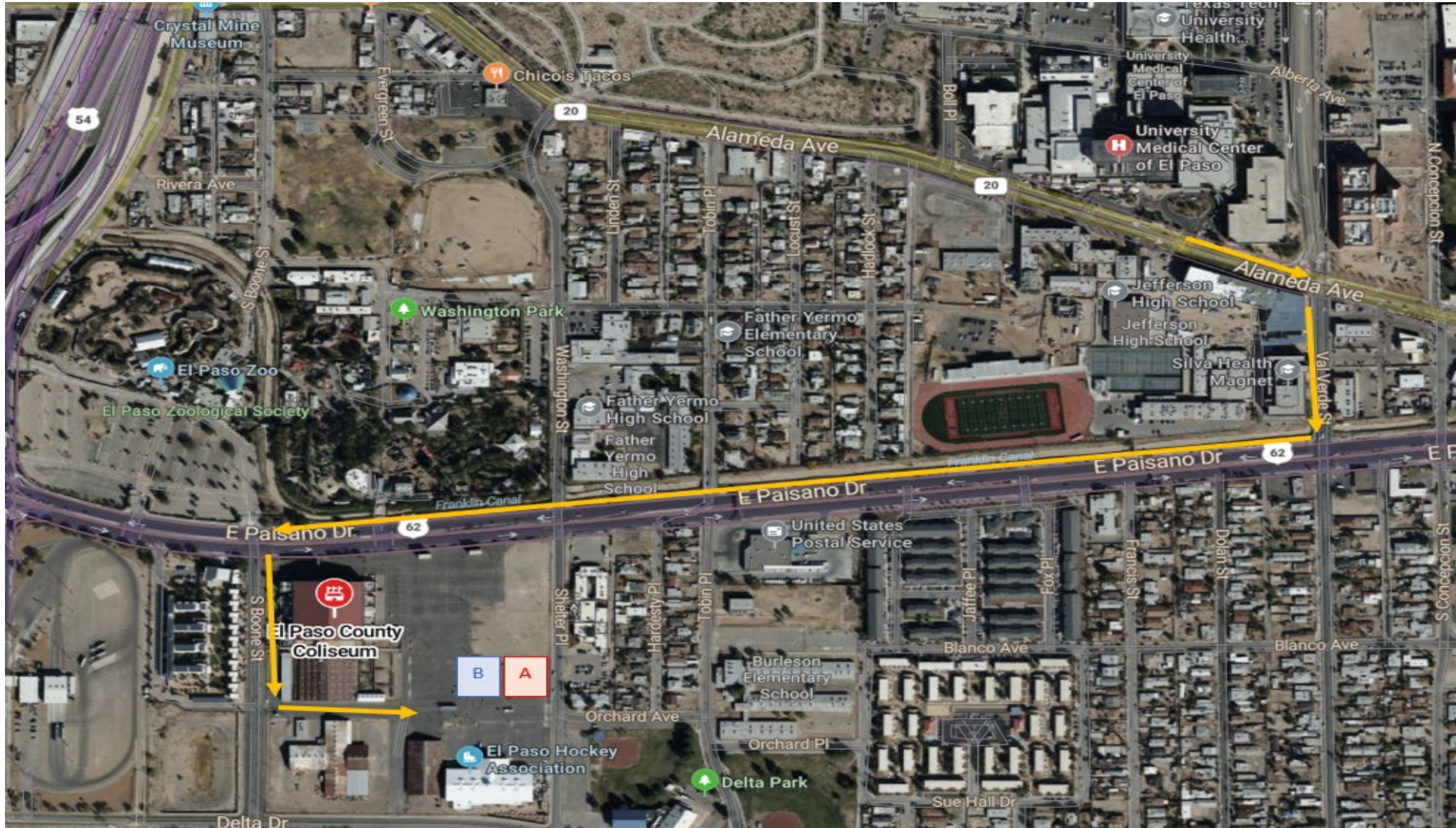
Associate Parking Garage Rules

DON'T	DO
Do not forget your badge, as it is required to gain access into the parking garage.	Please be prepared to display your badge at the entrance of the parking area to gain access. Being prepared can avoid long lines and waiting times.
Do not speed	The speed limit in our parking areas is **5 mph**. All vehicles are required to follow these limits. Please control your speed for everyone's safety.
Do not drive in the wrong direction as this practice is unsafe not only for pedestrians but for oncoming traffic. **Left turns only**	**See something, say something.** If you observe vehicles driving the wrong direction, double parked, backed into a parking space, and/or violating any other parking rules; contact Security at 521-7672 immediately to report it. **CITATIONS WILL BE ENFORCED AND WILL NOT BE DISMISSED**
Do not double park	
Do not back up into any parking space in the Associate's garage.	
Do not park in areas authorized for Handicap	
Do not park behind other vehicles	
Do not park and/or block: • Fire lanes • Striped areas • Reserved areas • Loading docks	

Parking Violations Targeted in Visitors Parking Garage

UMC's Security Vehicle is now equipped with a License Plate Recognition system(LPR)to identify and track unauthorized vehicles in the visitors garage. The license plate cameras will capture a still shot of vehicle license plates, track repeated offenders, and provide the information to security.

