



Parkview Welcome Handbook

Parkview Health | Student Services |
1919 W. Cook Road | Fort Wayne, Indiana 46818



This document contains essential information that will help guide and prepare you for safe, high-quality, and rewarding student experiences. Your success is our success. Please carefully study this handbook and all other assigned materials so that you are best equipped to function and thrive in our dynamic environment. You will be glad you invested your time. We look forward to learning with you.

Welcome to Parkview.

If you have any questions or concerns regarding the information in this handbook, please direct them to the Student Services department at students@parkview.com.

Handbook Contents

Parkview Welcome Handbook	1
Background to Parkview	4
Need to Know Information	5
Preparing for Your Internship	6
Obtaining a Badge:	6
Tobacco Use:	6
Phones and Mobile Devices:	6
Appropriate Attire:	6
Use of Social Media	7
Social Media Policy:	7
Personal, Patient, & Co-Worker Safety	8
Workplace Violence:	8
Abuse and Neglect:	8
Preventing Patient Falls:	8
National Patient Safety Goals:	8
Rapid Response:	8
Tuberculosis:	8
Patient Experience	9
Technology at Parkview	10
Parkview Health HIPAA Policy	11
Diversity and Inclusion	14
Parkview Student Orientation Test	15

Background to Parkview

Contact the Student Services Department with Questions

Northeast Indiana's Largest Healthcare Provider:

Parkview serves a population of more than 820,000 community members. We're also one of the region's largest employers, with more than 12,000 co-workers.

More Important Than Our Size, Is Our Mission:

As a community owned, not-for-profit organization, Parkview Health is dedicated to improving your health and inspiring your well-being. This means we put our patients and our community first.

Our Dedication Is Evidenced in Our Hospitals:

This includes our largest facility the Parkview Regional Medical Center (PRMC), and multiple PPG Offices. More than just a hospital, PRMC, a nine-story facility includes a 446-bed hospital and multiple specialty centers, including heart, cancer, women's and children's health, and orthopedics. This revolutionary facility, and its health-centered campus, will improve access to healthcare for the entire region. It's a shining example of what happens when a healthcare system invests in the community for generations to come.

Our Facilities:

We are a family of outstanding facilities serving Northeast Indiana and Northwest Ohio.

- Parkview Regional Medical Center
- Parkview Ortho Hospital
- Parkview Hospital Randallia
- Parkview Behavioral Health
- Parkview Home Health & Hospice
- Parkview Huntington Hospital
- Parkview LaGrange Hospital
- Parkview Noble Hospital
- Parkview Wabash Hospital
- Parkview Warsaw
- Parkview Whitley Hospital
- Parkview Physicians Group
- Mirro Center for Research & Innovation

We Are Glad You Are Here

At Parkview we value our students and see you as future professionals, as you build your knowledge and skills to serve the families in our region. Thanks for giving us this opportunity to invest in your development. We invite you to learn about our organization and get to know our dynamic team of physicians, co-workers and associates. And most importantly, get to know our patients.

Need to Know Information

Contact the Student Services Department with Questions

Emergency Codes:

Plain Language Emergency Alerts	
Fire Alert	- Fire
Security Alert	- Suspicious Package - Security Needed - Active Shooter - Missing Infant/ Child
Weather Alert	- Weather Events - Tornado Warning - Thunderstorm Warning
Emergency Alert	- Code Blue (Cardiac Arrest) - Disaster - IS Downtime

In Case of Fire:

In the event of a fire remember to RACE and PASS.

RACE
R – Remove/ Rescue
A – Activate
C – Contain
E – Extinguish

PASS
P – Pull
A – Aim
S – Squeeze
S – Sweep

RACE stands for the four steps to follow in the event of a fire:

- Remove/ rescue persons from immediate danger.
- Activate the alarm closest to the fire area. Alert persons in the immediate area by announcing the phrase “Code Red” several times.
- Contain fire by closing doors and windows where the fire is located.
- Extinguish the fire by using the proper type of fire extinguisher, when appropriate.

