



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

Student Orientation



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UMC Map

On-Line UMC Student Orientation

www.umcelpaso.org/ReturningStudents

FIND A DOCTOR

FIND A FACILITY

MEDICAL SERVICES

PATIENTS & VISITORS

ABOUT US

EPCHD/UMC BOARD



About Us

The Hospital

UMC Affiliation Program



UMC (Student) Affiliation Program

Returning Students

The following is the online orientation presentation for returning students. Please review the UMC Student Orientation and complete the UMC Online Exam.

UMC Student Orientation:

[UMC Student Orientation Presentation \(PowerPoint\)](#)

The Hospital

Affiliations

Finances

Nursing

UMC Foundation

Pharmacy Residency Programs

Government Relations

UMC Affiliation Program

Faculty/Clinical Rotations

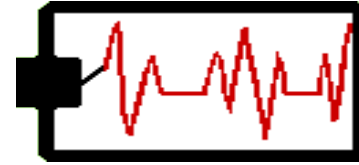
Shadowing

PULL-OPP Program (UMC Associates Only)

Returning Students



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.
 - Surgical Hospital 1416 George Dieter Dr.
- 1,500 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, its policies and procedures, or its Associates include those of all entities:
 - UMC Hospital
 - UMC Neighborhood Clinics
 - El Paso Health
 - University Medical Center Foundation

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:

- **Community** – Pursue access to healthcare for all members of our community.
- **Accountability** – Embrace responsibility for the outcomes resulting from our choices and actions.
- **Respect** – Treat everyone with dignity and compassion.
- **Excellence** – Provide the highest quality of care.
- **Service** – 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 allowed 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

The screenshot shows the University Medical Center of El Paso Intranet homepage. The header includes the logo and text: "UNIVERSITY MEDICAL CENTER OF EL PASO INTRANET". The left navigation menu lists various links, with a red arrow pointing to "Policies & Procedures". The main content area features a security status banner: "Current Hospital Security Level is Green" with a progress bar and a link to "Click here for specific security level information". Below this is a "NEWS:" section with a list of news items: "Bugs - Drugs - And Things That Go Bump in the Nigh...", "IT Security Newsletter May 2017", "IT Security Newsletter April 2017", "Women's Health Journal - May 2017", "Bugs - Drugs - And Things That Go Bump in the Nigh...", and "View more...". The footer contains the text: "We are posting the comments of Jacob Cintron, our President & CEO, at ou".

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.

If a victim, report to UMC
Compliance Hotline
1.888.310.3434
And to your faculty

Hospital District Environment

Workplace Conduct

- 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 its 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.

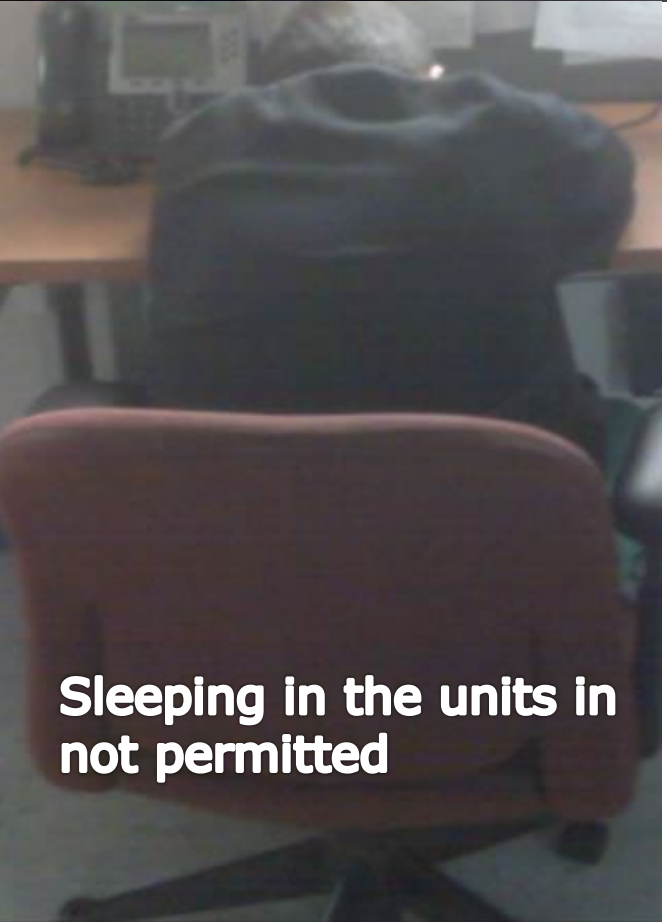


Water bottles on desk & feet on the desk not permitted

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/

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)

Reminders:

- 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 \(youtube.com\)](#)

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 ALWAYS.**
 - 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 exceptional customer service 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



The Path to Patient Satisfaction



Call bell is Ringing



Look up to see where it is ringing



Go to the patient room



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.