➢ Only Physicians, Directors, and Administrators are authorized to park in the visitors garage.

➢ Associates/Employee, students, and faculty who illegally park will be booted.

➢ Repeat offenders are subject to towing of vehicle and will be responsible for towing fees.

Parking Citations

- Parking citations are given to those who violate the parking rules.

- Citations are either $25 and/or $50 depending on the violation.

- Vehicles boots will be enforced for those parked in areas designated for visitors.   The fine of $250 must be paid in full to have vehicle boot removed.

- Citations may be issued for more than one violation at one time and may increase fees.

- Citations must be paid at the cashiers window in the main lobby and the receipt taken to Security on the 3rd floor Annex building.

Student Expectations

- Students are expected to take ownership of their own learning

  - Be prepared

    - Know your objectives/skills checklist; have them available and communicate objectives to your preceptor

    - Your on-site faculty is available to assist

- Community Wide Orientation: Is completed initially and annually thereafter

- Maintain immunization current and CPR

- Wear school ID Badge and UMC "STUDENT" Extender AT ALL TIMES during your clinical rotation

- Complete Preceptor Assignment Sheet every rotation

- Comply with Code of Conduct, Policies and Procedures

- Park in the designated parking area for your clinical rotation

Associate/Employee Expectations

- Associates/Employees that are in a role of a student or faculty are expected to follow the process below:

  - Function in the respective role whether student or faculty. (Stay within your scope of practice as a student/faculty while conducting rotations).

  - Park at the coliseum and comply with the student/faculty parking process.

  - Do not utilize your Associate/Employee ID Badge to access the facility/facilities while in your student/faculty role.

  - Do not utilize your Associate/Employee computer access when in your student/faculty role.

Non-Disclosure Form

Please READ and COMPLETE ACCURATELY

- Initials
- Print Name
- Signature
- Date
- Cell#
- Email
- Institution i.e. UTEP, EPCC, etc.
- Program i.e. EMT, Nursing, Respiratory
- PDA (electronic device)– Circle one (yes or no)
  - If **YES** complete Serial Number, Make and Model
- **FACULTY INSTRUCTORS must circle yes and register their electronic device. UMC Associates should be able to contact Faculty as needed.**
- Signature – for the *Code of Conduct*
- Associate … El Paso County Hospital District (EPCHD) – Circle yes or no
  - If yes, are you eligible for rehire? Circle yes or no
- Date attended virtual or in-person orientation
- Incomplete disclosures will not be accepted and students will not be allowed to start their clinical rotations.

Non-Disclosure Form

NON-DISCLOSURE AGREEMENT

Important: Please read all sections below. If you have any questions regarding this Agreement, please ask the Affiliation Program Administrator or Designee before signing. You may request a copy of this Agreement for your own records.

Disclosure of Patient/Provider Information

The student and licensed faculty instructor recognizes and acknowledges:

- that the services El Paso County Hospital District (hereinafter referred to as the "Hospital") performs for its patients/providers are confidential and that to enable the Hospital to perform those services, its patients/providers furnish to the Hospital confidential information concerning their affairs;
- that the good will of the Hospital depends, among other things, upon its keeping such services and information confidential;
- that by reason of the students' and licensed faculty instructors' clinical rotation, the student and licensed faculty instructor may come into possession of information concerning the services performed by the Hospital for its patients/providers even though the student and licensed faculty instructor does not take any direct part in or furnish the services performed for those patients/providers; and
- that the use of any electronic devices to photograph and/or record is prohibited in order to protect patient confidentiality. No part of the patient's chart or medical record may be recorded (duplicated or printed) utilizing electronic media. The recording of patients without patient consent constitutes a violation under HIPAA. Personal digital assistants (PDA) are subject to audit by Hospital designee. Students and Licensed Faculty Instructors who violate this policy shall be removed from the premises and the electronic device(s) shall be subject to immediate seizure.

