

UW Medicine

**2017 ANNUAL REFRESHER
TRAINING**

**NEIGHBORHOOD CLINICS
INFORMATION SHEET**

MISSION & PATIENTS ARE FIRST

No information.

CULTURAL AWARENESS

INTERPRETER SERVICES

24 hours a day, 7 days a week for more than 90 languages

Interpreters are certified through the State of Washington and can assist with barriers related to language and culture.

INFECTION PREVENTION

Utilize Powered-Air-Purifying Respirators (PAPR) should be reserved for aerosolizing/cough producing procedures.

To report equipment failures: Contact Clinical Engineering

To report exposures or concerns: Contact Employee Health/Infection Control/Nursing Supervisor

Antimicrobial Stewardship

Did you know?

- 50% of hospitalized patients are given an antibiotic
- 1 in 8 clinic patients are given an antibiotic
- AND At least 30% of these prescriptions are medically unnecessary
- Antibiotics are associated with:
 - ✓ Adverse reactions (like allergic reactions)
 - ✓ Increased bacterial resistance, leading to more illnesses and deaths
 - ✓ Increase *C. difficile* infections

How can I help?

- Know why your patients are taking antibiotics and for how long
- Educate patients that the majority of colds and upper respiratory infections are caused by viruses and don't need antibiotic treatment

Questions?

- Contact the Antimicrobial Stewardship Program at your facility
 - Antibiotic Guidelines available at: <https://occam.uwmedicine.org>
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PATIENT SAFETY



The Patient Safety Network (PSN) is the online incident reporting system for Neighborhood Clinics.

What do you need to know about the Patient Safety Network:

- The Patient Safety Team reviews every reported event.
- Emails are immediately sent to managers.
- Data is reviewed for trends.
- Events and trends may be used to support system changes.
- PSN is a way to get the right people notified of your concern.
- Contact your Patients Safety Network representative to find out how to anonymously report events.

Where can you access the PSN?

- The icon to access the PSN is on any UW Medicine computer or desktop
 - Easy to access and easy to use
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ENVIRONMENT OF CARE

Call 911 for an emergency at any UWNC location.

For after-hours issues, if you do not have a chief/Manager available, consult the Clinic-Specific Emergency Plan on the last page of the Emergency Reference Guide (Flip Chart)

Clinic-specific Emergency plans are also located on the UWNC Intranet site in the Emergency Response Section under QI & Patient Safety.

EMERGENCY REFERENCE GUIDE

The Emergency Reference Guide (Flip Chart) is designed to help staff know what to do during an emergency or incident in the environment of care at UWNC.

The guide provides brief information. It is designed to complement department plans and medical administration policies, which give you further information.

DISASTER PLAN ACTIVATION

UWNC – Command Center

Location: 5 UWT Conference Room or

Remote Command Center phone line: 206.315.1785, code 485123#

Person in charge: Incident Commander

PRIORITY OF ACTIONS

- Administer first aid to those who are injured. Call 911 for severe injuries.
- Relocate staff and patients, if necessary to a place that is safe and where patient care can continue.
- Report to your supervisor or manager and follow your Clinic Procedure for Emergency Response.
- Coordinate with UW Medicine NC Command Center by calling 206.315.1785 code 485123#
- After an internal disaster, complete a UWNC Event form (available from the main page of our Intranet site)

Managers/Supervisors: Complete staff availability forms for the Personnel Pool and report number of available staff from your department to the remote command center phone line at 206.315.1785 code 485123#.

CODE BLUE: Cardiac/Respiratory Arrest – Medical Emergencies
Overhead paging announcement: Code Blue + Location

A Code Blue should be called when there is an acute change in:

- Respiratory rate
- Oximetry saturation
- Heart rate
- Blood pressure
- Consciousness state

Initiation of Code:

1. When an emergency occurs, the staff person who is first aware will initiate the code by calling for help and then announcing (or by directing someone else to announce) via the intercom “Code Blue: location” – (should be announced 3x)
2. If the code involves a child, the announcement should state: “Code Blue Child: location.”
3. Staff members who overhear a Code Blue should notify providers who are in exam rooms about the Code Blue, because the intercom cannot be heard in the rooms.