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



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

- <https://www.thomasoncares.org/video/CULTURE-OF-SAFETY-VIDEO.mp4>

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 . . .

2024 National Patient Safety Goals

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

UR01.01.01

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

UR01.02.01

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

UR01.03.01

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.”



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 Allergy (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



**Surgical Scrubs
colors are misty
green & burgundy**

**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**



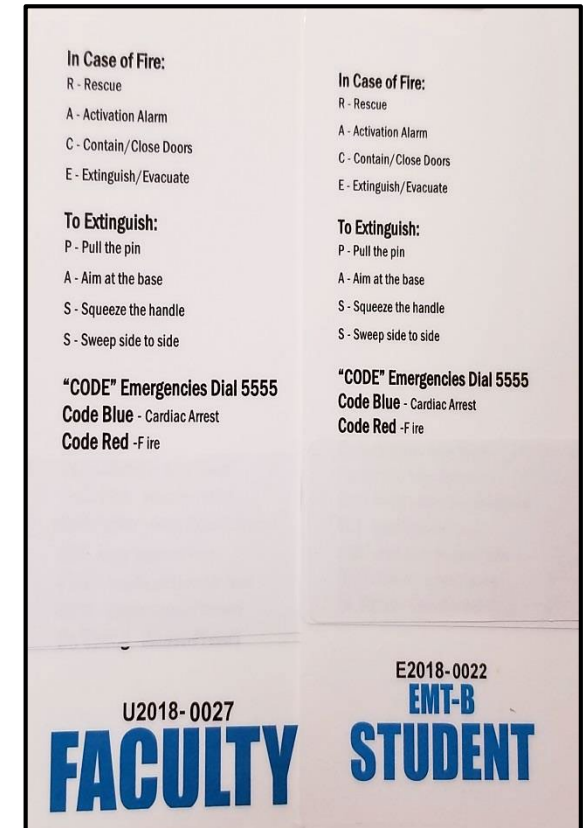
**Surgical Scrubs
should not be taken
home**



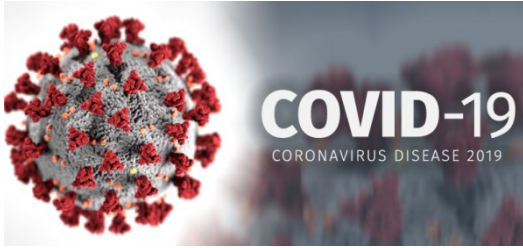
Identification Badge

- 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 extender (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.

UMC Extenders



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

THE ASSOCIATED PRESS

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

	Date	Time IN	Time OUT	Student's Name	Preceptor's First Name	Preceptor's Last Name	Assigned Area or Room #	Instructor's Signature
1								
2	CORRECT							
3	1/20/2020	07:00	15:00	Nellie Flores	John	Doe	ED Triage or Tele 410	<i>Nellie Flores</i>
4								
5	1/20/2020	3:30	4:00	Nellie Flores	Faculty	Name	Pick Patient Only	<i>Nellie Flores</i>
6								
7	WRONG							
8	1/20/2020			Nellie Flores	John			<i>Nellie Flores</i>
9		MISSING TIME	MISSING TIME			MISSING PRECEPTOR'S LAST NAME	MISSING ASSIGNED AREA	Instructor should have corrected prior to signing

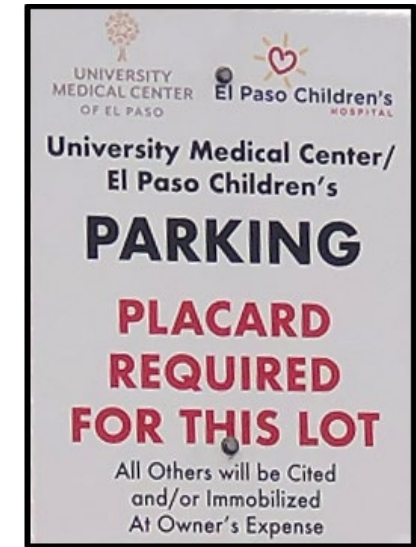
Name of Faculty Instructor: _____ Name of School: _____