The student and licensed faculty instructor accordingly agrees that, except as directed by the Hospital, the student and licensed faculty instructor will not at any time during or after his/her association with the Hospital, disclose any of such services or information to any person whatsoever, or permit any person whatsoever to examine or make copies of any reports or other documents prepared by the student or coming into his/her possession under his/her control, that have in any way to do with the patients/provider of the Hospital.

The student and licensed faculty instructor recognizes that the disclosure of any information by the student and licensed faculty instructor may give rise to irreparable injury to the Hospital or to the owner of such information, and that accordingly, the Hospital or the owner of such information may seek any legal remedies against the student and licensed faculty instructor, which may be available.

The student and licensed faculty instructor agrees that he/she will at all times comply with all security regulations, including maintaining the security of his/her computer password(s) in effect at the Hospital, and externally for all material belonging to the Hospital.

I have read and understand all of the above sections of this Agreement and understand that violations of the Agreement will result in the dismissal from the program and disbarment from participation in any future programs at the Hospital with no exceptions.

I authorize the Hospital's designee to audit my electronic devices (to include cell phone)._____ (initial)
Upon termination of my assignment, I will immediately return any Hospital issued property.

_____
Print Name

_____
Signature   Date

Cell #_____   _____

Institution's Name   Program
Electronic Device?   Yes or No

Email:_____   _____
Serial Number, Make and Model

Please click on the link below to read the Code of Conducts:
CODE OF CONDUCT BOOK Update.04.11.23 (umcelpaso.org)

I understand I must read and agree to abide by the mandatory standard set forth by the policies and procedures of the **Hospital's Code of Conduct manual.** I understand the consequences for non-compliance._____
Signature

Are you or have you been an employee, contracted employee or volunteer at any of the EPCHD (UMC) entities? Yes / No
If yes, are you eligible for rehire? Yes /No

Date attended virtual or in-person student orientation: _____
****If returning student, enter CWO exam pass date

Nursing Career Opportunities

UMC Nurse Tech Program

UMC Nurse Residency Program

Contact: Amanda Vega, Program Coordinator Nurse Residency

Amanda.vega@umcelpaso.org

For More Information Contact:

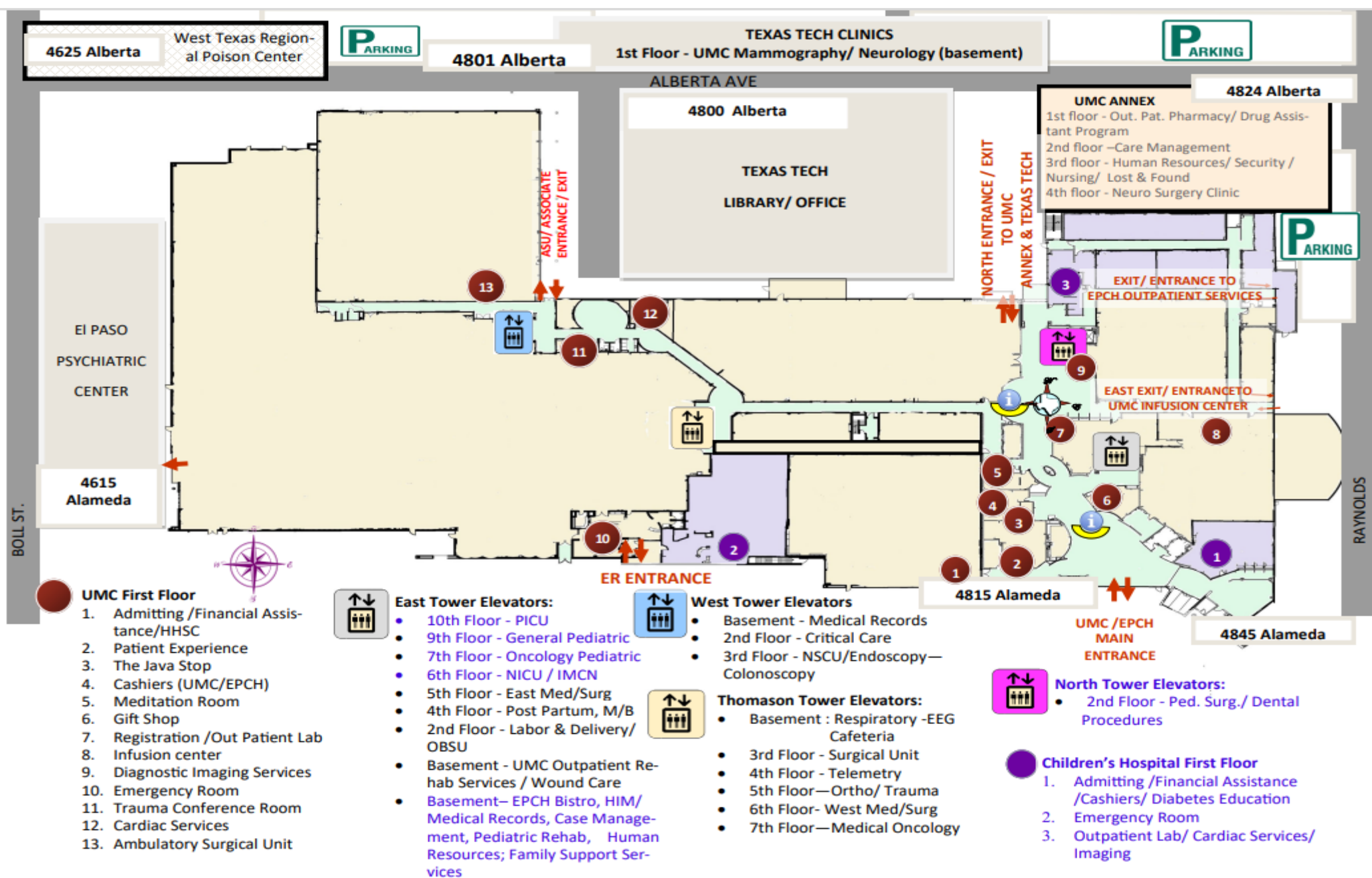**Lizette Salinas, Manager of Nurse Recruitment**