Code Blue: Roles and Responsibilities

1. Until adequate staffing for the response is verified all available providers and clinical staff will respond to the code.
2. A staff member will bring the emergency cart to the location of the code.
3. The first responding provider will assume charge of the code until the PCP or designee arrives.
4. The provider in charge of the code will identify self to others as being in charge of the code. She/he can also request other providers to assist in patient management as needed.

The provider in charge will assume the following responsibilities:

1. Evaluate patient status and determine and direct the appropriate plan of care.
2. Determine if and when 911 should be called.
3. Initiate BLS (CPR) or assign another BLS-certified staff to administer BLS if appropriate.
 - C- compressions (at least 100 per minute, 2 inch depth)
 - D- defibrillation (as quickly as possible if applicable)
 - A- Airway (open it!)
 - B- Breathing

Code Blue: Provider in Charge

4. Direct clearing of extra staff or patients from the area.
5. Identify staff person to provide support to family members of patient who is coding.
6. Direct someone to act as a scribe and complete all required documentation
7. Determine when to conclude the code
8. Direct staff person to announce “Code is clear.”
9. Remain with patient until the code is cleared.
10. If 911 is called, direct Medical Assistant OR staff member to print snapshot and communicate information to the EMT upon arrival.
11. Complete a Code Blue documentation form and a UWNC Event form (available from the main page of our Intranet site).

HAZARDOUS MATERIALS SAFETY

- Always wear PPE (Personal Protective Equipment) when dealing with chemicals – at minimum eye protection and gloves are required.
- Always label secondary containers
- Do NOT bring food or drink into areas where hazardous chemicals are used.
- Compressed gasses such as oxygen tanks must always be secured or placed in a rack.

WASTE MANAGEMENT

Waste Generated	Waste Examples	Disposal
Sharps	Needles, lancets, razor blades, scalpels, broken ampoules	Red Sharps bin provided
Biohazard	Materials saturated with blood or other potentially infectious materials (OPIM) such as vaginal secretions, pleural fluid, peritoneal fluid, or any body fluid visibly contaminated with blood. Saturated means the item would release blood or OPIM in a liquid or semi liquid state if compressed or that the item is caked with dried blood or OPIM and are capable of releasing these materials during handling. Examples of biohazard waste are dripping bandages, disposal specula dripping with blood or OPIM.	Red biohazard bin with red bag provided
Chemical	Formalin, Xylene, other lab chemicals, unknown chemicals, pesticides	
Pharma		Send used pharma to UW Pharmacy

WASTE SEPARATION

- Appropriately separating waste protects UWNC employees and the environment while meeting regulatory requirements.
- All waste **MUST** be separated and disposed of into the proper container. All containers must be labeled with the composition and hazards.
- Keep instruments, trash and other belongings out of the laundry.

RECYCLING

- Locked Shred Bins: Patient Information, confidential paper **ONLY**
- Green Bins: Non-confidential paper, metal, plastic, glass (not broken), cardboard and other recyclables.

SECURITY MANAGEMENT: BASICS

- UWNC requires all staff, employees, contractors, vendors, temporary employees and volunteers to wear Photo ID.
- Visitors to clinics should wear temporary badges; all employees should stop individuals in the clinic who are not wearing an ID badge.
- Firearms are prohibited on UWNC premises with the exception of police officers/security guards.
- Always lock office doors when you are the last person to leave or when you are working alone. Walk confidently and have your keys/bus pass ready. Stay in well-lit areas at night, avoid alleys, and walk with others if possible.
- For crimes or emergencies **call 911**.
- For any security events that occur on site, complete a UWNC Event form (available from the main page of our Intranet site).

REPORTING & INVESTIGATION PROCEDURE

The Human Resources Director must be notified of all incidents of workplace violence or inappropriate conduct.

Complete a UWNC Incident Form on the intranet in the case of any workplace violence.

BOMB THREAT PROTOCOL

1. Call 911 or ask colleague to do so if you are unable to do so
2. Remain calm. Keep the caller on the line for as long as possible. **Do not hang up**, even if the caller does. Listen carefully and try to keep the caller talking.
3. Complete the Bomb Threat Checklist **immediately**. Write down as much detail as you can remember. Try to get exact words.
4. If your phone has a display, copy the number and/or letters on the window display.
5. If you have not already done so, CALL 911 from a different phone.
6. After the event, complete a UWNC Event form (available from the main page of our Intranet site).

POWER/UTILITY FAILURE

UW Neighborhood Clinics do not have emergency power systems.