PASS stands for the proper way to use a fire extinguisher:

- Pull the pin.
- Aim at the base of the flame.
- Squeeze the handle.
- Sweep from side to side.

Be Safe:

Be Smart	Think safety first, be prepared before starting any task.
Be Right	Follow the safety policy, instructions, PPE, rules, guides, and signs
Be Aware	Observe the situation and your surroundings – be a wing-man
Be Mindful	Be in the moment, pause to assure you/ your team are focused
Be Vocal	Speak up and report anything unsafe or ask if you are unsure
Be Innovative	Share your idea for improving safety

Preparing for Your Internship

Contact the Student Services Department with Questions

Obtaining a Badge:

Every student is required to be identified by a badge when on a Parkview campus. You will be provided with detailed badging instructions including the type of badge required by your student type, where to obtain, and where to return your badge. You are expected to wear your Parkview Student ID badge in addition to your school ID badge. All badges must be worn above the waist and be visible to patients, visitors, and co-workers.

NOTE: Students are responsible for all replacement fees if a badge provided by Parkview is lost or damaged.

Tobacco Use:

All Parkview Health campuses, facilities, building, and properties are tobacco free. Students are included in these expectations and should abide by the policy, including the expectation that clothing will be free of smoke odor.

Phones and Mobile Devices:

Students may place their phones in backpacks, bags, or coat pockets during learning experiences, but phones and mobile devices are not permitted on the floor, unit, or department at any time.

Facility leadership reserves the right to prohibit the use of these devices at any time should an internship or safety issue arise.

NOTE: You may not use cell phones or mobile devices in patient or business areas at any time.

Appropriate Attire:

Our patients and families deserve and expect professional appearance from everyone they encounter at Parkview. Make sure your clothing is well-selected, clean and wrinkle-free so you look your personal best.

Dress code for the internship is business casual, unless otherwise stated by your supervisor, instructor, or preceptor. Examples may include clothing such as scrubs (if appropriate), slacks, khakis, sweaters, collared or polo shirts, and other items that would be worn in professional settings or places of worship.

You may not wear jeans, shorts, sweatshirts/pants, clothing with holes, or any clothing that is inappropriate in a professional work environment.

Footwear must be closed-toe, with safe non-skid soles. No sandals or flip-flops. Athletic shoes are appropriate.

Please avoid displaying extremes in clothing, hair styles, jewelry, visible tattoos, and body piercings.

Behavioral Expectations:

As a student with Parkview Health you serve as a representative of the Parkview culture. To further support the mission and vision of Parkview we ask that you remain professional within the internship and follow the guidelines listed below.

- Be respectful of patients, visitors, and staff.
- Be on time and prepared to learn, participate, or observe with all necessary materials.
- Be engaged in the learning opportunity provided to you.
- Do not use personal mobile devices during internship hours.
- Show up each day with a positive attitude and take initiative when appropriate.
- Ask questions if you are unsure or need additional clarification on a task or process.

Use of Social Media

Contact the Student Services Department with Questions

Social Media Policy:

Parkview Health recognizes that on-line communications such as blogs, web-based discussion forums, and personal websites can be a highly-effective tool for exchanging information and a source of social interaction. In fact, Parkview Trauma Prevention's Don't Text & Drive page has thousands fans, and a Parkview Health Facebook page and Twitter profile have been launched.

In talking with employees around the health system, the Marketing Department has received many questions and comments about social media. Many of you have been using it for years, and some of you have a lot of questions.

The guidelines below were created to help you better understand the Parkview Health social media policy, and provide additional information regarding areas where you may have question. These guidelines apply to employees and students who create or contribute to blogs, wikis, social networks, virtual worlds, or any other kind of social media.

Whether you log onto Twitter, Wikipedia, Instagram, Facebook pages, or comment on online media stories — these guidelines are for you.

Please keep in mind that our overall goal is simple: To participate online in a respectful, relevant way that protects our reputation and of course follows the letter and spirit of the law.