915-521-7312

Conclusion

Enjoy your rotation!

We hope you will find your experience at UMC pleasant and rewarding. Perhaps one day, you will join our team.

Thank you!

West Texas Region-al Poison Center

4625 Alberta

P**ARKING**

4801 Alberta

TEXAS TECH CLINICS
1st Floor - UMC Mammography/ Neurology (basement)

P**ARKING**

4824 Alberta

ALBERTA AVE

4800 Alberta

TEXAS TECH

LIBRARY/ OFFICE

UMC ANNEX
1st floor - Out. Pat. Pharmacy/ Drug Assis-tant Program
2nd floor –Care Management
3rd floor - Human Resources/ Security / Nursing/ Lost & Found
4th floor - Neuro Surgery Clinic

P**ARKING**

ASU/ ASSOCIATE ENTRANCE / EXIT

NORTH ENTRANCE / EXIT TO UMC

ANNEX & TEXAS TECH

EXIT/ ENTRANCE TO
EPCH OUTPATIENT SERVICES

El PASO PSYCHIATRIC CENTER

4615 Alameda

EAST EXIT/ ENTRANCE TO
UMC INFUSION CENTER

BOLL ST.

ER ENTRANCE

4815 Alameda

UMC /EPCH
MAIN
ENTRANCE

4845 Alameda

RAYNOLDS

UMC First Floor
1. Admitting /Financial Assis-tance/HHSC
2. Patient Experience
3. The Java Stop
4. Cashiers (UMC/EPCH)
5. Meditation Room
6. Gift Shop
7. Registration /Out Patient Lab
8. Infusion center
9. Diagnostic Imaging Services
10. Emergency Room
11. Trauma Conference Room
12. Cardiac Services
13. Ambulatory Surgical Unit

East Tower Elevators:
- 10th Floor - PICU
- 9th Floor - General Pediatric
- 7th Floor - Oncology Pediatric
- 6th Floor - NICU / IMCN
- 5th Floor - East Med/Surg
- 4th Floor - Post Partum, M/B
- 2nd Floor - Labor & Delivery/ OBSU
- Basement - UMC Outpatient Re-hab Services / Wound Care
- Basement— EPCH Bistro, HIM/ Medical Records, Case Manage-ment, Pediatric Rehab, Human Resources; Family Support Ser-vices

West Tower Elevators
- Basement - Medical Records
- 2nd Floor - Critical Care
- 3rd Floor - NSCU/Endoscopy— Colonoscopy

Thomason Tower Elevators:
- Basement : Respiratory -EEG Cafeteria
- 3rd Floor - Surgical Unit
- 4th Floor - Telemetry
- 5th Floor—Ortho/ Trauma
- 6th Floor- West Med/Surg
- 7th Floor—Medical Oncology

North Tower Elevators:
- 2nd Floor - Ped. Surg./ Dental Procedures

Children's Hospital First Floor
1. Admitting /Financial Assistance /Cashiers/ Diabetes Education
2. Emergency Room
3. Outpatient Lab/ Cardiac Services/ Imaging

Revised Date: 05/23

UMC & EPCH CAMPUS MAP