Family Emergency

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

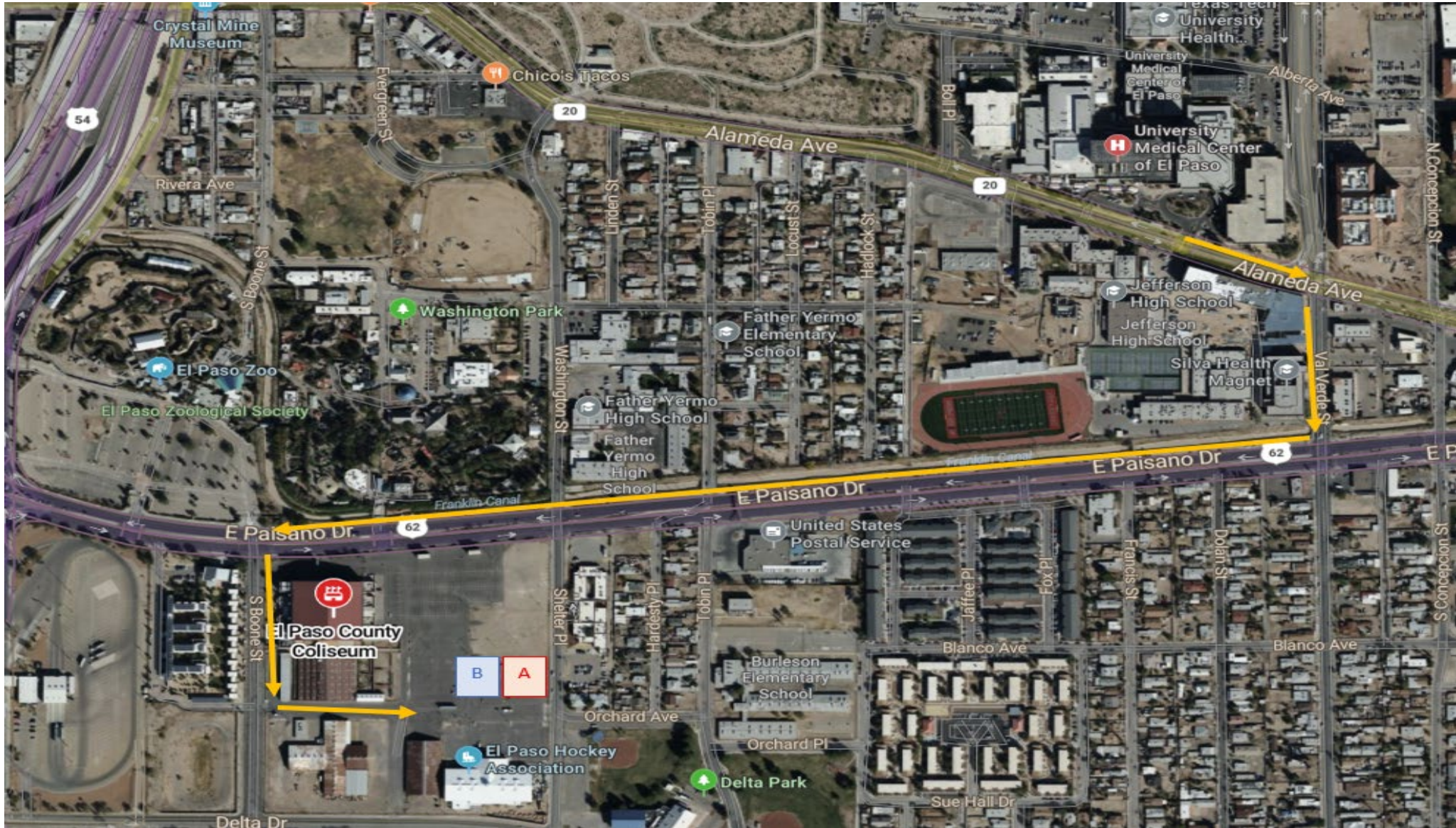
Parking for UMC

- Students are to park at the **County Coliseum** if scheduled at UMC from the hours of 6am to 10pm Monday through Friday in Zones A & B.
 - UMC Shuttle Services:
 - Monday – Friday 6am-10pm (allow 15 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 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.
- Provide Security your name and School Campus.
 - 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	<p style="text-align: center;">See something, say something.</p> <p>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</p>
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: <ul style="list-style-type: none"> • 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/Employees and students 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