NOTIFY:

- Puget Sound Energy (phone number)
- Seattle City light (pn)
- MCSOS (PH)
- UW Computing and communications office (PN)
- Contact center (PH) of outage and communicate clinic's operation plan

TAKE ACTION:

- Reference the paper copy of the Epic Downtime and Power Outage procedure (procedure and attachments are printed and available at the front desk of the clinic).
- Pull schedule for the day from the BCA computer (in the Manager's office); instructions are attached to this computer.
- Reset the Alarm System.
- Ensure the Emergency Phone is plugged in.
- Determine a Plan for the outage with Chief Clinic, Clinic Manager and Administration.

SHORT DURATION OUTAGE

- Patients will be moved to the exam rooms that have natural light. If no exam rooms with natural light are available, or if it is too dark to safely provide care, the procedure for after dark power outages should be followed.
- The UW Medicine Contact Center and/or available clinic staff will be asked to cancel all lab, x-ray, clinic staff, and procedure appointments for the duration of the anticipated outage.
- The Clinic Chief and Manager will decide on a plan for managing patient telephone calls, requests and emergencies, in conjunction the Executive Director or his/her designee. The Clinic Manager of the affected clinic or his/her designee will communicate this plan to the UW Medicine contact center.
- Patients will be checked in and roomed using paper versions of the check-in form and progress note.

- The lab staff will facilitate communication between the PSR staff and the MA staff and ensure that providers/back office staffs are notified when patients have arrived.
- Providers will continue to see patients as appropriate, taking the necessary notes and hand-writing the lab and x-ray orders, and prescriptions.
- Patients requiring laboratory or x-ray exams will be sent to another UWNC Clinic or other appropriate facility, or will be asked to return to the clinic when power returns, depending on the patient's needs. If the patient chooses to return for their exams at a later date, a note indicated the need to place a future order for appropriate lab and/or x-ray exams will be placed in the paper progress note.

LONG DURATION OUTAGE

- The UW Medicine Contact Center and/or available clinic staff will be asked to reschedule all patients.
- No additional appointments at the affected clinic will be made for the remainder of the day.
- All lab, x-ray, clinic staff, and procedural appointments for the day will be rescheduled.
- The Clinic chief and manager will decide on a plan for managing patient telephone calls, requests and emergencies, in conjunction the Executive Director or her/his designee. The Clinic Manager of the affected clinic or her/his designee will communicate this plan to the UW Medicine Contact Center.
- In the event the power outage is expected to last over 24 hours, the Clinic Manager or her/his designee will package all vaccines stored on-site in the clinic refrigerators and arrange for alternate storage at UW Pharmacy.
- The decisions to close a clinic will be made by the Clinic chief in collaboration with the Clinic Manager, Executive Director and/or Medical Director. The Clinic Manager or her/his designee will ensure that the UW medicine contact center is notified of early/alternate closing times promptly.
- Power outages may require the activation of the UWNC Command Center and an initial conference call to mitigate impact for affected clinic.

OUTAGE AFTER DARK

- The Supervisor or Manager notifies the Contact Center immediately that the clinic is closed
- If it is within one hour of the clinic's regularly scheduled closing time, the clinic's incoming calls will be routed to the answering service.
- If the closure is more than an hour before the regularly scheduled closing time, another UWNC clinic will be asked to assist with management of patient telephone calls and requests. The clinic manager or designee will communicate information on how patient calls and requests will be managed during the outage to the contact center and the network.
- Prior to closing clinic, the manager or her/his designee will walk through the building to ensure that exam rooms, bathrooms, and all spaces are free of patients. All doors are locked immediately following this inspection.

As soon as power is available any relevant information will be added into the patient's record using scanning as appropriate.

OTHER UTILITY FAILURES

Natural Gas: In the event that you smell gas or have any reason to be concerned about a gas leak:

- Call 911 and evacuate the Clinic.
- Do not use spark-producing devices including light switches or thermostats.
- Call Puget Sound Energy.

Fire Alarm system: Be extra attentive and alert for fire or smoke.

Sewer stoppage: Do not flush toilets; do not use water.

Water inoperative: do not attempt to drink water from fountains or taps; turn off water in sinks.

HOW TO REPORT

- Talk to your supervisor

- Complete a UWNC Event form (available from the main page of our intranet site)
- Talk to your department's Safety coordinator
- For significant harm, call Risk Management