General Tips:

- Be smart about protecting yourself and your privacy. What you publish is widely accessible and will be around for a long time, so consider the content carefully.
- Familiarize yourself with the privacy settings (if applicable) for networking sites you choose to use. These allow you to choose who you want to share your information with. Note that these can change often.
- Safety experts recommend avoiding posts and status updates that may announce to readers that you are not at home, as they believe this can increase risk of thefts.

An area where there has been increased participation is commenting on on-line news stories related to Parkview. Some tips for participating:

- Be transparent and state that you work at Parkview. Your honesty will be noted in the social media environment.
- Know your facts before commenting. Never represent yourself or Parkview in a false or misleading way. All statements must be true and not misleading; all claims must be substantiated.
- Post meaningful, respectful comments — in other words, avoid remarks that are off-topic or offensive.
- When disagreeing with others' opinions, keep it appropriate and polite.

Personal, Patient, & Co-Worker Safety

Contact the Student Services Department with Questions

Workplace Violence:

- **Nonemergency** – Notify the supervisor/manager of the department as soon as possible.
- **Emergency or Crisis** – If the threat is imminent or if violent behavior is in progress, call the Security Department:
 - If in a hospital facility dial 1-911
 - In Wabash Hospital dial 6-911
 - Other buildings dial 9-911 or 911

Abuse and Neglect:

We are obligated to act on our suspicions. State laws mandate that child/elder abuse be reported to the proper authority. **If you suspect abuse or neglect of any patient, employee or hospital customer:**

- Provide care as needed.
- Contact supervisor and Social Worker or Case Manager.

Preventing Patient Falls:

At Parkview we focus on providing the safest care and environment for our patients. Students should help our team prevent patient falls. Patients are assessed for fall risk upon admission, at key intervals throughout their stay, and maintained on continuous fall observation. A patient's fall risk score may be displayed on their room's whiteboard and will be documented in their health record.

Morse Fall Scale

In our facilities we use the Morse Fall Scale.

Patients are scored as **Low Risk**, **Medium Risk**, or **High Risk**.

Medium Risk and **High Risk** patients must have fall alarms and always be assisted when walking and transferring between chairs and beds. They must never be left unattended when up or in the bathroom/shower, with the caregiver remaining at the patient's side within arm's length of the patient.

National Patient Safety Goals:

At Parkview we focus on providing the safest care and environment for our patients. For more information about the Joint Commission's National Patient Safety Goals please visit:

http://www.jointcommission.org/standards_information/npsqs.aspx

Rapid Response:

To better our patient care, alert a Rapid Response Team to assess and treat patients at the first sign of acute or sudden changes to their condition, symptoms, or vital signs.

Tuberculosis:

For information about TB symptoms and prevention visit the following sites:

<http://www.in.gov/isdh/22442.htm>

<http://www.cdc.gov/tb/faqs/default.htm>

Patient Experience

Contact the Student Services Department with Questions

Hourly Rounding:

- Reduces call light use and patient falls
- Improves patient satisfaction scores
- Reduces stress levels and is more efficient

Remember the “FOUR Ps” Rule

Four “Ps”
P – Positioning
P – Potty
P – Pain
P – Possessions

- Positioning: Ensure the patient is comfortable and assess risk of pressure ulcers.
- Potty (personal needs): Assist with toileting as needed.
- Pain: Assess pain level using pain scale; take necessary actions to relieve pain.
- Possessions: Access to controls and belongings as desired.

Assess Any Additional Comfort Needs

These are the “little things,” such as fluffing pillows, straightening sheets, filling water pitchers, and answering questions.

Conduct an Environmental Assessment

Ensure the area is clean, safe, and free of clutter. The patient has everything within reach and all safety measures are in place, such as bed alarms and side rails.

Ask, “Is there anything else I can do for you? I have time”

By adding that you have time, patients are more likely to verbalize any unmet needs. This will reduce call lights later.

Hourly Rounding is NOT

- Peeking in the patient’s room and ensuring that they are stable
- Peeking in and asking the patient, “Are you doing okay?”
- Saying to the patient, “I’m here to check on you.”