Non-Disclosure Form

- Please READ and COMPLETE ACCURATELY
 - Initials
 - Print Name
 - Signature
 - Date
 - Institution i.e. UTEP, EPCC, etc.
 - Program i.e. EMT, Nursing, Respiratory
 - PDA (electronic device)– Circle one (yes or no), If **YES** complete the next lines
 - **FACULTY INSTRUCTORS must circle yes and register their electronic device. UMC Associates should be able to contact Faculty as needed.**
 - Associate ... El Paso County Hospital District (EPCHD) – Circle yes or no
 - Signature – for the *Code of Conduct*
- Incomplete disclosures will not be accepted and students will not be allowed to start their clinical rotations.

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:

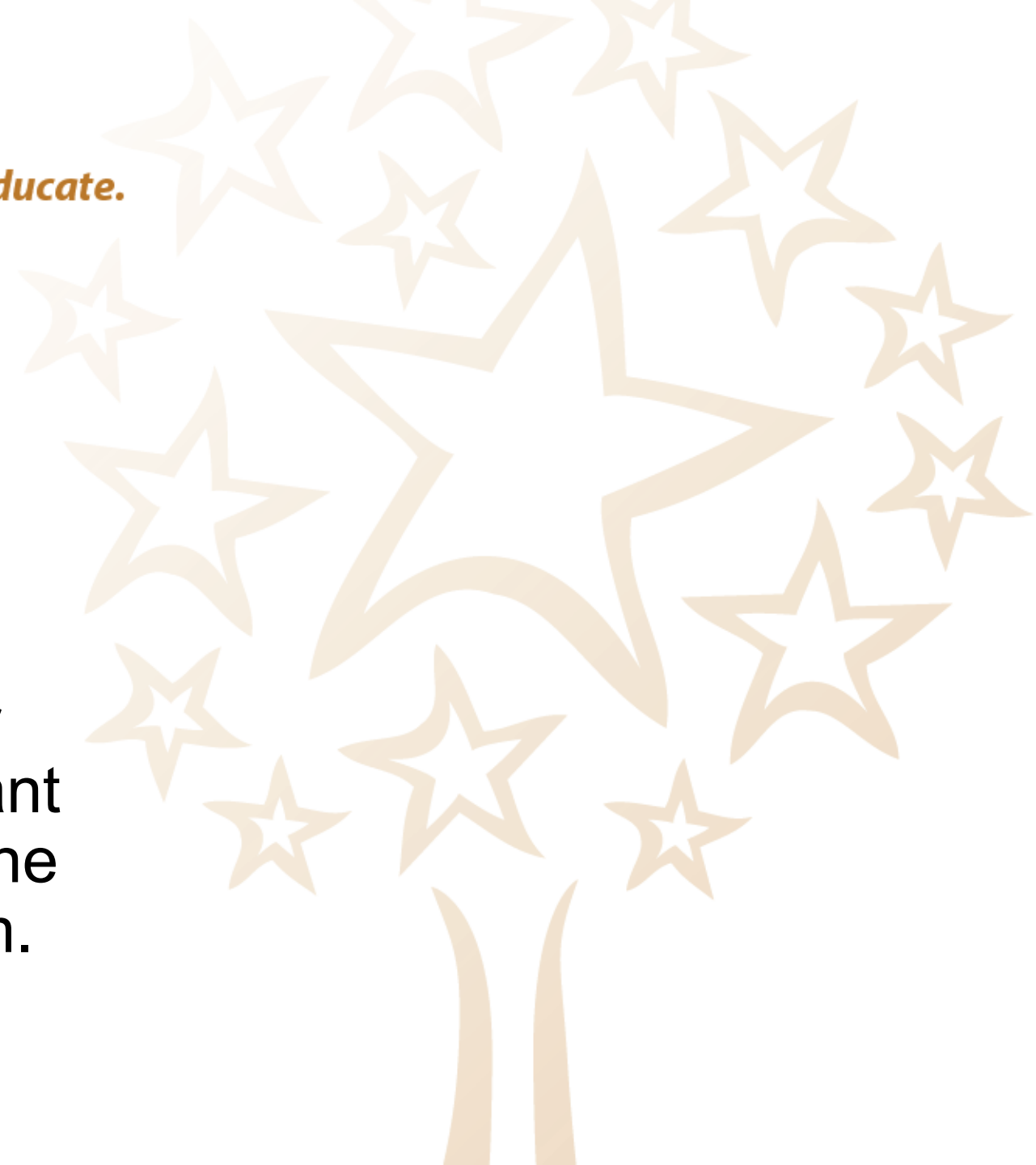
Lizette Salinas, Manager of Nurse Recruitment
915-521-7312