Technology at Parkview

Contact the Student Services Department with Questions

TUG Robot Delivery System:

A TUG is a mobile robotic delivery system used to move supplies from one area of the hospital to another. TUG robots are only utilized at Parkview Regional Medical Center, which has a fleet of 13 TUGs utilized by Supply Chain, Pharmacy, and Environmental Services.

How TUG Works

- A TUG can call an elevator, open, and close doors as necessary. An on-board computer contains the advanced TUG Operating System (TUGOS), which uses its detailed maps and sophisticated navigation software to plan routes, avoid obstacles, and constantly track its location.
 - The TUGs will be traveling throughout the main hospital.
- A TUG avoids people, equipment and other obstacles by using infrared light whiskers and a laser to scan for objects on the ground. A TUG also utilize sonar to locate taller objects in its path.

TUG Tips

- **DO**
 - Do keep the path of the TUG clear of all obstacles. If the TUG is moving toward you, please step aside and allow it to pass. If you see an item in the TUG's way, please move the item to keep delivery times low.
 - Do remove your delivery immediately. The faster you get your items out of the TUG, the faster the TUG can deliver items to the next destination.
 - Do allow the TUG to ride on the elevator by itself. The TUG needs room to maneuver once inside the elevator.
 - Do allow the TUG to exit the elevator before you enter the elevator.
 - Do move the TUG out of the way in an emergency or if you need room to pass. To move the TUG, press the red "Pause" button and simply push the TUG out of the way.
 - TUG will attempt to resume travel in 30 seconds. Once the emergency has passed try to return the TUG near its normal path. Please do not put the TUG in a closet or stairwell.
 - Do watch where the TUG is headed to avoid running into it with medical equipment.
- **DON'T**
 - Don't get on the elevator with the TUG. TUG rides alone!
 - Don't touch the TUG unless you are preparing or receiving a delivery.
 - Don't push TUG into a room, closet, or stairwell. If you need to move it, try to keep it within 10 feet of its known pathway so it can recalibrate its location.
 - Don't run into the TUG with stretchers, beds, or carts.

Parkview Health HIPAA Policy

Contact the Student Services Department with Questions

Policy Statement

It is the policy of Parkview Health (“PH”) and its affiliated healthcare providers to maintain an individual’s right to privacy with respect to Protected Health Information (“PHI”). Consequently, PH shall implement administrative, technical and physical safeguards for the protection of non-electronic PHI that are reasonable and feasible and consistent with the privacy requirements of the Health Insurance Portability and Accountability Act of 1996 and the Health Information Technology for Economic and Clinical Health Act, their implementing regulations, and other applicable law (collectively referred to as the “Privacy Standards”).

SCOPE

The protections of this policy extend to all non-electronic PHI in the possession of PH (i.e., regardless of whether or not the information is PH’s PHI). PH workforce members (“Workforce”) are expected to use their best judgment to reasonably safeguard non-electronic PHI at all times.

Procedure

A. General Procedures

1. PH will implement administrative, technical and physical safeguards to protect the privacy of non-electronic PHI which are reasonable and feasible and consistent with the Privacy Standards. PH will appropriately and reasonably safeguard non-electronic PHI from any intentional, unintentional, or incidental use or disclosure that is in violation of the Privacy Standards.
2. PH will periodically review the safeguards and update them as necessary or appropriate.
3. PH will coordinate the safeguards with its Security Policies for safeguarding electronic PHI.

B. Safeguards

1. Storage of Non-electronic PHI. Non-electronic PHI stored on PH premises will be stored either in locked cabinets or in areas where access will be limited to, or supervised by, PH Workforce members or other authorized individuals who require access to perform their job duties (e.g., authorized business associates; treating physicians who are not Workforce members).
2. Secure Premises. Workforce members will safeguard all non-electronic PHI by ensuring that access to PH’s premises is secure and that unauthorized individuals do not access secure areas unsupervised.
3. Discarding Non-electronic PHI. Workforce members who discard PHI in paper form will shred the paper in a shredding machine or discard it in a designated container for collecting paper that is to be shredded. Non-electronic PHI in other than paper form (e.g., biohazards; medication containers; IV bags) shall be discarded in designated containers.
4. Printers and Fax Machines. All printers and fax machines used to convert PHI to paper form will be placed in secure locations to prevent unauthorized access.
5. Transfer. All non-electronic PHI shall be appropriately safeguarded in transit. When non-electronic PHI is transferred from one location to another, Workforce members will take reasonable steps to safeguard the information from any intentional or unintentional use or disclosure that is in violation of the Privacy Standards, including not leaving non-electronic PHI unattended in public locations

Implementation Guidelines

A. Guiding Principles

- Compliance with the Privacy Standards requires Workforce to take those precautions that are reasonable, appropriate and feasible under the circumstances. The following are guiding principles for implementing the safeguards listed in III. B., above, recognizing that what is reasonable, appropriate and feasible will vary with the circumstances.
1. PH premises or areas will be considered secure if locked and accessible only by key, key code, ID badge or other physical security device. Secure areas shall be automatically re-locked or manually re-locked by Workforce after exiting the premises. PH premises will also be considered secure if anyone who is not a PH Workforce member or other authorized individual who requires access to perform his/her job duties (e.g., authorized business associates; treating physicians who are not Workforce members) is accompanied by or supervised by a PH Workforce member or such authorized individual while present on the premises or area.
 2. Paper copies of records may be taken out of storage for use by care providers and others who need them. For example, there may be times when physicians need a patient chart to be available at bedside or outside of exam rooms. When paper copies of PHI are outside of storage for use, they will be placed in folders, under a coversheet, face down on a working surface, face against the wall, in designated containers or handled in a similar manner to prevent unintended access to such PHI. Paper copies of records should be returned to storage when they are no longer being actively used.
 3. PH managers and supervisors shall assure that Workforce reporting to them have access to a container for disposing of non-electronic PHI. The container may be either a locked container designated for secure shredding or an unlocked receptacle, provided an unlocked container is kept in a secure area. An unlocked container must be emptied when full into a locked container designated for secure shredding or directly into a shredding machine. Managers and supervisors shall identify for Workforce reporting to them how to obtain a new container when a container designated for secure shredding becomes full. Please refer to the PH Record Retention and Destruction Policy for PH's policies and procedures governing the retention and destruction of non-electronic PHI.
 4. Non-electronic PHI may be transmitted by PH interoffice mail, PH Workforce, PH-contracted courier service, U.S. Mail (United States Postal Service), or other outside courier or shipping service such as Federal Express or United Parcel Services. Non-electronic PHI shall be under closed cover. When PH is moving non-electronic PHI from one location to another, the PHI should be in closed containers and supervised by PH Workforce at all times. Delivery shall be to an individual who is expecting the PHI and accountable for the protection of the PHI. PH will enter into a business associate agreement with any business associate that it engages to transport PHI on PH's behalf.

B. Practical Examples:

- Workforce members are expected to use their best judgment to reasonably safeguard non-electronic PHI at all times. The following are examples of common scenarios for safeguarding non-electronic PHI.
 1. Patient / family conferences should be conducted in private rooms when feasible.
 2. In double occupancy rooms, Workforce members should lower their voices and draw the curtains to reasonably maintain privacy.
 3. Avoid discussing patients in hallways, cafeteria or other public places, except as required for care.
 4. Ensure that any paper records for which you are responsible are appropriately secured in accordance with this policy before leaving for the day or changing shifts.

5. Locate fax machines in secure areas.
 6. Carefully check fax numbers and use a fax cover sheet when manually faxing.
 7. Do not leave PHI unattended, such as on printers or fax machines.
 8. Any inter-office mail that contains patient information should be placed in an envelope.
 9. Keep wastebaskets and containers designated for PHI in secure areas.
 10. When transferring paper copies of medical records, ensure that they are secured in a manner that prevents unauthorized uses and disclosure.
 11. Direct members of the public or others to leave an area where they do not belong.
- The foregoing guiding principles and examples cannot address all circumstances that may arise in the normal course of business. In some situations other precautions may be reasonable, appropriate and feasible. Workforce members who have questions about what is reasonable, appropriate and feasible in a particular circumstance shall confer with the PH Privacy Officer or his/her designee.