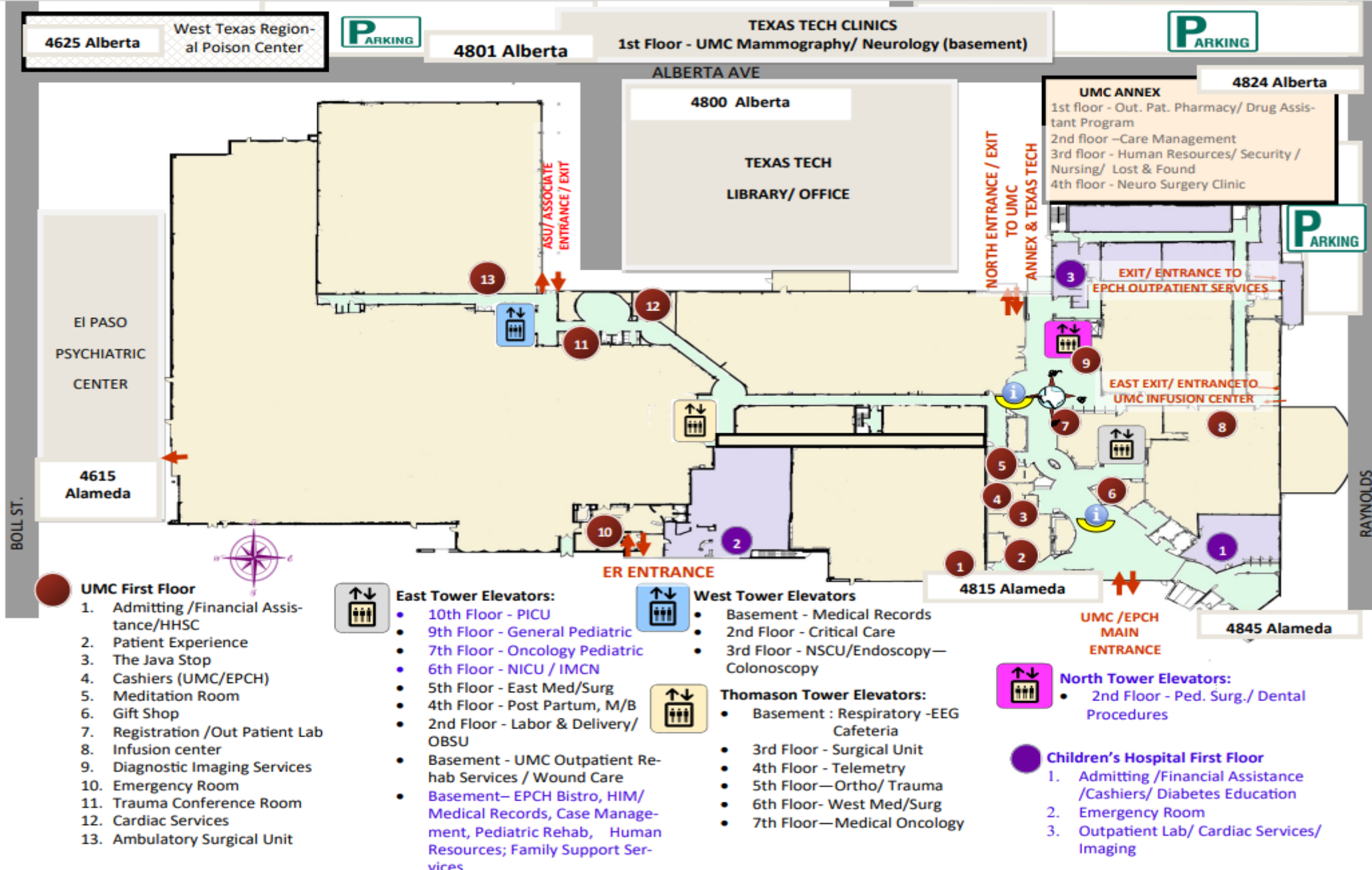
Conclusion

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!





Revised Date: 05/23

UMC & EPCH CAMPUS MAP