Diversity and Inclusion

Contact the Student Services Department with Questions

Our Commitment to the Person You Are

Because you are a unique person, with unique healthcare needs, a rich cultural background, certain likes and dislikes, and are the best expert on who you are, we're committed to providing healthcare focused on you.

We are committed to offer services and care that is sensitive to diverse populations (read about our community health needs assessment). We promote and support the concepts of diversity and inclusion in:

- Clinical care
- Community leadership
- Organizational policies
- Workforce hiring and development

We work to tailor personalized health journeys to empower people of all diverse cultural and ethnic backgrounds to achieve unique health and well-being goals.

The statement "all diverse cultural and ethnic backgrounds" includes, but is not limited to: race, ethnicity, age, religion, language, gender, sexual orientation, physical abilities/disabilities, socio-economic status, educational backgrounds and region of geographic origin.

Serving others for a better community

We value the unique aspects of every person's background, culture and life perspective. We are dedicated to provide excellent healthcare with compassion, empathy and respect.

The Parkview Mission and Vision

Community engagement at Parkview

Read the 2015 Engagement Report

(Please visit link for access to these documents <https://www.parkview.com/about-us/diversity-inclusion>)

Contact the Office of Diversity and Inclusion

Diana Jackson-Davis, PhD
Director, Diversity and Inclusion
(260)266-2643

We look forward to learning with you!

Thank you for reading the Parkview Welcome Handbook. Please keep this material handy for easy reference during your time with us and contact students@parkview.com with any questions.

Parkview Student Orientation Test

Directions: After you have read the Parkview Welcome Handbook answer the following questions. Please record your answers on the Student Test Answer Sheet, available in the Student Passport. The test consists of eight Multiple Choice and True/ False Questions. Please select the BEST answer for each question.

1. Parkview Health's mission states: "Parkview Health will improve the health and well-being of our communities."
 - A. True
 - B. False
2. Confidentiality includes:
 - A. Keeping patient information private that is spoken, on paper, or on a computer.
 - B. Following HIPAA standards to ensure that disclosure of a patient's protected health information (PHI) for treatment, payment, and healthcare operations follows the "minimum necessary" rule.
 - C. Maintaining privacy of fellow employees personal and employment information.
 - D. Being able to privately file a complaint with the Parkview Health Privacy Officer.
 - E. All of the Above.
3. At Parkview Health facilities the phone numbers to call during an emergency situation are 1-911, 9-911, and 911?
 - A. True
 - B. False
4. If a patient is suspected to show signs of abuse or neglect, you should:
 - A. Provide care as needed and contact the manager and Social Worker/ Case Manager immediately.
 - B. Be aware state law mandates that child/ elder abuse be reported to the proper authority.
 - C. Act on your suspicions.
 - D. All of the above.
5. Using the Morse Fall Scale a patient must never be left unattended when up or in the bathroom/ shower if they are at which level?
 - A. Low Risk
 - B. Medium or High Risk
 - C. Score of 2
 - D. All of the Above
6. In the case of a fire, the correct sequence of action is RACE and PASS.
 - A. True
 - B. False
7. Students using social media should:
 - A. Refrain from posting information, comments, or images about patients/ guests or their own student learning experiences at Parkview.
 - B. Always follow HIPAA regarding patient privacy.
 - C. Feel welcome to visit Parkview's Facebook, Twitter, and YouTube sites.
 - D. All of the above.
8. Students at Parkview using PDA's, smart phones, or tablets must:
 - A. Refrain from using them in public areas or in front of patients.
 - B. Never utilize the camera or video recording functions while on Parkview property.
 - C. Use them only to access learning applications directly related to their clinical experience.
 - D. All of the above.